



**PATIENT AND RESIDENT
HANDBOOK**

Health Care Unit

Our Mission Statement

The House of the Good Shepherd is a Retirement Community founded in 1882 by five Episcopal Church congregations in New Jersey. Our mission is to meet the life-style, spiritual, and health-care needs of older persons, on and off our campus, in a faith-based, caring and dignified manner.

Definition

In this manual, you generally refers to the resident or patient. Where appropriate it may also refer to the resident representative, guardian, durable power of attorney (DPOA), and/or family member. The House of the Good Shepherd is abbreviated as HOTGS.

Questions and Concerns

The main telephone number for The House of the Good Shepherd is (908) 684-5900.

Deborah Beards, Chief Executive Officer, has an open door policy. If you are unable to locate Deb in her office or out-and-about on the campus, please do not hesitate to call her on her cell phone: 908-256-9605. You may call any time of the day or night. If her cell phone is on vibrate (e.g., in meeting), she will return your call as soon as practicable.

Following is a list of management staff and their extensions. Each staff member's direct dial number begins with (908) 684 and then the extension. E-mail addresses are first initial last name @hotgs.org. For example, the e-mail address for Deborah Beards is dbeards@hotgs.org.

Chief Executive Officer	Extension 5720
Director of Nursing Services	Extension 5730
Assistant Administrator	Extension 5739
Assistant Director of Nursing Services	Extension 5996
MDS Coordinator/Coordinator of Medicare and Care Planning	Extension 5930
Director of Social Services*	Extension 3906
Director of Rehabilitation	Extension 5961
Director of Recreation	Extension 5731
Director of Hospitality (Dining, Housekeeping and Maintenance Services)	Extension 5726
Director of Dining Services	Extension 5728
Chief Financial Officer	Extension 5734
Staff Accountant	Extension 5733
Skilled Care Nursing Station	Extension 5736

*To dial from the outside, please call 908.441.3906.

Smoke-Free

HOTGS is a smoke-free facility.

Visiting

HOTGS has no formal visiting hours. The reception desk is staffed from 8:00 AM to 8:00 PM. For security purposes, during these hours visitors must sign in.

From 8:00 PM to 6:00 AM, our lobby is locked. Please ring the doorbell. As soon as a staff member views you on the monitor at the nursing station, she/he will release the door lock. Please understand that, during these hours, staff may be tending to patients and residents and not sitting at the nursing station. Responding to the doorbell may take several minutes.

We request that visitors be in good health while visiting. On rare occasion, we may ask that family and friends not visit to prevent the spreading of a highly communicable disease (e.g., influenza) that is present either at HOTGS or in the community-at-large.

Medical and Allied Health Care

You must have an attending physician. The social worker can provide you with a list of physicians on staff at HOTGS.

Physicians' visits must comply with Federal, State and ACO regulations governing nursing homes. You must be seen by your physician within 24 hours of admission and a minimum of once each month. For Medicare patients, more frequent physician visits may be required.

A physician who is a family member may not

1. serve as your attending physician; or
2. issue physician's orders on you.

For your convenience, the following services are provided in-house by consulting medical professionals: dentistry, podiatry, optometry, dermatology, hospice, and psychiatry.

Transportation

You are responsible for transportation expenses related to all out-of-facility medical visits not covered by Medicare, Medicaid, or private insurance.

Medicare does not cover visits to physician appointments or for treatments/procedures. Medicare generally provides coverage for emergency transportation to and from the hospital.

Medicaid recipients qualify to receive transportation to medical appointments provided two days' notice is given to Logisticare, the contractor for Medicaid transportation.

If you require assistance and are not able to have a family member or friend accompany you, you are also responsible for the cost of a certified nursing assistant (CNA) to accompany you.

To arrange for a CNA to accompany you, please contact the Unit Clerk at the nursing station a minimum of 48 hours in advance. Additional information on transportation is provided in the Medicare section of this manual.

Hospitalizations and/or Emergency Room Care

HOTGS cannot provide a staff member to accompany you to the hospital. For any hospitalization, the key parts of your medical history are photocopied and given to the EMTs to insure that the emergency room physician is fully informed of your medical history up to the point of hospitalization. Included with the medical history is a list of contact persons (e.g., resident representative/family member) as well as insurance information and any other pertinent information. Your nurse will also telephone the emergency room to provide a verbal update on your status. No information is required from you.

Nursing homes, by nature, do not have the equipment and supplies found in hospitals. Should you require an immediate (stat) evaluation or treatment, and/or require an immediate administration of medication not routinely stocked by HOTGS, you will be transported to the hospital via 911 for services.

Bed Hold

You have the option of “holding” your bed if you require transfer to the hospital for an overnight stay or longer. Specific policies and procedures on bed holds are explained in a separate notice that is included as an appendix. For recipients of Medicaid, the New Jersey Medicaid program requires that your bed be held open for ten days. After the tenth day of hospitalization, if you decline the opportunity for a paid bed hold, you will be offered the first available admission to a semi-private room appropriate for your care at the time of readmission.

Nursing

Licensed, professional nursing staff is on duty 24 hours a day. Questions concerning your condition, current treatment plan, or prognosis should be directed to your charge nurse. Due to federal confidentiality regulations, we will not share your medical information with “just anyone”. As part of the admissions process, you will be asked to designate a primary contact person and the names of people with whom we may share your medical information. Your primary contact person will be the person with whom we share any changes in your medical status.

Please remember that, when our nursing staff is speaking with your family members and friends, the staff is not attending to our primary concern, you. Therefore, **only one person** may be designated as a primary contact. You may decide to ask your primary contact to keep others informed of your medical status.

To ensure our nurses are available to provide the care our residents and patients require, family members are requested to refrain from telephoning or interrupting nurses during meal times and medication administration times. The best times to speak with a nurse are as follows:

10:30AM to 11:30AM

1:30PM to 2:30PM

7:30PM to 8:30PM

Please do not interrupt nurses who are administering medication.

Pharmacy

Medication is dispensed by the nursing staff in accordance with physician's orders. Medications are supplied by a geriatric pharmacy that provides daily delivery, as well as off-hour service.

Since HOTGS must comply with Federal and State regulations regarding dispensing and administration of medications, policies have been established which are vital to protecting your health and safety.

You are not permitted to bring in any medications, including non-prescription drugs and topical ointments. All medications (non-prescription as well as prescription) must be ordered by the attending physician and packaged in accordance with the policies and procedures of the HOTGS medication system.

Self-administration of medications is only permitted with the approval of the resident/patient care team. To arrange for self-administration of medications, contact your charge nurse. Unless self-administration of medications has been approved by the resident/patient care team, federal regulations mandate that **ABSOLUTELY NO MEDICATIONS AND/OR NON-PRESCRIPTION DRUGS ARE PERMITTED AT BEDSIDE.**

Decision-Making

You are in charge of your care. In other words, you decide what you want and what you do not want. HOTGS staff has the responsibility to inform you when we believe a decision you are making may have a negative effect on your health, but you have the right to do as you choose. For example, your physician may order a no sugar added diet. You can choose to be served a regular diet. HOTGS staff will explain the possible negative consequences of your decision, but the decision as to the diet you receive is yours.

As long as staff deems you capable of making your own decisions, you will remain in charge of your decision making. When you have cognitive impairments such as memory loss, you will continue to retain decision-making rights in the areas where HOTGS and/or your physician have assessed that you have the capacity to understand the consequences of your actions. In other words, when we believe you are capable of understanding a specific plan of care (sometimes called "situational capacity"), we will consult only you for any decision-making that needs to take place.

Your resident representative or durable power of attorney can only assume decision-making responsibilities in areas where HOTGS staff has assessed and your physician agrees that you do not have the capacity to understand the consequences of your actions. Should you request a family member or friend to assist you with decision-making, we will honor your request.

HOTGS staff has the legal right to direct the care you receive only when HOTGS staff has assessed that you are a danger to yourself and/or to others.

Participation in Care Planning

You and anyone you choose to invite are encouraged to participate in the development of your plan of care. Your plan of care is developed upon admission and updated throughout your stay.

When meetings are scheduled, you will be informed in advance of the date and time so that you may participate and invite any persons you want to join you. The plan of care delineates the specific care and assistance to be provided by staff members. Bath schedules, assistance with eating and dressing, and medication regimens are among the many areas addressed in your plan of care.

When the topic is care planning, you are in the driver's seat! We want to understand your preferences, wishes, and desires. Your plan of care is part of your medical record and lists individualized goals and objectives for your stay. The plan of care also delineates the specific care and assistance to be provided to you by staff. As your wishes or needs change, your plan of care will be updated. Your input is essential. We encourage you to attend care-planning meetings. You will be informed in advance of the date and time for each care-planning meeting.

If the person or persons you want to be present at the care-planning meeting are unable to attend, they can either participate on a conference call at the time of the meeting or schedule a mutually convenient time to speak with a member of the care planning team (e.g., social worker, nurse).

Your Day-to-Day Care

Due to potential health-related problems, tasks such as dressing, ambulating and transferring (e.g., from bed to wheelchair or wheelchair to toilet) should be performed only by certified nursing assistants who are under the direction of licensed nurses. Family members and friends who are physically capable may push residents in wheelchairs.

If a visitor has received staff training and staff approval to assist you with a specific task, he/she may do so. Permission to perform a specific task, such as assisting with eating, is granted on a case-by-case basis by the professional staff responsible for developing the plan of care. The decision to allow a care-giving task to be performed by a family member or friend is based on your medical condition and the ability of the requesting party to perform the task in accordance with the policies and procedures of HOTGS.

Your family members and friends are also encouraged to participate through regular visitation.

Restrictions on visitation including supervised visitation, limitations on visiting time(s), and temporary and/or permanent withdrawal of visitation rights may occur if the care team determines that severe harm or the potential for severe harm to the resident/patient may result from the visitation.

Leave of Absence

Please be certain to inform your charge nurse and sign out at the nursing station when you leave the premises, even for a brief period of time. We do not want to worry about where you are!

Any question regarding the advisability of you leaving the premises will be referred to your attending physician. Overnight, out-of-the-building stays require approval from your physician. A minimum of two weekdays' notice is required to allow the pharmacy sufficient notice to package medications for a leave of absence.

For private pay residents, the daily room and board charge remains in effect during a leave of absence. Medicare regulations do not allow patients whose stay is being funded by Medicare to leave the facility overnight.

If you are a recipient of Medicaid, Medicaid regulations permit a limited number of therapeutic leave days. To qualify, your physician must document authorization for the leave and your plan of care must reflect that a therapeutic leave is consistent with the plan. To provide staff with sufficient time to comply with these Medicaid regulations, a minimum of five days' notice is appreciated. For additional information on Medicaid therapeutic leaves, please speak with the Director of Long-Term Social Services.

Payment for Care and Services of Private Pay and Medicaid Residents

Upon admission, private pay residents are required to pay one month of room and board charges in advance. Thereafter, room and board charges will be billed and include any personal charges (e.g. beauty parlor, medical supplies) from the previous month. Upon discharge, any prepaid portion not applied to room, board, or ancillary charges will be refunded.

Medicaid residents are entitled to a personal needs spending allowance of \$50.00 a month. Each month, after subtracting out the personal needs allowance and any other allowable expenses (e.g., Medigap insurance), recipients of Medicaid or residents who are Medicaid-pending must submit all monthly income to the HOTGS business office. This income is called applied income because it is applied to the resident's Medicaid rate and does not provide HOTGS with additional income. Applied income includes social security payments, retirement payments, as well as any and all monthly income of the resident. Failure to submit applied income to HOTGS is an act of fraud. If your applied income is not submitted, we are required to report this failure to submit income to Social Security and the Office of the Ombudsman for the Institutionalized Elderly (OOIE). OOIE is the state advocacy organization for nursing home residents.

Both the private pay and the Medicaid rate include nursing care, recreational and religious programming, dining services, laundry and housekeeping, and maintenance.

The following items are not included in the private pay room and board rate:

- hairdresser
- personal telephone
- private room charge
- transportation to appointments and escorts for appointments
- cable television service
- oxygen
- incontinence and non-routine medical supplies
- dietary supplements

The Medicaid room and board rate does not include:

- hairdresser
- cable television service
- personal telephone

- items of a personal nature such as clothing or toiletries
- private room charge

The following items are not included in the room and board rate and are generally covered by Medicare and/or Medicaid:

- physician services
- rehabilitation services
- prescription medications
- medical tests (e.g. x-ray, blood work)

Should an item not be covered by Medicaid and/or Medicare, your permission to authorize service will be required.

Payment for Care and Services of Medicare Part A Patients

Applicants and/or residents who have just completed a minimum of three (3) days in the hospital, and are being admitted or re-admitted to HOTGS as skilled care patients may qualify for Medicare Part A benefits. Each admission following a minimum three (3) day hospitalization is reviewed by the HOTGS utilization review committee to determine Medicare eligibility. To be eligible for Medicare Part A in a nursing home (also referred to as sub-acute rehabilitation) Medicare regulations require that you meet the following criteria. You must have:

- 1. spent a minimum of three (3) days in a hospital; observation days do not count**
2. the potential for rehabilitation and/or require skilled nursing care as defined by Medicare

During your Part A Medicare stay, the patient care planning team/utilization review committee will be continually monitoring your rehabilitation progress and/or your need for skilled nursing care as defined by Medicare. Medicare regulations mandate that Medicare Part A be terminated when one or more of the following occurs:

1. You cease to continue to progress with your rehabilitation
2. You no longer require skilled nursing services as defined by Medicare
3. You have received 100 days of Medicare Part A coverage, which is the maximum allowable number of days per spell of illness

Because of the restrictions Medicare places on skilled nursing home stays, discharge planning will begin on the day of admission. By day five after admission, the patient care planning team/utilization review committee will meet with you to address goals and home care.

Should you be terminated from Medicare Part A benefits before the 100 day maximum, you will receive notice of non-coverage of Medicare services a minimum of 48 hours prior to the actual termination date of your Medicare Part A benefits. Most Medicare stays are fewer than 20 days.

Should you disagree with the decision of the patient care planning team/utilization review committee, you may appeal the decision to terminate Medicare Part A benefits by telephoning 1-800-815-5440. This number is the number for the Medicare Quality Improvement Organization of New Jersey.

If you qualify, Medicare Part A will fully cover the cost of your nursing home sub-acute rehabilitation stay for the first twenty (20) days. After day 20, you are required to pay what is known as a Medicare co-pay. In 2018, this co-pay amount is \$164.50 per day. Should you have a Medigap policy, this co-pay may be covered. Please check with your insurance carrier to verify coverage.

The Medicare Part A rate includes nursing care and supplies, rehabilitation services, medications, medical testing (e.g., x-rays), recreational and religious programming, dining service, laundry and housekeeping, maintenance, telephone and cable television.

Not included in the Medicare Part A rate but reimbursed under Medicare Part B (also called Medicare outpatient services) are:

- physicians' visits
- chemotherapy or radiation treatments
- cardiac catheterization or angiography
- CT scans
- MRIs
- emergency services
- ambulatory surgery involving the use of an operating room
- renal dialysis

Because of the complexity of Medicare regulations, the above list is not all-inclusive.

The following items are not included in the Medicare Part A rate or covered under Medicare Part B and are the responsibility of the patient/resident representative:

- transportation
- hairdresser
- long distance toll charges
- private room charge
- escorts for medical appointments
- items of a personal nature such as clothing or toiletries

Discharge Planning

For patients receiving Medicare Part A rehabilitation and/or skilled nursing services, discharge planning begins upon admission. Your social worker will assist you in determining what, if any, home care services are required upon discharge. The social worker will provide you with a list of home care agencies from which you may select an agency to provide services in your home. One of your HQTGS therapists may also initiate a home visit to assist you with determining what, if any, modifications to your home environment may be required to improve your at-home safety.

Transitioning from Sub-Acute Care to Long Term Care

Because indigent care reimbursement from Medicaid does not cover the cost of care, the State Department of Health permits facilities to limit the number of Medicaid residents. HOTGS maintains a Medicaid waiting list. HOTGS may not be able to accommodate Medicare to Medicaid transitions due to our Medicaid waiting list. Medicare patients requiring Medicaid long term care are invited to be placed on our Medicaid waiting list and move to another facility in the interim.

Transportation

Medicare only covers ambulance transportation for hospital emergency visits and for patients who, due to medical condition, must be transported lying in a horizontal position (i.e., on stretcher). Medicaid covers wheelchair van transportation provided 48 hours prior approval is received by the state Medicaid transportation office. Our unit clerk will obtain prior approval for Medicaid residents needing medical appointment transportation.

Neither Medicare nor Medicaid provides payment for medical appointment escorts. To avoid escort charges, you are encouraged to arrange with a family member or friend to accompany you to medical appointments should you be unable to go independently.

Medicaid Application

When a long term care resident has liquid assets of approximately \$70,000, he/she is expected to begin the Medicaid application process. Please contact, your social worker for instructions on beginning the Medicaid application process. Your social worker can provide you with a Medicaid application and information about the process for applying to Medicaid. You may obtain applications and detailed information about Medicaid eligibility by contacting:

Warren County Division of Temporary Assistance and Social Services
1 Shotwell Drive
Belvidere, NJ 07823
908-475-6301

Management strongly recommends you employ a third party company to take you through the Medicaid eligibility process. Your social worker can provide a contact.

Support

Medicaid is the government income tax-financed program that provides funding for many of our long term residents. The Medicaid reimbursement received by HOTGS only partially covers the cost of care. HOTGS depends on contributions to support the deficit for care of residents receiving Medicaid. We encourage family members and friends of residents to remember HOTGS as a charity very much in need of contributions. For information on how to help HOTGS with its fundraising efforts, please contact the Chief Executive Officer.

Recreation

The recreation staff offers a variety of group programming. Monthly calendars listing programming scheduled each day are posted throughout the nursing unit. The monthly calendar is also available at the reception desk for family members and friends to peruse.

Family members are encouraged to participate in recreation programs. During large group programs, family members and friends who are present are requested to assist you to and from the program.

Upon admission, a recreation staff member will interview you to determine your recreation preferences. Recreation staff has access to large print books and talking books as well as a wide variety of individual activities for persons who prefer individual rather than group activities.

Volunteering

Volunteers are an asset to HOTGS. If your family members and/or friends have time for community service, please ask them to consider volunteering for HOTGS. To learn more about volunteer opportunities at HOTGS, please contact our Director of Recreation.

Dining Services

A selective meal service with a variety of choices is offered at all mealtimes. Three nutritious meals are provided according to your physician-ordered diet. If you wish for your diet to be more liberal than the physician-ordered diet, please speak with your charge nurse. You may select to routinely receive your physician-ordered diet and request menu items not on your diet plan at any meal. Snacks are available at all times.

Food items kept in your room must be in airtight containers. Should you wish to keep items requiring refrigeration in your room, you may bring a small refrigerator, space permitting. HOTGS cannot be responsible for cleaning and/or defrosting of resident refrigerators.

The dining room has limited space. Family members and friends are requested to NOT visit during mealtimes unless, with the permission of the nursing staff, you are assisting your resident with eating.

Beauty, Barber Services

Our salon, located on the first floor, is open Tuesday through Friday. The unit clerk at the nursing station can set up an as needed or a standing appointment or you may do so by calling the salon at 684-5952. Short-term stay residents should pay at time of service.

Personal Needs Allowance (PNA) Account

A "PNA account" means an account or petty cash fund that holds the money of a resident and is managed for the resident by the House. The House maintains a surety bond to protect these assets.

Upon written authorization from the resident/resident representative, the House shall hold, safeguard, manage, and account for PNA funds deposited with the House. The PNA funds are for the resident's use at his/her sole discretion.

If HOTGS becomes representative payee for the resident's Social Security benefit, a PNA account will be established. Social Security requires that the representative payee is responsible for ensuring that the money is used to meet the personal needs of the resident.

PNA account funds are deposited in a separate PNA account. Accounts under \$50.00 are non-interest-bearing; accounts \$50.00 and over receive interest pro-rated for each individual's funds. The resident/resident representative will receive a monthly statement that includes interest earned.

Access to funds of \$50.00 or less is available seven (7) days a week, either in the business office during business hours on weekdays or at the second floor reception desk on weekends. The second floor reception desk is staffed from 8:00 AM to 8:00 PM. A receipt will be provided for all transactions. Larger amounts are disbursed by check and require at least one business day's notice. Reimbursements for expenditures on behalf of a resident require documentation (e.g., receipt) and will be paid by check within ten (10) business days.

No fees are charged for maintaining a PNA Account.

Upon discharge, the PNA funds will be released to the resident/resident representative. Upon death, the PNA funds will be disbursed as directed by the County.

Residents/responsible parties should note that the balance in the PNA is considered an asset, and for Medicaid residents, assets must not exceed \$2000 or the resident will temporarily forfeit Medicaid eligibility.

Computer Access

A public use computer is located in the skilled nursing lounge area. In addition, a computer room located on the first floor has three computers with internet access for your use. Should you wish to bring your own computer, our entire facility is wireless.

Laptop computers are available on loan, free-of-charge, should you wish to Skype. Please contact the first floor receptionist (dial 0) during business hours to arrange to borrow a laptop.

Recording, Videotaping and Photographing

You are welcome to record, video, and/or photograph yourself with your family members and friends. You are not permitted to use any electronic device to voice record, videotape or photograph other residents/patients, staff members or visitors without express written permission.

To ensure mealtimes and recreation programming may be enjoyed by all participating residents, cellular telephones must be turned off while in the dining room or while participating in recreation programming.

Grievances

The grievance official of The House of the Good Shepherd is the Administrator or her designee. To file a grievance orally, please contact the administrator at 908.684.5720. Should this number not answer, you will be directed by voice mail to a 24/7 cell phone number. Written grievances may be addressed to the administrator and left with one of the receptionists or mailed to The House of the Good Shepherd. In the absence of the administrator, written grievances will be forwarded to her designee.

Room Changes

We hope that, while you are here, whether for a short-term or a long-term stay, you will consider HOTGS your home. On occasion, the resident/patient care team may determine that a room change is in your best interest. Any room change notice will be delivered to you in writing. We will facilitate the move with as little disruption to you as possible. We will not require your assistance with the move. On occasion, we may ask you to change your room to address the needs of another resident/patient. Your understanding and cooperation is much appreciated should this need arise. Please understand that HOTGS retains the unrestricted legal right to change your room at any time but that we will not do so unless necessary.

Accommodations

We sincerely hope your room will be your castle (albeit a small castle). You are encouraged to bring items to personalize your room. A small piece of furniture is acceptable, space permitting.

Most of our rooms are semi-private. Your bathroom will be shared with your roommate. When your bathroom door is closed, your privacy will be respected. For your privacy, all semi-private rooms are equipped with around-the-bed privacy curtains. Should you require assistance from staff with any personal needs, please be assured that the privacy curtain will remain closed.

Personal Possessions

We ask that all possessions (e.g. clothing, eyeglasses) be labeled with your name prior to admission. Your personal dentist should have the equipment to label dentures. If you are a long term care resident and a family member will be laundering your clothing, we still ask that all clothing be labeled. When articles of clothing are sent to our laundry in error, we will then be able to identify them.

To allow family members and friends time to grieve; upon death, staff will neatly pack possessions and place them in storage. Belongings may be stored for up to ten days. Due to space limitations, belongings not picked up after ten days will be donated to charity.

What to Bring With You

You will be wearing your own clothing.

Due to space constraints, we request that you limit the amount of clothing in your room. Following is a list of clothing we suggest you have available:

- Three or four outfits (dresses, slacks, shirts, etc.)
- Seven pairs of socks and underwear
- Two pairs of shoes, preferably washable
- Two pairs of slippers with backs and nonskid soles, also preferably washable
- At least two sweaters
- Several nightgowns or pairs of pajamas.

Please do not bring backless shoes or slippers, or shoes with high heels. We want to avoid falls!

Staff Appreciation

Although we encourage the appreciation of staff, our personnel policies state that solicitation or acceptance of gratuities is cause for dismissal of employees. Staff members are **NOT** permitted to accept cash or personal gifts.

You, your family members, and your friends are encouraged to contribute to the staff holiday fund. The staff holiday fund accepts contributions year-round and provides each staff member with a bonus at Christmas time. Contributions for the staff holiday fund may be left with the nursing administrative assistant or any of our receptionists.

To recognize a staff member for his/her exceptional work, please also complete a Shining Star certificate. Certificates are located at the reception desk. A copy of your comments will be given to the staff member and placed in our staff newsletter. A copy will also be placed in the personnel file of the staff member.

Safety

State fire and safety regulations prohibit the use of the following items:

- extension cords
- electric heating pads
- electric blankets
- space heaters
- candles
- live or dried trees or wreaths
- boxes/storage containers of any type on floors or under beds
- any item of furniture which blocks movement of equipment for care needs.

Housekeeping, Laundry, and Linen Services

No laundry, no dishes, and no cleaning – living at HOTGS is worry-free. Housekeepers, like all staff, are part of your care team. You should feel free to make special requests of your housekeeper such as watering your plants, or rearranging small items in your room. He/she will be happy to assist you.

Laundry is collected daily and is returned to you generally within 48 hours. If you choose not to use our laundry, please arrange for the person laundering your clothing to empty your hamper frequently. If incontinence is an issue, we ask that you permit us to launder your clothing to insure daily service.

Linen is changed twice weekly or as needed. We ask that you limit the number of towels kept in your room to a reasonable number. Should you require fresh towels, your nursing assistant will be happy to bring you towels. In the interest of keeping all of our towels and linens as fresh as possible, we ask that you refrain from accessing the linen closet. A staff member will assist you in obtaining what you need.

Advance Directives

An advance directive document (e.g., living will, POLST) provides written instructions that explain your wishes should you have a terminal condition. A power of attorney for healthcare document allows you to name a person (called an agent) who is authorized to make decisions on your behalf should you become unable to make your own decisions about your healthcare. **A POA-HC can only make decisions for you when you are no longer able to do so for yourself.** A POLST (Physician Orders for Life-Sustaining Treatment) can also be completed together with your physician to specify your goals of care and make advance orders for specific treatments. Our social worker can provide you with these forms. We strongly encourage you to complete an advance directive. In an emergency, without an order for Do Not Resuscitate, you will be a full code; in other words, the staff will activate the emergency medical services (EMS) system.

Without any legal directives, should you become unable to make decisions on your own behalf, staff will seek direction from your closest relative. Should relatives be in disagreement as to your care and treatment, the Office of the Ombudsman for the Institutionalized Elderly will be contacted and asked to intervene.

At any time, you may change the instructions on your advance directive. You also have the right to refuse treatment, even when refusing treatment may hasten your death. Should you refuse treatment recommended by your physician, your charge nurse and/or social worker will review with you the risks and benefits of treatment and this conversation will be documented in your medical record.

Rehabilitation

Whether you are coming to us for post-hospital rehabilitation, or whether you are a long-term care resident whose physician has ordered therapy services, our therapy staff is here to insure that you reach your maximum potential.

Our physical therapists work with persons who need reconditioning after hospitalization, post cardiac strengthening, and rehabilitation after fractures, or replacement surgeries (e.g. knee, hip).

Our occupational therapists re-teach important skills such as showering, dressing, and transferring in and out of the car. Our speech pathologist can address problems with aphasia or swallowing difficulties

For post-hospitalization patients needing any type of skilled care services, The House of the Good Shepherd staff shares your commitment to return to home. Because...

From the hospital...
Back on your feet...
To home...

The House of the Good Shepherd will get you back where you belong!

Country Store

For your convenience, a Country Store, located on the first floor, on the way to the Lodge, is operated by the Resident Council. It sells milk, candy, cards, stationery, toilet paper, and other personal items. The hours of operation are posted on the weekly calendar.

Riverside Cafe

The Riverside Café is a “grab and go” style eatery located on the first floor. To reach from skilled nursing, walk through assisted living to the elevator in the second floor lounge. The café will be on the left when exiting the elevator. The café is open weekdays from 11-2 (hours subject to change). Fresh wraps, sandwiches, salads, healthy snacks, beverages and ice cream novelties are available for purchase.

Chapel

St. Margaret’s Chapel is located on the lower level just past the Lodge. The chapel is open 24/7 to residents, family, and staff for worship, prayer, and reflection.

Weekly Services include:

Monday	Service of Healing	10:30 am
Tuesday	Bible Study	1:00 pm
Wednesday	Holy Communion	10:30 am
Sunday	Afternoon Prayer Service	2:00 pm

Monthly Services include:

Roman Catholic Mass	The first Friday of each month
Presbyterian Communion	The last Tuesday of each month

Other programming includes:

Alter Guild

St. Margaret's Chime Choir

Chapel Choir

Medication Class

Music Class

Lenten Bible Study

To participate in any chapel programming, please contact the chaplain.

Our Chaplain is part-time but is available for hospital visitations, consultations, private communion, funerals, and memorial services. You may reach the chaplain at 908-684-5931. For a pastoral emergency, please contact the receptionist at 908-684-5900.

Private Dining Room

The Private Dining Room is a space available to reserve for private events. It is located across from the mail boxes on the first floor.

Riverside Courtyard

The Riverside Courtyard is an outdoor area with shuffleboard, a putting green, and sitting areas overlooking the Musconetcong. From skilled nursing, walk through assisted living to the elevator in the second floor lounge. On the first floor turn left and walk through the stone entranceway. You will see the courtyard on your right.

The Screen House

The Screen House is an enclosed outdoor space overlooking the river. Please check with the first floor receptionist to reserve the screen house for a private event. From skilled care walk through assisted living to the elevator in the assisted living lounge area. On the first floor use the main entrance exit and the screen house is on your left.

Business Office

If paying by check, you may pay your monthly bill at either the first floor or second floor reception desk. The first floor reception desk is open weekdays from 8:00 am to 4:00 pm excepting holidays.

The second floor reception desk is staffed seven days a week from 9:00 am to 8:00 pm. A locked bill pay box is also located on the wall by the entrance to the business office.

If paying by credit card, please go to the business office.

If you have a concern about your bill or require an explanation of your charges, please stop by the business office any weekday. The business office is located on the first floor on the hallway labeled 1A, across from apartment 107.

Thank You!

The Board of Trustees and Staff of The House of the Good Shepherd are pleased that you have selected "The House" as your provider for short-term or long-term health care services. We want to exceed your expectations. Should you have any concerns, do not hesitate to speak with one of our social workers or our Director of Nursing. In addition, Deborah Beards, our Chief Executive Officer, is always just a telephone call away. During most business hours, you may reach her through the main switchboard. Evenings, weekends, and holidays, she may be reached on her cellular telephone: 908-256-9605. Please do not hesitate to contact Deborah at any time, day or night.

Whether you plan to make HOTGS your home, or whether your stay is for rehabilitation, our staff is thankful for the opportunity to serve you.

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