



# **WATSON ASSISTED LIVING**

## **General Information**

## **And Emergency Plan**

## **For Residents**

### **What You Need To Know: Important Information As Well As Instructions On What To Do In Case of Fire, Hurricane, Tornado, And Medical Emergencies**

The Courts	2003 Cobb Street
<i>Retirement Apartments</i>	
The Lodge	Farmville, VA 23901
<i>Assisted Living</i>	
The Manor	Phone (434) 392-6106
<i>Skilled and Long-Term Care</i>	
The Moore Center	Fax (434) 392-4736
<i>Comprehensive Rehabilitation</i>	

Email: [www.thewoodlandinc.com](http://www.thewoodlandinc.com)

**(PLEASE DO NOT REMOVE FROM ROOM)**

# WELCOME

Thank you for selecting Watson Assisted Living at The Woodland as your new home. We hope you will enjoy our assisted living facility and the many amenities and opportunities available to you. The residents and staff join in welcoming you, and look forward to having you as a member of our caring community.

This booklet has been prepared to help you become acquainted with life in The Woodland and the many features associated with it. Please read it carefully as soon as possible upon arrival and let us know if you have any questions. The staff is here to serve you and help assist in your stay with us.

Your room is your home and we respect your privacy and rights. We also welcome your suggestions or concerns on how we can better meet your needs and the needs of other residents.

## GENERAL INFORMATION

### Activities

You are invited to join other residents in the many opportunities to participate in our activity programs. There are musicals, devotions, exercises, and educational programs as well as movies, games and much more.

A monthly activities calendar is included with your bill and can also be found on the bulletin board.

A variety of outings are planned by the Activities Department. You may need your physician's approval in order to participate.

You can do as much or as little as you like when it comes to activities. Be sure to notify the Activity Department if you would like to see an activity included to meet your needs.

### Alcohol and Weapons

You are not allowed to keep alcohol or weapons of any kind in your room.

### Appliances

All appliances need to be approved by Maintenance prior to hook-up. Computers and small appliances such as a refrigerator may be kept in your room if space is available. You are responsible for defrosting your refrigerator. Please check with the Administrative Offices before purchasing items such as irons, electric fry pans, electric blankets, etc. as they may present a fire hazard. Extension cords are not allowed in your room. You must purchase a Power Strip when additional electrical lines are needed.

### Beauty/Barber Shop

A Beauty/Barber Shop is located in The Moore Center.

Contact the beautician at 392-6106, extension 248, to schedule your appointment and how often in the month to schedule your appointment: either weekly, bi-monthly, monthly, etc.

If you want an outside beautician to come in, contact The Woodland beautician to schedule a time when the Beauty/Barber Shop is available. Your beautician is responsible for cleaning the Beauty/Barber Shop.

A current list of prices is displayed in the Beauty/Barber Shop.

### **Business Office**

For any questions regarding your rent or other charges, please contact the Business Office located in The Moore Center. When paying your rent, please make checks payable to “The Woodland.” You can mail checks to The Woodland or leave them in the Business Office.

The Business Office has a record of all transactions regarding your room. The office hours are from 8:00 am to 4:30 pm Monday through Friday, or you can call 392-6106, ext 256, for business questions.

### **Complaints**

If you have a complaint or you believe your rights have been violated, you can file a complaint with any staff member or with a manager. Once the complaint has been registered it will be transferred to a Complaint Resolution Form describing the complaint, the action to be taken to resolve the complaint and recommendations or changes made to prevent a reoccurrence. The manager will then consult with you about how the complaint will be handled. If you feel the complaint has not been adequately addressed, you can contact Executive Director Karen Kitchen at 392-6106, extension 232. Additionally you may contact President/CEO Greg Cole at 392-6106, ext 254, or you may call him at home 392-6641. If you continue to feel that there is no resolve to your complaint, you can contact the local ombudsman Kay Young at 434-767-5588 or the Virginia Long-Term Care Ombudsman toll-free 1-800-995-6918. You may also refer to the “Resident Rights” section of this handout.

### **Dietary**

A weekly menu is posted on the bulletin boards. For special daily dietary requests you need to notify the Dietary Department at least one hour before mealtime. Special requests or alternatives are available with advance notice.

Meal times are:

Breakfast	7:30am to 9:00am
Lunch	Noon to 1:00pm
Dinner	5:00pm to 6:00pm

Guest meals are available and tickets may be purchased at the Administrative Offices. Advance notice is required for more than two (2) guests. Holiday guest meals incur special costs, which will be posted in advance.

No dishes or utensils may be taken out of the Dining Room or kept in your room.

### **Disclosure Statement**

You were given a Disclosure Statement during your orientation. For your convenience a Disclosure Statement is available for your perusal in the lobby area.

### **Housekeeping**

Housekeeping services are available on a daily basis for spot cleaning, trash pick-up and restocking toiletry supplies. Bed linens are furnished and changed every week or as needed. Your room will be thoroughly cleaned at least once a month or as needed. Housekeeping does not clean drawers or closets unless requested.

### **Laundry**

For a fee, The Woodland staff will do your laundry for you, or a family member or caregiver can do the laundry for you.

### Leaving The Building

When leaving the building you must sign-out and sign-in upon returning. Leaving includes by yourself, with family members or friends, or even for a short time. The Sign-out/Sign-in Book is located in the Nurse's Station. By signing out you let staff know you are away in case of an emergency.

The main entry door is locked at 8:00pm nightly. If you intend to be out later, you need to notify the Administrative Office and/or the Nurse's Station.

### Mail

Mail will be brought to your room on days that have U. S. Postal Service delivery. Outgoing mail can be left at the Nurse's Station. Outgoing mail is picked up Monday through Friday.

### Medications and Medical Supplies

If you wish to continue with your present pharmacy, you need to make arrangements to have your medications delivered and available for your medical needs. All medications delivered by family or friends must have proper labeling, be in approved containers and have a doctor's written order. The Woodland has access to a pharmacy on site that delivers daily. Charges are applied to your monthly bill. The Woodland pharmacy accepts most insurance plans. Should The Woodland identify that you are not able to supply your own medications, The Woodland will go through its own pharmacy, and the charges will then be applied to your monthly bill. You may also furnish medical supplies such as dressings, oxygen, Attends, etc. All supplies should have your name on the packaging. Should you run out, The Woodland will supply the medical item at a cost to you. See the Appendix for related ancillary charges.

All Over The Counter (OTC) medicines (examples are cough syrup, aspirin, creams you rub on joints for aches, etc.) need to be placed in your medicine cabinet or in your nightstand drawer. OTCs are to be kept out of sight. All OTCs are to be reported to the nursing staff and recorded in your chart for physician review.

### Notary

Notary services are available free of charge. Contact the Administrative Office should you need a Notary.

### Nursing

As a resident of The Woodland you are required to see your personal or attending physician on a regular basis, or at least every three (3) months if staff administers medications to you. These visits will be documented and placed in your chart, which is kept at the Nurse's Station.

The Nurse's Station needs to be notified any time you have an appointment with a physician, dentist or for outpatient services. Staff needs to fill out paperwork with a list of your medications and other information as required for your appointment.

Transports to physician and dentist offices as well as for outpatient services are available for a nominal charge which is listed in the Appendix. Please notify the Nurse's Station at least two days in advance to schedule transportation.

**NOTE:** If you choose to have a private sitter, the sitter must register with the Administrative Office before the sitter begins work.

### *Pets*

Visiting pets must be registered in the Administrative Offices before they will be allowed in the building. All pets must be on a leash, have current vaccinations on file, and know how to act around older people. Pets are not allowed in the Dining Room. Visiting pets should be limited to dogs and cats. Registration forms can be obtained from the Activities Department.

### *Privacy Practices*

Privacy Practices describes how health information about you may be used and disclosed, and how you can get access to this information. Review this section carefully. The confidentiality of your health information is important to us.

In accordance with the Health Insurance Portability and Accountability Act (HIPAA) and The Code of Federal Regulations (CFR), "The Woodland, Inc." is required to maintain the privacy of your health information. The Woodland is also required to give this Notice about our Privacy Practices, and our legal duties and your rights concerning your health information.

The Woodland collects and maintains records on your condition and health while you are a resident. Typically this record contains your symptoms, examinations and test results, treatment, medications, assessment, nurses notes, activities, dietary and care plan for future progress. This information, often referred to as your chart, health or medical record, serves as a:

- Basis for planning your care and treatment,
- Means of communication among the many health professionals who contribute to your care,
- Legal document describing the care you received,
- Means by which you or a third-party payer can verify that services billed were actually provided,
- Tool in educating health professionals,
- Source of data for medical records,
- Source of information for public health officials charged with improving the health of this Commonwealth and the nation,
- Source of data for Facility planning and marketing,
- Tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understand what is in your record and how your health information is used helps you to: ensure its accuracy; better understand who, what, when, where and why others may access your health information, and make more informed decisions when authorizing disclosure to others.

## **YOUR HEALTH INFORMATION RIGHTS**

Although your health record is the physical property of The Woodland, the information belongs to you. As provided in 45 CFR 164 in various sub-sections, you have the right to:

- Obtain a paper copy of this Notice of information practices upon request,
- Request a restriction on certain uses and disclosures of your information,
- Amend protected health information,
- Inspect and copy your health record.

**Your request must be in writing and state a reason for the request:**

- Obtain an accounting of disclosures of your health information,**
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken,**
- Request communication of your health information by alternative.**

### **FACILITY RESPONSIBILITIES**

**The Woodland is required to:**

- Maintain the privacy of your health information,**
- Provide you with a Notice as to The Woodland's legal duties and privacy practices with respect to information The Woodland collects and maintains about you,**
- Abide by the terms of this Notice,**
- Notify you if we are unable to agree to a requested restriction,**
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.**

### **EXAMPLES OF DISCLOSURES FOR TREATMENT, PAYMENT AND HEALTH OPERATIONS**

**The Woodland will use your health information for treatment. For example: information obtained by a physician, nurse, or member of your healthcare team will be recorded in your chart and used to determine the course of treatment that should work best for you. Members of your healthcare team will document in your chart their expectations. The healthcare team will then record the actions they took and their observations. In that way, your physician will know how you are responding to treatment. The Woodland will also provide your physician or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you should you be discharged from The Woodland or be transferred to another facility.**

**We will use your health information for payment. A bill may be sent to you or a third-party payer. The information on or accompanying a bill may include information that identifies you, as well as your diagnosis, procedures, transportation costs, and supplies used. Information gathered during your stay may be shared with your insurance company.**

**The Woodland will use your health information for regular health operations. Members of the staff, case managers or quality assurance members may use information in your chart to access the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the care and service The Woodland provides and may be shared as necessary to carry out treatment, payment and healthcare operations. Caregivers may have access to protected health information in their offices to assist in reviewing past treatment as it may affect treatment at the time.**

**Appointments: We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.**

**Business associates:** There maybe some services provided by The Woodland through contracts with business associates. When these services are contracted, we may disclose your health information to the business associate so that they can perform the job we have asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we will require the business associate to appropriately safeguard your information.

**Communication with Family:** Healthcare professionals using their best judgment may disclose to a family member, other relative, close personal friend or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care.

**Directory:** Unless you notify us that you object, we will use your name, location in The Woodland, general condition, and religious affiliation for directory purposes. This information may be provided to members of the clergy and, except for religious affiliation, to other people who ask for you by name.

**Food and Drug Administration (FDA):** We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacements.

**Funeral Directors:** We may disclose health information to funeral directors consistent with applicable laws to carry out their duties.

**Law Enforcement:** We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

**Organ Procurement Organizations:** Consistent with applicable laws, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.

**Public Health:** As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

**Research:** We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

**Worker's Compensation:** We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to worker's compensation or other similar programs established by law.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a Woodland member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or healthcare standards and are potentially endangering one or more residents, workers, or the public.

If you have questions and would like additional information you may contact the Executive Director or the President/CEO at (434) 392-6106, extension 254. If you believe your privacy rights have been violated you can file a complaint with the Administrator, or with the Office for Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the Administrator or the Office of Civil Rights. The address for the OCR is:

**Office of Civil Rights  
U.S. Department of Health and Human Services  
Public Ledger Building  
150 S. Independence Mall West, Suite 372  
Philadelphia, PA 19106-9111  
Phone (215) 861-4441  
Hotline (800) 368-1019**

**The Woodland reserves the right to change this Notice and to make the new provisions effective for all protected health information we maintain. If The Woodland's information practices change, we will mail a revised Notice to the address you have supplied us, or if you agree, we will e-mail the revised notice to you. The Woodland will not use or disclose your health information without authorization, except as described in this Notice. You will receive a copy of this Notice on your initial visit to The Woodland and when revisions are made. You may request an additional copy at any time.**

**This Notice does not constitute legal advice, and covers only federal, not Virginia, law in effect or proposed as of August 14, 2002. Subsequent law changes may require Notice revisions.**

#### **Resident Council Meetings**

**Your input is vital to the quality and care that we give. For that reason, Watson Assisted Living has a scheduled monthly Resident Council meeting. Please refer to the Activities Calendar for the day and time.**

#### **Resident Rights**

**During your orientation, you or your Power of Attorney (POA) read and signed the "Rights and Responsibilities of Residents of Assisted Living Facilities." Signing your "Rights" is a requirement of the Commonwealth of Virginia Department of Social Services, which license's facilities such as The Woodland. The Commonwealth additionally requires that staff review and have you or your POA review your "Rights" on an annual basis and sign a new form to acknowledge that it has been reviewed with you. A copy of the "Rights" is also posted within The Woodland. If you believe your "Rights" have been violated you can file a complaint with the Executive Director or President/CEO. You can also contact the regional licensing administrator for the Virginia Department of Social Services by telephone at 1-804-662-9050, or in writing to: Virginia Department of Social Services, 1604 Santa Rosa Road, Wythe Building, Suite 130, Richmond, VA 23229. You can also contact the Virginia Long-Term Care Ombudsman toll-free at 1-800-995-6918. You may also contact the Virginia Office for Protection and Advocacy toll-free at 1-800-552-3962 to report abuse, neglect, or rights violations, obtain information or advice on your rights, or request legal or advocacy services. There will be no retaliation for filing a complaint either with Administration or the Department of Social Services. A copy of your "Rights" is located in the Appendix.**

#### **Smoking**

**Watson Assisted Living provides a smoke-free environment. You are not allowed to smoke in your room or anywhere on the grounds.**

### Survey Results

Results of the most recent state inspection conducted by the Department of Social Services are available at the Nurse's Station. Please feel free to review the report at your leisure. Should you have any questions about the survey, contact the Executive Director for an appointment to address any questions. Please be sure to return the report to its original location when your review is completed.

### Telephone and Utilities

All utilities are included at Watson Assisted Living with the exception of the telephone. You need to contact Century Link (dial 1-800-788-3500) and speak with a CenturyLink representative. If you are from the immediate area it may be possible to have your local phone number transferred to your room. If you need assistance contact the Administrative Office. CenturyLink will bill directly to your room. You may make or receive phone calls in the Administrative Office or the Nurse's Station. A fee will be assessed for long distance calls.

### Television

Your cable television is free for basic operation and covers many channels. All televisions and radios are to be turned off or the volume lowered by 10:00pm so as not to disturb your fellow residents.

### Therapy

As a new resident you may be screened by our Therapy Department to determine if you would benefit from their services to increase your level of independence with ambulation, dressing, feeding, adaptive/assistive equipment, wheelchair seating evaluations, strengthening, etc. Therapy strives to promote the highest quality of life and ensure that residents are living at their highest functional level. If Therapy and your physician feel that you benefit from a Therapy service, you will be contacted for approval.

Many residents take advantage of our Therapy services. Our goal is to help resident's whose lives have been disrupted by physical injury, accident, disease or the aging process to become as independent and safe as possible. Therapy services available to you include: Physical Therapy, Occupational Therapy and Speech Language Pathology.

### Valuables

Please be advised that you should not keep valuables in your room. Valuables include cash, checkbooks, credit cards, jewelry, and souvenirs with a value of over \$20. Should you want to keep cash or valuables in your room, you should secure them in a personal lock-box. You may have valuables locked in the Administrative Office. Items locked in the Administrative Office are available during normal business hours. Please see that all of your valuables are insured and locked in a safe place. The Woodland is not responsible for any items that are misplaced or lost.

Revised 1/1/10

## **EMERGENCY PLAN FOR FIRES**

**Your safety is very important to us, but you share in that responsibility as well. It is important that you know what to do if a fire should start in your room or another part of The Woodland.**

**When you hear the smoke/fire alarm, proceed to your door. Do not panic. The alarm also rings at the Nurse's Station. Help is on the way. Know the Evacuation Route. The Evacuation Route for each room is posted by the Nurse's Station. If you are unsure about your Evacuation Route ask a staff member.**

**Rooms 112 through 123 will exit through the doorway between rooms 120 and 121. If you are in another part of the building and are told to evacuate, proceed to the nearest Exit sign. Staff will assist you in evacuating the building.**

**Do not re-enter the building until the Farmville Fire Department, or the Executive Director or President/CEO, or a designee gives you permission to do so. Should you be unable to re-enter, The Woodland will provide you with accommodations until the building is repaired. Remember that the contents of your room are your personal affects and are subject to your own home owners or renters insurance policy. This policy should also cover all personal items lost by other disasters. The Woodland is only responsible for the building structure and any furniture that belongs to the facility.**

## **HURRICANES AND TORNADOS**

**Information on developing severe weather conditions will be broadcast by the National Weather Service over the radio and television.**

**A hurricane is a low-pressure system with minimum sustained winds of 75 miles-per-hour. The National Weather Service will classify the intensity of the hurricane by rating it from a Level 1 (the lowest) to a Level 5 (the highest and very unusual.)**

**Hurricane Watch – Issued when hurricane conditions are a possibility in the next 36 to 72 hours.**

**Hurricane Warning – Issued when hurricane force winds are expected in the next 24 to 36 hours.**

**When a Hurricane Watch is issued:**

- Stay inside until the watch is lifted**
- Monitor radio and television for further information**
- Remove all items on the windowsills**

**When a Hurricane Warning is issued:**

- Continue to monitor radio and television for further information**
- Unplug all unnecessary electrical appliances**
- Close blinds and stay away from windows**

**A tornado is normally associated with a line of heavy thunderstorms, but may occur at any time.**

**Tornado Watch – Issued when weather conditions exist wherein a tornado may develop.**

**Tornado Warning – Issued when there is an actual tornado in the immediate area. Warnings are followed by the location and direction of the tornado.**

**When a Tornado Watch is issued:**

- Stay inside until the Watch is lifted
- Monitor radio and television for further information
- Remove all items on the windowsills
- Close blinds and drapes

**When a Tornado Warning is issued:**

- Monitor radio and television for further information
- Stay away from all windows
- Move to a doorway or to the bath room

**If a tornado hits:**

- Try and remain calm
- Cover head with hands and blanket

**After the tornado:**

- Check for any injuries
- If you are trapped, remain calm. Someone will be with you shortly

## **OTHER NATURAL DISASTERS**

There are many other types of natural disasters that could affect you. These could include flooding, and earthquakes.

In the case of flooding, when waters threaten The Woodland, you will be moved to Brookview Lodge or The Moore Center. If both are affected, Town officials will be notified for an evacuation route and housing.

## **MEDICAL EMERGENCIES**

If you have a medical problem, please use the Emergency Call System which connects to the Nurse's Station. When the system is activated, a Nurse or Aide will then come to your room to lend assistance.

The staff is trained to assist you. Just ask if you need help or have any questions.

All of your medical and emergency information is kept at the Nurse's Station. You need to let us know if there is a change in your physician, prescriptions, relative or emergency contact address or telephone number, and any other important information.

Revised 1/1/10

**Ancillary Rates  
Effective 1/1/09**

**Supplies**

Accucheck	\$2.00	Foam Boots	\$22.00
Attends pk of 12	\$16.00	Heal Protector	\$9.00
Bacitracin	\$2.50	Isolation, per day	\$20.00
Basin	\$5.00	Infectious Waste, Box	\$50.00
Bed Pan	\$5.00	Isolation Laundry Bags	\$4.00
Betadine	\$3.50	Nasal Cannula/Mask	\$8.00
Catheter	\$6.00	Oxygen, Bottle	\$14.00
Catheter Cover	\$11.00	Oxygen, Concentrator/hour	\$2.00
Cath Leg Cover	\$4.00	Oxygen Concentrator/mouth	\$80.00
Catheter Kit	\$18.00	Provon Perineal Ointment	\$8.00
Colostomy Wafers	\$37.00	Razor, pack	\$4.00
Colostomy Pouches	\$42.00	TB Test (PPD)	\$12.00
Drainage Bag	\$12.00	Tegaderm, Small	\$5.00
Dressing, Small	\$4.00	Tegaderm, Large	\$9.00
Dressing, Medium	\$6.00	Tegaderm, Extra Large	\$11.00
Dressing, Large	\$8.00	Underpads (Chux) pk of 5	\$7.50
Egg Crate Mattress	\$36.00	Urinal	\$5.00
Ensure (can)	\$1.75	Underpants(pull-ups)pk of 20	\$27.00
Ensure / Protein (can)	\$2.15		

**Laundry**

Monthly \$40.00

**Professional Therapy**

Physical Therapy \$35.00 per unit  
Occupational Therapy \$35.00 per unit  
Speech Therapy \$50.00 per unit

**Restorative Therapy**

Per 15 minutes time \$6.50

**Specialty Bed**

Low Air Loss \$10.00 per day

**Specialty Equipment**

High-back Wheelchair \$1.00 per day

**Transportation**

	<b>(Local round Trip)</b>	<b>(Non- Local)</b>
Wheelchair Van	\$50.00 includes half-hour Aide time	\$2.00 per mile
Station Wagon	\$20.00 includes half-hour Aide time	\$1.25 per mile
Hourly Aide Fee	\$18.00	\$18.00

**This is not an all-inclusive list. Items not listed will be charged according to cost plus mark-up.**

**Prices effective 1/1/09 and are subject to change without notice.**

Revised 1/1/09

## RIGHTS AND RESPONSIBILITIES OF RESIDENTS OF ASSISTED LIVING FACILITIES

Code of Virginia § 63.2-1808. Rights and responsibilities of residents of assisted living facilities; certification of licensure.

- A. Any resident of an assisted living facility has the rights and responsibilities enumerated in this section. The operator or administrator of an assisted living facility shall establish written policies and procedures to ensure that, at the minimum, each person who becomes a resident of the assisted living facility:
1. Is fully informed, prior to or at the time of admission and during the resident's stay, of his rights and of all rules and expectations governing the resident's conduct, responsibilities, and the terms of the admission agreement; evidence of this shall be the resident's written acknowledgement of having been so informed, which shall be filed in his record;
  2. Is fully informed, prior to or at the time of admission and during the resident's stay, of services available in the facility and of any related charges; this shall be reflected by the resident's signature on a current resident's agreement retained in the resident's file;
  3. Unless a committee or conservator has been appointed, is free to manage his personal finances and funds regardless of source; is entitled to access to personal account statements reflecting financial transactions made on his behalf by the facility; and is given at least a quarterly accounting of financial transactions made on his behalf when a written delegation of responsibility to manage his financial affairs is made to the facility for any period of time in conformance with state law;
  4. Is afforded confidential treatment of his personal affairs and records and may approve or refuse their release to any individual outside the facility except as otherwise provided in law and except in case of his transfer to another care-giving facility;
  5. Is transferred or discharged only when provided with a statement of reasons, or for nonpayment for his stay, and is given reasonable advance notice; upon notice of discharge or upon giving reasonable advance notice of his desire to move, shall be afforded reasonable assistance to ensure an orderly transfer or discharge; such actions shall be documented in his record;
  6. In the event a medical condition should arise while he is residing in the facility, is afforded the opportunity to participate in the planning of his program of care and medical treatment at the facility and the right to refuse treatment;
  7. Is not required to perform services for the facility except as voluntarily contracted pursuant to a voluntary agreement for services that states the terms of consideration or remuneration and is documented in writing and retained in his record;
  8. Is free to select health care services from reasonably available resources;

9. Is free to refuse to participate in human subject experimentation or to be party to research in which his identity may be ascertained;
10. Is free from mental, emotional, physical, sexual, and economic abuse or exploitation; is free from forced isolation, threats or other degrading or demeaning acts against him; and his known needs are not neglected or ignored by personnel of the facility;
11. Is treated with courtesy, respect, and consideration as a person of worth, sensitivity, and dignity;
12. Is encouraged, and informed of appropriate means as necessary, throughout the period of stay to exercise his rights as a resident and as a citizen; to this end, he is free to voice grievances and recommend changes in policies and services, free of coercion, discrimination, threats or reprisal;
13. Is permitted to retain and use his personal clothing and possessions as space permits unless to do so would infringe upon rights of other residents;
14. Is encouraged to function at his highest mental, emotional, physical and social potential;
15. Is free of physical or mechanical restraint except in the following situations and with appropriate safeguards:
  - a. As necessary for the facility to respond to unmanageable behavior in an emergency situation which threatens the immediate safety of the resident or others;
  - b. As medically necessary, as authorized in writing by a physician, to provide physical support to a weakened resident;
16. Is free of prescription drugs except where medically necessary, specifically prescribed, and supervised by the attending physician, physician assistant, or nurse practitioner;
17. Is accorded respect for ordinary privacy in every aspect of daily living, including but limited to the following:
  - a. In the care of his personal needs except as assistance may be needed;
  - b. In any medical examination or health-related consultations the resident may have at the facility;
  - c. In communications, in writing or by telephone;
  - d. During visitations with other persons;
  - e. In the resident's room or portion thereof; residents shall be permitted to have guests or other residents in their rooms unless to do so would infringe upon the rights of other residents; staff may not enter a resident's room without making their presence known except in an emergency or in accordance with safety oversight requirements included in regulations of the Board;

- f. In visits with his spouse; if both are residents of the facility they are permitted but not required to share a room unless otherwise provided in the residents' agreements;
  - 18. Is permitted to meet with and participate in activities of social, religious, and community groups at his discretion unless medically contraindicated as documented by his physician in his medical record; and
  - 19. Is full informed, as evidenced by the written acknowledgement of the resident or his legal representative, prior to or at the time of admission and during his stay, that he should exercise whatever due diligence he deems necessary with respect to information on any sex offenders registered pursuant to Chapter 9 (9.1-900 et. seq.) of Title 9.1 including how to obtain such information. Upon request, the assisted living facility shall assist the resident, prospective resident, or legal representative of the resident or prospective resident in accessing this information and provide the resident, prospective resident, or the legal representative of the resident or prospective resident with printed copies of the requested information.
- B. If the resident is unable to fully understand and exercise the rights and responsibilities contained in this section, the facility shall require that a responsible individual, of the resident's choice when possible, designated in writing in the resident's record, be made aware of each item in this section and the decisions that affect the resident or relate to specific items in this section; a resident shall be assumed capable of understanding and exercising these rights unless a physician determines otherwise and documents the reasons for such determination in the resident's record.
  - C. The rights and responsibilities of residents shall be printed in at least 12-point type and posted conspicuously in a public place in all assisted living facilities. The facility shall also post the name and telephone number of the regional licensing supervisor of the Department, the Adult Protective Services' toll-free telephone number, as well as the toll-free telephone number or the Virginia Long-Term Care Ombudsman Program, any sub-state ombudsman program serving the area, and the toll-free number of the Virginia Office for Protection and Advocacy.
  - D. The facility shall make its policies and procedures for implementing this section available and accessible to residents, relatives, agencies, and the general public.
  - E. The provisions of this section shall not be construed to restrict or abridge any right which any resident has under law.
  - F. Each facility shall provide appropriate staff training to implement each resident's rights included in this section.
  - G. The Board shall adopt regulations as necessary to carry out the full intent of this section.
  - H. It shall be the responsibility of the Commissioner to ensure that the provisions of this section are observed and implemented by assisted living facilities as a condition to the issuance, renewal, or continuation of the license required by this article.

In Case of Questions or Concerns, You May Call:

Regional Licensing Administrator, DeNyce Bonaparte, Central Regional Office  
Virginia Department of Social Services: (804) 662-9764, (804) 662-9743  
Address: 1604 Santa Rosa Road, Wythe Bldg., Suite 130, Richmond, VA 23229-5008  
Toll-Free Number for the Virginia Long-Term Care Ombudsman: 1-800-552-3402  
Local Ombudsman: Kay Young  
Address: P.O. Box 398, Burkeville, VA 23922  
Telephone: (434) 767-5588  
Toll-Free Number for the Virginia Office Protection and Advocacy: 1-800-552-3962  
Toll-Free Number for Adult Protective Services: 1-888-832-3858

032-05-0021-6-eng (7/07)

Revised 7/1/10



# **BROOKVIEW LODGE**

## **General Information**

## **And Emergency Plan**

## **For Residents**

**What You Need To Know:  
Important Information As Well As  
Instructions On What To Do  
In Case of Fire, Hurricane, Tornado,  
And Medical Emergencies**

The Courts	2005 Cobb Street
<i>Retirement Apartments</i>	
Brookview Lodge	Farmville, VA 23901
<i>Assisted Living</i>	
Holly Manor	Phone (434) 392-6106
<i>Skilled and Long-Term Care</i>	
The Moore Center	Fax (434) 392-4736
<i>Comprehensive Rehabilitation</i>	

Website: [www.thewoodlandinc.com](http://www.thewoodlandinc.com)

**(PLEASE DO NOT REMOVE FROM ROOM)**

# WELCOME

Thank you for selecting Brookview Lodge as your new home. We hope you will enjoy our assisted living facility and the variety of amenities and opportunities available to you. The residents and staff join in welcoming you, and look forward to having you as a member of our caring community.

This booklet has been prepared to help you become acquainted with life at Brookview Lodge and the many features associated with it. Please read it carefully as soon as possible upon arrival and let us know if you have any questions. The staff is here to serve you and help assist in your stay with us.

Your room is your home and we respect your privacy and rights. We also welcome your suggestions or concerns on how we can better meet your needs and the needs of other residents.

## GENERAL INFORMATION

### Activities

You are invited to join other residents in the many opportunities to participate in Brookview Lodge's activity programs. There are musicals, devotions, exercises, and educational programs as well as movies, games and much more.

A monthly activities calendar is included with your bill and can also be found on the bulletin boards. A weekly calendar of events is also posted on the bulletin boards for your convenience and shows updated activities.

A variety of outings are planned by the Activities Department. You may need your physician's approval in order to participate.

You can do as much or as little as you like when it comes to activities. Be sure to notify the Activities Department if you would like to see an activity included to meet your needs.

### Alcohol and Weapons

You are not allowed to keep alcohol or weapons of any kind in your room.

### Appliances

All appliances need to be approved by Maintenance prior to hook-up. Computers and small appliances such as a refrigerator may be kept in your room if space is available. You are responsible for defrosting your refrigerator. Please check with the Administrative Offices before purchasing items such as irons, electric fry pans, electric blankets, etc. as they may present a fire hazard. Extension cords are not allowed in your room. You must purchase a surge protector when additional electrical lines are needed.

### Beauty/Barber Shop

A Beauty/Barber Shop is located on the second floor of Brookview Lodge. Contact the beautician at 392-6106, extension 236, to schedule your appointment and how often in the month to schedule your appointments: weekly, bi-monthly, monthly, etc.

If you want an outside beautician to come in, contact the beautician to schedule a time when the Beauty/Barber Shop is available. Your beautician is responsible for cleaning the Beauty/Barber Shop.

A current list of prices is displayed in the Beauty/Barber Shop.

### Business Office

For any questions regarding your rent or other charges, please contact the Business Office in The Moore Center. When paying your rent, please make checks payable to “The Woodland.” You can mail or deliver checks to The Woodland.

The Business Office has a record of all transactions regarding your room. The office hours are from 8:00am to 4:30pm Monday through Friday, or you can call 392-4119, ext 256, for business questions.

### Complaints

If you have a complaint or you believe your rights have been violated, you can file a complaint with any staff member or with a manager. Once the complaint has been registered it will be transferred to a Complaint Resolution Form describing the complaint, the action to be taken to resolve the complaint and recommendations or changes made to prevent a reoccurrence. The manager will then consult with you about how the complaint will be handled. If you feel the complaint has not been adequately addressed, you can contact Executive Director Karen Kitchen at 392-4119, extension 232. Additionally you may contact President/CEO Greg Cole at 392-6106, ext 254, or you may call him at home 392-6641. If you continue to feel that there is no resolve to your complaint, you can contact the local ombudsman Kay Young at 434-767-5588 or the Virginia Long-Term Care Ombudsman toll-free 1-800-995-6918. You may also refer to the “Resident Rights” section of this handout.

### Dietary

A weekly menu is posted on the bulletin boards. For special daily dietary requests you need to notify the Dietary Department at least one hour before mealtime. Special requests or alternatives are available with advance notice.

Meal times are:

Breakfast	7:30am to 9:00am
Lunch	11:30am to 1:00pm
Dinner	4:45pm to 6:30pm

Guest meals are available and tickets may be purchased at the Administrative Offices. Advanced notice is required for more than two (2) guests. Holiday guest meals incur special costs, which will be posted in advance. No dishes or utensils may be taken out of the Dining Room or kept in your room.

### Disclosure Statement

You were given a Disclosure Statement during your orientation. For your convenience a Disclosure Statement is available for your perusal in the main lobby.

### Housekeeping

Housekeeping services are available on a daily basis for spot cleaning, trash pick-up and restocking toiletry supplies. Bed linens are furnished and changed every week or as needed providing you are using a twin bed. Otherwise you will need to furnish your bed linens. Your room will be thoroughly cleaned at least once a month or as needed. Housekeeping does not clean drawers or closets unless requested.

### Laundry

You are encouraged to do your own laundry. Coin operated washers and dryers are centrally located throughout Brookview Lodge. For a fee, the Brookview Lodge staff will do your laundry for you. Ask about the different options available to you.

### Leaving The Building

When leaving the building you are required sign-out and sign-in upon returning. Leaving includes by yourself, with family members or friends, or even for a short time. The Sign-out/Sign-in Book is located in the Main Lobby entrance. By signing out you let staff know you are away in case of an emergency.

The entry doors on either side of the main entrance are locked at approximately 4:00pm daily. The main entrance is locked at 11:00pm. If you intend to be out later, you need to notify the Administrative Office and/or the Nurse's Station.

### Mail

Mail will be brought to your room on days that have U. S. Postal Service delivery. For your convenience a mailbox is located at the front entrance to the Dining Room. Outgoing mail is picked up Monday through Friday at 4:00pm.

### Medications and Medical Supplies

If you wish to continue with your present pharmacy, you need to make arrangements to have your medications delivered and available for your medical needs. All medications that are delivered by family or friends must have proper labeling, be in approved containers and have a doctor's written order. The Woodland has its own pharmacy on site that delivers daily. Charges are applied to your monthly bill. The Woodland pharmacy accepts most insurance plans. Should Brookview Lodge identify that you are not able to supply your own medications, Brookview Lodge will order through The Woodland pharmacy, and the charges will then be applied to your monthly bill. You may also furnish medical supplies such as dressings, oxygen, Attends, etc. All supplies should have your name on the packaging. Should you run out, Brookview Lodge will supply the medical item at a cost to you. See the Appendix for related ancillary charges.

All Over The Counter (OTC) medicines (examples are cough syrup, aspirin, creams you rub on joints for aches, etc.) need to be placed in your medicine cabinet or in your nightstand drawer. OTCs are to be kept out of sight. All OTCs are to be reported to the nursing staff and recorded in your chart for physician review.

### Notary

Notary services are available free of charge. Contact the Administrative Office should you need a Notary.

### Nursing

As a resident of Brookview Lodge you are required to see your personal or attending physician on a regular basis, or at least every three (3) months if staff administers medications to you. These visits will be documented and placed in your chart, which is kept at the Nurse's Station.

The Nurse's Station needs to be notified any time you have an appointment with a physician, dentist or for outpatient services. Staff needs to fill out paperwork with a list of your medications for your appointment.

Transports to physician and dentist offices as well as for outpatient services are available for a nominal charge which is listed in the Appendix. Please notify the Nurse's Station at least one week in advance to schedule transportation.

**NOTE:** If you choose to have a private sitter, the sitter must register with the Administrative Office before the sitter begins work.

### *Pets*

You are not allowed to keep pets. Visiting pets must be registered in the Administrative Offices before they will be allowed in the building. All pets must be on a leash, have current vaccinations on file, come during pet visiting hours (10:00-11:30 am, 1:30-4:30 pm, & 6:30-9:00 pm), and know how to act around older people. Pets are not allowed in the Dining Room or Private Dining Room. Visiting pets should be limited to dogs and cats. Registration forms can be obtained from the Administrative Office.

### *Private Dining Room*

The Private Dining Room is available for dining guests or for special occasions. You can reserve the room by contacting the Administrative Office.

### *Privacy Practices*

Privacy Practices describes how health information about you may be used and disclosed, and how you can get access to this information. Review this section carefully. The confidentiality of your health information is important to us.

In accordance with the Health Insurance Portability and Accountability Act (HIPAA) and The Code of Federal Regulations (CFR), The Woodland, Inc., the "Facility", is required to maintain the privacy of your health information. The Facility is also required to give this notice about our Privacy Practices, and our legal duties and your rights concerning your health information.

The Facility collects and maintains records on your condition and health while you are a resident. Typically this record contains your symptoms, examinations and test results, treatment, medications, assessment, nurses notes, activities, dietary and care plan for future progress. This information, often referred to as your chart, health or medical record, serves as a:

- Basis for planning your care and treatment,
- Means of communication among the many health professionals who contribute to your care,
- Legal document describing the care you received,
- Means by which you or a third-party payer can verify that services billed were actually provided,
- Tool in educating health professionals,
- Source of data for medical records,
- Source of information for public health officials charged with improving the health of this Commonwealth and the nation,
- Source of data for Facility planning and marketing,
- Tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understand what is in your health record and how this information is used helps you to: ensure its accuracy; better understand who, what, when, where and why others may access your health information, and make more informed decisions when authorizing disclosure to others.

## **YOUR HEALTH INFORMATION RIGHTS**

Although your health record is the physical property of The Woodland, Inc., the information belongs to you. As provided in 45 CFR 164 in various sub-sections, you have the right to:

- Request a restriction on certain uses and disclosures of your information,**
- Amend protected health information,**
- Inspect and copy your health record.**

Your request must be in writing and state a reason for the request:

- Obtain an accounting of disclosures of your health information,**
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken,**
- Request communication of your health information by alternative means or alternative locations.**

## **FACILITY RESPONSIBILITIES**

The Facility is required to:

- Maintain the privacy of your health records,**
- Provide you with a notice as to the Facility's legal duties and Privacy Practices with respect to information the Facility collects and maintains about you,**
- Abide by the terms of the Privacy Practices,**
- Notify you if we are unable to agree to a requested restriction,**
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.**

## **EXAMPLES OF DISCLOSURES FOR TREATMENT, PAYMENT AND HEALTH OPERATIONS**

The Facility will use your health records for treatment. For example: information obtained by a physician, nurse, or member of your healthcare team will be recorded in your chart and used to determine the course of treatment that should work best for you. Member of your healthcare team will document in your chart their expectations. Members of your healthcare team will then record the actions they took and their observations. In that way, your physician will know how you are responding to treatment. We will also provide your physician or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you should you be discharged from this Facility or be transferred to another facility.

We will use your health information for payment. A bill may be sent to you or a third-party payer. The information on or accompanying bill may include information that identifies you, as well as your diagnosis, procedures, transportation costs, and supplies used. Information gathered during your stay may be shared with your insurance company.

The Facility will use your health information for regular health operations. Members of the staff, case managers or quality assurance members may use information in your chart to access the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the

quality and effectiveness of the care and service the Facility provides and may be shared as necessary to carry out treatment, payment and healthcare operations. Caregivers may have access to protected health information in their offices to assist in reviewing past treatment as it may affect treatment at the time.

**Appointments:** We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

**Business Associates:** There maybe some services provided by our Facility through contracts with business associates. When these services are contracted, we may disclose your health information to the business associate so that they can perform the job we have asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we will require the business associate to appropriately safeguard your information.

**Communication with Family:** Healthcare professionals using their best judgment may disclose to a family member, other relative, close personal friend or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care.

**Directory:** Unless you notify us that you object, we will use your name, location in the Facility, general condition, and religious affiliation for directory purposes. This information may be provided to members of the clergy and, except for religious affiliation, to other people who ask for you by name.

**Food and Drug Administration (FDA):** We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacements.

**Funeral Directors:** We may disclose health information to funeral directors consistent with applicable laws to carry out their duties.

**Law Enforcement:** We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

**Organ Procurement Organizations:** Consistent with applicable laws, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.

**Public Health:** As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

**Research:** We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

**Worker's Compensation:** We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to worker's compensation or other similar programs established by law.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a Facility member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or healthcare standards and are potentially endangering one or more residents, workers, or the public.

If you have questions and would like additional information you may contact the Executive Director or the President/CEO at (434) 392-6106.

If you believe your privacy rights have been violated you can file a complaint with the Executive Director, or with the Office for Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either Administration or the Office of Civil Rights. The address for the OCR is:

Office of Civil Rights  
U.S. Department of Health and Human Services  
Public Ledger Building  
150 S. Independence Mall West, Suite 372  
Philadelphia, PA 19106-9111  
Phone (215) 861-4441  
Hotline (800) 368-1019

The Facility reserves the right to change the Privacy Practices and to make the new provisions effective for all protected health information the Facility maintains. If the Facility's information practices change, we will mail a revised Privacy Practices to the address you have supplied us, or if you agree, we will e-mail the revised notice to you. The Facility will not use or disclose your health information without authorization, except as described in this Privacy Practices.

This Privacy Practices does not constitute legal advice, and covers only federal, not Virginia, law in effect or proposed as of August 14, 2002. Subsequent law changes may require Privacy Practices revisions.

#### Resident Meetings

Your input is vital to the quality and care that we give. For that reason, Brookview Lodge has a scheduled monthly Resident Council meeting. Please refer to the Activities Calendar for the day and time. Join with fellow residents in making your stay with us the best it can be.

#### Resident Rights

During your orientation, you or your Power of Attorney (POA) read and signed the "Rights and Responsibilities of Residents of Assisted Living Facilities." Signing your "Rights" is a requirement of the Commonwealth of Virginia Department of Social Services, which license's facilities such as The Lodge. The Commonwealth additionally requires that staff review and have you or your POA review your "Rights" on an annual basis and sign a new form to acknowledge that it has been reviewed with you. A copy of the "Rights" is also posted within the Facility. If you believe your "Rights" have been violated you can file a complaint with the Executive Director or President/CEO. You can also contact the regional licensing administrator for the Virginia Department of Social Services by telephone at 1-804-662-9050, or in writing to: Virginia Department of Social Services, 1604 Santa Rosa Road, Wythe Building, Suite 130, Richmond, VA 23229. You can also contact the Virginia Long-Term Care Ombudsman toll-free at 1-800-995-6918. You may also contact the Virginia Office for Protection and Advocacy toll-free at 1-800-552-3962 to report abuse, neglect, or rights violations, obtain information or advice on your rights, or request legal or advocacy services. There will be no retaliation for filing a complaint with Administration or the Department of Social Services. A copy of your "Rights" can be found in the Appendix.

### Shopping

The Lodge provides a scheduled weekly shopping trip to stores in Farmville for you and other residents who are unable to drive, or don't have family or friends close by to do your shopping. Shopping trips are a good time to purchase medications and refills from your pharmacy or to purchase personal items. Brookview Lodge staff is not allowed to pick-up prescriptions or shop for you.

### Smoking

Brookview Lodge is a tobacco / smoke-free facility.

### Survey Results

Results of the most recent state inspection conducted by the Department of Social Services are available at the Nurse's Station. Please feel free to review the report at your leisure. Should you have any questions about the survey, contact the Executive Director for an appointment to address any questions. Please be sure to return the report to its original location when your review is completed.

### Telephone and Utilities

All utilities are included at Brookview Lodge with the exception of the telephone. You need to contact CenturyLink (dial 1-800-788-3500) and speak with a CenturyLink representative. If you are from the immediate area it may be possible to have your local phone number transferred to your room. If you need assistance contact the Administrative Office. CenturyLink will bill directly to your room. You may make or receive phone calls in the Administrative Office or the Nurse's Station. A fee will be assessed for long distance calls.

### Television

Your television cable is free for basic operation and covers over 60 channels. Residents must provide their own television and stand. If you are in a semi-private room you may have to share your television or your roommate's television. Should you want additional channels or premium channels such as HBO, please contact Shentel (1-877-743-8538) for information and related charges. All televisions and radios are to be turned off or the volume lowered by 10:00pm so as not to disturb your fellow residents.

### Therapy

As a new resident you may be screened by our Therapy Department to determine if you would benefit from their services to increase your level of independence with ambulation, dressing, feeding, adaptive/assistive equipment, wheelchair seating evaluations, strengthening, etc. Therapy strives to promote the highest quality of life and ensure that residents are living at their highest functional level. If Therapy and your physician feel that you benefit from a Therapy service, you will be contacted for approval.

Many residents take advantage of our Therapy services. Our goal is to help resident's whose lives have been disrupted by physical injury, accident, disease or the aging process to become as independent and safe as possible. Therapy services available to you include: Physical Therapy, Occupational Therapy, Speech Language Pathology, Aquatic Therapy, and Wellness Programs. Programs are tailored to your specific needs and abilities.

### Valuables

Please be advised that you should not keep valuables in your room. Valuables include cash, checkbooks, credit cards, jewelry, and souvenirs with a value of over \$20. Should you want to keep cash or valuables in your room, you should secure them in a personal lock-box. You may have valuables locked in the Administrative Office. Items locked in the Administrative Office are available during normal business hours. Please see that all of your valuables are insured and locked in a safe place. Brookview Lodge is not responsible for any items that are misplaced or lost. Please report any missing personal items to the Administrative Offices as soon as possible so that attempts can be made to recover the items and prevent or discourage future losses.

Revised 1/1/09

## **EMERGENCY PLAN FOR FIRES**

Your safety is very important to us, but you share in that responsibility as well. It is important that you know what to do if a fire should start in your room or another part of Brookview Lodge.

When you hear the smoke/fire alarm, proceed to your door. Do not panic. The alarm also rings at the Nurse's Station. Help is on the way. Know the Evacuation Route. For rooms 101 through 151, your evacuation route is posted in the front of the Nurse's Station. For rooms 161 through 180, your evacuation route is posted by the elevator downstairs. For rooms 201 through 221, your evacuation route is posted by the elevator upstairs. It is very important that you know your evacuation route. If you are in another part of the building and are told to evacuate, proceed to the nearest Exit sign. Staff will assist you in evacuating the building.

Do not re-enter the building until the Farmville Fire Department, or the Executive Director or a designee gives you permission to do so. Should you be unable to re-enter, Brookview Lodge will provide you with accommodations until the building is repaired. Remember that the contents of your room are your personal affects and are subject to your own home-owners or renters insurance policy. This policy should also cover all personal items lost by other disasters. Brookview Lodge is only responsible for the building structure and any furniture that belongs to the facility.

## **HURRICANES AND TORNADOS**

Information on developing severe weather conditions will be broadcast by the National Weather Service over the radio and television.

A hurricane is a low-pressure system with minimum sustained winds of 75 miles-per-hour. The National Weather Service will classify the intensity of the hurricane by rating it from a Level 1 (the lowest) to a Level 5 (the highest and very unusual.)

**Hurricane Watch – Issued when hurricane conditions are a possibility in the next 24 to 36 hours.**

**Hurricane Warning – Issued when hurricane force winds are expected in the next 24 to 36 hours.**

**When a Hurricane Watch is issued:**

- Stay inside until the watch is lifted
- Monitor radio and television for further information
- Remove all items on the windowsills

**When a Hurricane Warning is issued:**

- Continue to monitor radio and television for further information
- Unplug all unnecessary electrical appliances
- Close blinds and stay away from windows

**A tornado is normally associated with a line of heavy thunderstorms, but may occur at any time.**

**Tornado Watch – Issued when weather conditions exist wherein a tornado may develop.**

**Tornado Warning – Issued when there is an actual tornado in the immediate area. Warnings are followed by the location and direction of the tornado.**

**When a Tornado Watch is issued:**

- Stay inside until the Watch is lifted
- Monitor radio and television for further information
- Remove all items on the windowsills
- Close blinds and drapes

**When a Tornado Warning is issued:**

- Monitor radio and television for further information
- Stay away from all windows
- Move to a doorway or to the bath room

**If a tornado hits:**

- Try and remain calm
- Cover head with hands and blanket

**After the tornado:**

- Check for any injuries
- If you are trapped, remain calm. Someone will be with you shortly

## **OTHER NATURAL DISASTERS**

**There are many other types of natural disasters that could affect you. These could include flooding, and earthquakes.**

In the case of flooding, when waters threaten Brookview Lodge, you will be moved to Holly Manor or The Moore Center. If both Holly Manor and The Moore Center are affected we will notify Town officials for an evacuation route and housing.

## **MEDICAL EMERGENCIES**

If you have a medical problem, please use the Red Emergency Telephone which connects to the Nurse's Station. When the system is activated, a Nurse or Aide will talk with you and then come to your room to lend assistance.

The staff is trained to assist you. Just ask if you need help or have any questions.

All of your medical and emergency information is kept at the Nurse's Station. You need to let us know if there is a change in your physician, prescriptions, relative or emergency contact address or telephone number, and any other important information.

### **Ancillary Rates Effective 1/1/09**

#### **Supplies**

Accucheck	\$3.00	Foam Boots	\$22.00
Attends pk of 12	\$16.00	Heal Protector	\$9.00
Bacitracin	\$2.50	Isolation, per day	\$20.00

Basin	\$5.00	Infectious Waste, Box	\$50.00
Bed Pan	\$5.00	Isolation Laundry Bags	\$4.00
Betadine	\$3.50	Nasal Cannula/Mask	\$8.00
Catheter	\$6.00	Oxygen, Bottle	\$14.00
Catheter Cover	\$11.00	Oxygen, Concentrator/hour	\$2.00
Cath Leg Cover	\$4.00	Oxygen Concentrator/mouth	\$80.00
Catheter Kit	\$18.00	Provon Perineal Ointment	\$8.00
Colostomy Wafers	\$37.00	Razor, pack	\$4.00
Colostomy Pouches	\$42.00	TB Test (PPD)	\$12.00
Drainage Bag	\$12.00	Tegaderm, Small	\$5.00
Dressing, Small	\$4.00	Tegaderm, Large	\$9.00
Dressing, Medium	\$6.00	Tegaderm, Extra Large	\$11.00
Dressing, Large	\$8.00	Underpads (Chux) pk of 5	\$7.50
Egg Crate Mattress	\$36.00	Urinal	\$5.00
Ensure (can)	\$1.75	Underpants(pull-ups)pk of 20	\$27.00
Ensure / Protein (can)	\$2.15		

**Laundry**

Monthly	\$40.00
Per Load	\$12.00

**Restorative Therapy**

Per 15 minutes time	\$6.50
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**Specialty Equipment**

High-back Wheelchair	\$1.00 per day
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**Professional Therapy**

Physical Therapy	\$35.00 per unit
Occupational Therapy	\$35.00 per unit
Speech Therapy	\$50.00 per unit

**Specialty Bed**

Low Air Loss	\$10.00 per day
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**Transportation**

	<b>(Local round Trip)</b>	<b>(Non- Local)</b>
Wheelchair Van	\$50.00 includes half-hour Aide time	\$2.00 per mile
Station Wagon	\$20.00 includes half-hour Aide time	\$1.25 per mile
Hourly Aide Fee	\$18.00	\$18.00

**This is not an all-inclusive list. Items not listed will be charged according to cost plus mark-up.**

**Prices effective 1/1/09 and are subject to change without notice.**

Revised 1/1/09

**RIGHTS AND RESPONSIBILITIES OF  
RESIDENTS OF ASSISTED LIVING FACILITIES**

Code of Virginia § 63.2-1808. Rights and responsibilities of residents of assisted living facilities; certification of licensure.

A. Any resident of an assisted living facility has the rights and responsibilities enumerated in this section. The operator or administrator of an assisted living facility

shall establish written policies and procedures to ensure that, at the minimum, each person who becomes a resident of the assisted living facility:

1. Is fully informed, prior to or at the time of admission and during the resident's stay, of his rights and of all rules and expectations governing the resident's conduct, responsibilities, and the terms of the admission agreement; evidence of this shall be the resident's written acknowledgement of having been so informed, which shall be filed in his record;
2. Is fully informed, prior to or at the time of admission and during the resident's stay, of services available in the facility and of any related charges; this shall be reflected by the resident's signature on a current resident's agreement retained in the resident's file;
3. Unless a committee or conservator has been appointed, is free to manage his personal finances and funds regardless of source; is entitled to access to personal account statements reflecting financial transactions made on his behalf by the facility; and is given at least a quarterly accounting of financial transactions made on his behalf when a written delegation of responsibility to manage his financial affairs is made to the facility for any period of time in conformance with state law;
4. Is afforded confidential treatment of his personal affairs and records and may approve or refuse their release to any individual outside the facility except as otherwise provided in law and except in case of his transfer to another care-giving facility;
5. Is transferred or discharged only when provided with a statement of reasons, or for nonpayment for his stay, and is given reasonable advance notice; upon notice of discharge or upon giving reasonable advance notice of his desire to move, shall be afforded reasonable assistance to ensure an orderly transfer or discharge; such actions shall be documented in his record;
6. In the event a medical condition should arise while he is residing in the facility, is afforded the opportunity to participate in the planning of his program of care and medical treatment at the facility and the right to refuse treatment;
7. Is not required to perform services for the facility except as voluntarily contracted pursuant to a voluntary agreement for services that states the terms of consideration or remuneration and is documented in writing and retained in his record;
8. Is free to select health care services from reasonably available resources;
9. Is free to refuse to participate in human subject experimentation or to be party to research in which his identity may be ascertained;
10. Is free from mental, emotional, physical, sexual, and economic abuse or exploitation; is free from forced isolation, threats or other degrading or demeaning acts against him; and his known needs are not neglected or ignored by personnel of the facility;

11. Is treated with courtesy, respect, and consideration as a person of worth, sensitivity, and dignity;
12. Is encouraged, and informed of appropriate means as necessary, throughout the period of stay to exercise his rights as a resident and as a citizen; to this end, he is free to voice grievances and recommend changes in policies and services, free of coercion, discrimination, threats or reprisal;
13. Is permitted to retain and use his personal clothing and possessions as space permits unless to do so would infringe upon rights of other residents;
14. Is encouraged to function at his highest mental, emotional, physical and social potential;
15. Is free of physical or mechanical restraint except in the following situations and with appropriate safeguards:
  - a. As necessary for the facility to respond to unmanageable behavior in an emergency situation which threatens the immediate safety of the resident or others;
  - b. As medically necessary, as authorized in writing by a physician, to provide physical support to a weakened resident;
16. Is free of prescription drugs except where medically necessary, specifically prescribed, and supervised by the attending physician, physician assistant, or nurse practitioner;
17. Is accorded respect for ordinary privacy in every aspect of daily living, including but limited to the following:
  - a. In the care of his personal needs except as assistance may be needed;
  - b. In any medical examination or health-related consultations the resident may have at the facility;
  - c. In communications, in writing or by telephone;
  - d. During visitations with other persons;
  - e. In the resident's room or portion thereof; residents shall be permitted to have guests or other residents in their rooms unless to do so would infringe upon the rights of other residents; staff may not enter a resident's room without making their presence known except in an emergency or in accordance with safety oversight requirements included in regulations of the Board;
  - f. In visits with his spouse; if both are residents of the facility they are permitted but not required to share a room unless otherwise provided in the residents' agreements;
18. Is permitted to meet with and participate in activities of social, religious, and community groups at his discretion unless medically contraindicated as documented by his physician in his medical record; and

19. Is full informed, as evidenced by the written acknowledgement of the resident or his legal representative, prior to or at the time of admission and during his stay, that he should exercise whatever due diligence he deems necessary with respect to information on any sex offenders registered pursuant to Chapter 9 (9.1-900 et. seq.) of Title 9.1 including how to obtain such information. Upon request, the assisted living facility shall assist the resident, prospective resident, or legal representative of the resident or prospective resident in accessing this information and provide the resident, prospective resident, or the legal representative of the resident or prospective resident with printed copies of the requested information.
- B. If the resident is unable to fully understand and exercise the rights and responsibilities contained in this section, the facility shall require that a responsible individual, of the resident's choice when possible, designated in writing in the resident's record, be made aware of each item in this section and the decisions that affect the resident or relate to specific items in this section; a resident shall be assumed capable of understanding and exercising these rights unless a physician determines otherwise and documents the reasons for such determination in the resident's record.
- C. The rights and responsibilities of residents shall be printed in at least 12-point type and posted conspicuously in a public place in all assisted living facilities. The facility shall also post the name and telephone number of the regional licensing supervisor of the Department, the Adult Protective Services' toll-free telephone number, as well as the toll-free telephone number or the Virginia Long-Term Care Ombudsman Program, any sub-state ombudsman program serving the area, and the toll-free number of the Virginia Office for Protection and Advocacy.
- D. The facility shall make its policies and procedures for implementing this section available and accessible to residents, relatives, agencies, and the general public.
- E. The provisions of this section shall not be construed to restrict or abridge any right which any resident has under law.
- F. Each facility shall provide appropriate staff training to implement each resident's rights included in this section.
- G. The Board shall adopt regulations as necessary to carry out the full intent of this section.
- H. It shall be the responsibility of the Commissioner to ensure that the provisions of this section are observed and implemented by assisted living facilities as a condition to the issuance, renewal, or continuation of the license required by this article.

In Case of Questions or Concerns, You May Call:

Regional Licensing Administrator, DeNyce Bonaparte, Central Regional Office  
Virginia Department of Social Services: (804) 662-9764, (804) 662-9743  
Address: 1604 Santa Rosa Road, Wythe Bldg., Suite 130, Richmond, VA 23229-5008  
Toll-Free Number for the Virginia Long-Term Care Ombudsman: 1-800-552-3402

Local Ombudsman: Kay Young

Address: P.O. Box 398, Burkeville, VA 23922

Telephone: (434) 767-5588

Toll-Free Number for the Virginia Office Protection and Advocacy: 1-800-552-3962

Toll-Free Number for Adult Protective Services: 1-888-832-3858

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