



*Providing compassionate
long term skilled nursing
and rehabilitative care
to the community since 1966...*

"Like Family"



Resident Handbook

Version 7
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Oakview Medical Care Facility
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WELCOME

Welcome to Oakview. Our Board, Administration, and staff are committed to compassionate, ethical, and high-quality care that treats everyone like family.

HISTORY OF OAKVIEW

Established in 1966 as a county-owned, non-profit, skilled nursing facility, Oakview expanded in 1998 and, in 2009, opened the 20-bed Sutter Living Center for Alzheimer's and dementia care in honor of Dr. William F. Sutter, who served as Oakview's Medical Director for over 25 years.

OUR MISSION

We provide comprehensive, high-quality long-term skilled nursing services that honor dignity, privacy, rights, and independence. We strive for a home-like environment, to maximize function, and support a safe transition home whenever possible, meeting or exceeding state and federal standards.

CORE PURPOSE & VALUES

We exist to care for those in need in our community and enrich the lives of those we serve. We endeavor to treat everyone like family, upholding the highest ethical standards and living our values of compassion, excellence, and respect.

VISION

Oakview strives to be a trusted community partner, delivering holistic, high-quality care in a vibrant, nurturing environment while adapting to evolving needs, managing resources responsibly, and collaborating across the health services continuum.

ACCESS TO RESIDENTS

Residents may receive visitors of their choice at any time, subject to their preferences and the rights of other residents. This includes spouses and domestic partners (including same-sex), family, and friends. Residents may define who they consider family.

Visitation privileges are provided equally without discrimination based on race, color, national origin, religion, sex, gender identity, sexual orientation, or disability. Immediate access must be granted to representatives of the Secretary of Health & Human Services or the State; the State Long-Term Care Ombudsman (with record access as allowed by law); the resident's physician; advocacy representatives for individuals with disabilities or mental disorders; and the resident's legal representative.

Immediate family and other visitors may visit without time restrictions unless limited by the resident or necessary clinical and safety measures (e.g., per CDC or local health department guidance). If visits disturb others (e.g., a roommate is asleep), staff will arrange an alternative location.

Pre-approved group contacts (e.g., religious services, council meetings) are coordinated by Nursing, Social Services, Rehabilitation, or Therapeutic Recreation.

Reasonable Clinical and Safety Restrictions include:

- Infection control measures during outbreaks or for residents at higher risk.
- Deferring visitation for ill or potentially infectious visitors (e.g., fever, influenza-like symptoms).
- Locking entrances at night with a system for approved visitor access.
- Limiting, supervising, or denying access for visitors under investigation for abuse, theft, or disruptive/intoxicated behavior.
- Supervised access or denial for individuals with a history of bringing illegal substances; suspected criminal activity is referred to law enforcement.

Staff will not search residents or belongings without voluntary consent. Threatening behavior, harassment, and solicitation are prohibited. Distribution of materials is limited to family, friends, clergy, or legal representatives. Staff members are permitted to distribute written materials such as activities, health, and social services information.

ACCOUNT STATUS AND DELINQUENT ACCOUNTS

The Business Office reviews account status with residents or the appropriate responsible party. Monthly bills are due by the 10th. Unpaid accounts 30+ days are reviewed by the Administrator and Board, which may include involuntary discharge when appropriate. Billing inquiries: 231.845.5185 ext. 222 or 223.

ACTIVITIES

Recreational Therapy offers seven-day programming tailored to social, cognitive, and spiritual needs, in both group and individual formats. Computers are available in the Main Activity Room and Sutter Living Center.

Seasonal Activities

Special events occur throughout the year; families are encouraged to attend. Patio and courtyard areas are available in warmer months.

Outings

Resident outings are encouraged. Scheduled outings are planned by the activity staff. Space is limited and residents can sign up in the activity room. Physician orders need to be obtained before a resident leaves the building.

ACTIVITIES CALENDAR

Monthly activity calendars are posted in resident rooms and common areas. For Oakview's general population, activity calendars are posted on the large board by the Main Dining Room, and daily activities are posted by the nursing station. For the Sutter Living Center, daily activities are posted next to the Director of Therapeutic and Recreational Services office, Rm SL 115. Large-print calendars are available upon request from Therapeutic and Recreational Services. Changes or cancellations are posted promptly.

ADVANCE DIRECTIVES

An Advance Directive records a competent individual's wishes for medical treatment and names a patient advocate to make decisions. Social Services can provide information.

Code Status

"Full Code" includes but is not limited to CPR, suctioning, IV therapy, feeding tubes, pain control, and emergency hospital transfer. "No Code" (DNR) indicates no resuscitation; supportive care for comfort only.

Durable Power of Attorney

A durable power of attorney for health care (patient advocate/health care proxy) authorizes another person to make medical decisions consistent with your documented wishes.

ALZHEIMER'S/DEMENTIA SPECIAL CARE UNIT

The Sutter Living Center is A 20-bed self-contained unit for individuals with mid-stage Alzheimer's and related dementias (generally stage IV–mid VI). Eligibility requires an

irreversible dementia diagnosis, need for long-term nursing care, independent mobility, ability to eat and assist with personal care.

Transition to skilled nursing is recommended as dementia advances (e.g., bedbound status, inability to eat or participate, or higher medical needs). For information: Unit Manager ext. 261.

BEAUTY/BARBER SHOP

We'd love to help you look and feel your best! Hair services can be scheduled through our Activities team or at the nurse's station. A list of approved stylists and their fees is posted in the shop for your convenience. Prior to service, payment arrangements must be made with the Business Office at 231.845.5185, ext. 221.

BED-HOLDS

A bed-hold reserves your bed during hospitalization or therapeutic leave. If not reserving, you will be readmitted to the next available bed if you meet admission criteria. Reserve bed payments hold the same bed until return, release, or determination you will not return.

Residents receive a Bed-Hold Notice (FAQs) and Request/Release form upon transfer or temporary therapeutic leave. In emergencies, we contact the resident/representative within 24 hours (next business day for weekends/holidays).

BED-HOLD COSTS

Private pay: billed at the daily private rate.

Medicare: does not cover bed-holds.

Medicaid: may cover up to 10 days for emergency hospitalization if 98% occupancy at transfer and return is expected within 10 days; otherwise, costs are the resident's responsibility. Medicaid may also allow up to 18 therapeutic leave days per 365 days with physician approval.

Direct questions about the facility's bed-hold policy to the Admissions Office.

BED RAILS

Use of bed rails requires assessment of need, risks, and benefits; trial of alternatives; physician order; and informed consent. Discuss with your care team if interested.

CALL LIGHTS

Each resident receives a personal call light; adaptive options are available. Calls alert the nursing station for response.

CARE CONFERENCES

Residents participate in person-centered care planning and may include individuals of their choice. Initial conference occurs within 21 days of admission in 15-minute increments and quarterly thereafter. Invitations are sent in advance. Direct questions to a member of our Social Services Staff. Urgent concerns should be directed to the Charge Nurse.

CLOTHING

Personal clothing is encouraged as space permits. For short-term rehab, please bring comfortable exercise-type clothing and non-skid comfortable tennis or walking shoes that tie or have Velcro fasteners. For long-term care, comfortable street clothes, sleepwear, undergarments, and non-skid comfortable shoes are recommended. Please present items to nursing for photographing and labeling to help ensure proper return after laundering.

COMMUNICATION SERVICES

If you are unable to speak or understand English, we will provide an interpretation service in your native language at no cost to you. The service will assist you in communication with your care team. All information will be strictly confidential.

COMPLAINTS AND GRIEVANCES

We aim to resolve concerns promptly. A complaint is a verbal concern addressed on the spot; a grievance is a concern requiring formal review. Use the steps below:

- **Step 1:** Notify the on-duty Charge Nurse (available 24/7).
- **Step 2:** If unresolved, complete a Resident Grievance Report (OMCF Form 1-55). Assistance is available.
- **Step 3:** Submit the form to the Charge Nurse; the Grievance Official/Director of Nursing will be notified.
- **Step 4:** If unresolved, schedule a meeting with the Administrator.
- **Step 5:** If still unresolved, contact LARA Health Facility Complaints (1.800.882.6006) or the State Ombudsman (1.866.485.9393).

Confidentiality is maintained when possible. Investigation timeframes: within 24 hours for abuse/neglect/misappropriation; within 5 days for actual harm; within 15 days for other concerns. Written response within 30 days. Findings feed our Quality Improvement Program.

DIETARY SERVICES AND DINING

Meals are planned by a licensed Dietitian with resident needs and preferences in mind. Dining rooms are available in the main building and Sutter Living Center. Residents are welcome and encouraged to eat in the dining rooms.

Menus and Alternative Menus

Meals are planned by a licensed Dietitian with resident needs and preferences in mind. Dining rooms are available in the main building and Sutter Living Center. Suggestions are welcome!

Therapeutic Diets

Therapeutic diets are provided per physician orders and individualized when possible.

Meal Times

Main Dining Room — Breakfast 7:15 am | Lunch 12:00 pm | Supper 5:15 pm
Sutter Living Center — Breakfast 7:30 am | Lunch 12:30 pm | Supper 5:30 pm

Guest Meal Trays

Guests may dine with residents. Request trays through the nursing station at least 30 minutes before meals. Fees are paid at the Business Office. Limit: 4 guest trays per meal per resident; holiday arrangements may differ.

Food Brought in for Residents

Please note the following guidelines:

- Bring items to the nursing station for inspection, labeling, and dating.
- Single-serve portions in disposable containers are preferred.
- Refrigerated items are stored in pantry refrigerators/freezers; non-refrigerated items in airtight containers, either in pantry or resident's room.
- Check with the Charge Nurse if the resident has special diets or texture modifications.

DISCHARGES

Discharge planning begins at admission. Our interdisciplinary team works with you to establish goals and create a personalized plan for a safe, smooth transition—whether returning home or moving to an appropriate care setting. Social Services provides guidance and coordinates community resources throughout the process.

Discharges Against Medical Advice (AMA)

If a resident chooses to leave against medical advice, we explain risks, benefits, and alternatives; notify the physician; and request completion of an AMA Release. We may contact Adult Protective Services if self-neglect is suspected.

Facility-Initiated (Involuntary) Discharge

Residents may be discharged only for limited reasons (needs cannot be met; no longer need nursing care; safety/health is endangered; failure to pay after reasonable notice; facility closure). Discharges follow law and require timely written notice, a State-approved plan, and appeal rights.

DONATIONS

Oakview accepts monetary donations for specific or general purposes. Donation funds are kept separate from operational accounts.

ELECTRIC WHEELCHAIRS

Independent use of motorized conveyances (electric wheelchairs) requires evaluation by rehabilitation staff, interdisciplinary approval, policy review, and a signed Agreement of Compliance. Privileges may be revoked by the interdisciplinary team to ensure safety; written notice will be provided.

EMERGENCY PREPAREDNESS

Emergencies are rare but being prepared helps keep everyone safe.

Written Plan, Training & Drills

Oakview maintains written emergency plan that is reviewed and tested every year that covers weather emergencies (tornadoes, severe winter storms); security incidents (bomb threats, terrorism, active shooter); natural disasters (floods); and infectious disease outbreaks (influenza, SARS, COVID-19, and others). All staff and volunteers receive training and participate in drills.

Communication

We will notify families if an evacuation occurs by posting relevant information on our website. You may receive a personal call or recorded message. An email notification may also be sent if an address has been provided.

If facility phone lines are busy, you may hear a recorded message with information and/or instructions.

Evacuation vs. Shelter-in-Place

Our Administrator acts as Incident Commander and works with department heads and local emergency officials to decide whether to evacuate or shelter-in-place.

- **Evacuation**
 - We have agreements with other facilities and transportation providers.
 - Nurses send medical information with each resident and keep a log of their location.
 - Immediate evacuation zones are:
 - General Side** | Front parking lot
 - Alzheimer's Unit** | Sutter Living Center (SLC) parking lot
- **Shelter-in-Place**
 - Used when it's safer to remain inside.
 - We maintain food, water, power, medications, and supplies for at least 3 days.
 - Additional supplies can be delivered if needed

Lockdown Procedures

In certain situations, the facility may go into lockdown, meaning no one can enter or leave. Reasons include:

- Hazardous chemicals inside or outside the building
- Severe weather
- Police activity nearby

If a lockdown occurs, remain calm and follow instructions from staff or emergency personnel.

What Families Can Do

- Keep your contact information up to date.
- Participate in drills when invited.
- Familiarize yourself with evacuation locations.

GIFTS, GRATUITIES AND TIPPING

Employees may not accept gifts, gratuities, or tips. Services are provided as part of their duties.

HEALTH CARE INSPECTIONS

State and federal inspections occur without notice and are required for licensure/certification. Reports are available in the front lobby.

HOSPICE

Residents may choose hospice care for comfort and support during a terminal illness. This includes medications, supplies, and equipment related to the condition.

Depending on your insurance, deductibles or copays may apply. Please note that room and board are not covered by hospice and are billed privately or through Medicaid.

HOSPITALITY SUITE

A dedicated suite is offered to families during a resident's final hours if available. Amenities are provided around the clock. Ask nursing staff; a Hospitality Suite Use form is required.

HOUSEKEEPING

Resident rooms are cleaned daily (6:30 am–3:00 pm). Bed frames are washed quarterly or at discharge; wheelchairs are cleaned bimonthly or as needed.

INFECTION PREVENTION AND CONTROL PROGRAM

Our Infection Preventionist oversees a program aligned with national standards to prevent and control communicable diseases. Please observe signs posted in the facility to inform you if facility operations have been altered, such as masking requirements in the event of an outbreak.

Respiratory Illness & COVID-19 Mitigation

We implement mitigation efforts to prevent or reduce risk of transmission such as:

- Monitor local conditions and coordinate with community partners.
- Follow CMS/CDC guidance for prevention, response and reporting.
- Require ill staff to remain home per CDC guidelines.
- Educate staff and ensure adequate PPE supplies.

Hand Hygiene

Practicing good hand hygiene is the single most important thing you can do to stop the spread of infection. Hand sanitizer dispensers and handwashing sinks are available throughout the building. We encourage residents, families, and visitors to wash their hands when entering or exiting a room.

Cough Etiquette and Respiratory Hygiene

- Cover your mouth and nose with a tissue when coughing or sneezing.
- Use the nearest waste receptacle to dispose of the tissue after use.
- Perform hand hygiene after having contact with respiratory secretions and contaminated objects/material
- Wear a face mask and keep a distance of at least 3 feet from others if you are having symptoms of respiratory illness. Face masks can be obtained at any facility entrance or at the nurse's station.

Vaccinations

Residents' vaccination status will be reviewed upon admission and as needed per to keep each resident up to date with the CDC recommendations for the following vaccinations:

- COVID-19
- Influenza
- Pneumococcal
- RSV
- TDAP (Tetanus, diphtheria, and pertussis)
- Shingles (Shingrix)

Prior to vaccination, residents will be screened for contraindications, provided education and will be given a consent/declination form to complete.

LAUNDRY

Laundry operates Monday–Friday (6:30 am–3:00 pm) for facility and resident items at no charge. Clean personal laundry is delivered daily (Mon–Fri). Families who launder at home should provide a hamper and notify the nursing station for signage.

LEAVING THE BUILDING

A physician order is required to leave the facility; health status is considered each outing. Sign out/in at the nursing station. Staff cannot assist into personal vehicles if a lift is required; Dial-A-Ride is recommended.

LIBRARY

The Resident Library offers books, periodicals, and nostalgic materials. Items may be taken to rooms; please return when finished. A private phone is also available.

LONG TERM CARE INSURANCE

Coverage varies by policy. Contact your insurer for benefits. The Business Office will assist with claims.

MAINTENANCE AND REPAIRS

Maintenance operates Monday–Friday (6:00 am–4:30 pm) with after-hours emergency coverage. Personal equipment requires a safety inspection. The facility does not repair or maintain personal property.

MEDICAID

Medicaid eligibility is determined by MDHHS and may include a Patient Pay Amount. Nursing facility care requires meeting the Level of Care Determination (LOCD). If not private pay, apply promptly through Mason County DHHS. Contact Financial Services at 231.845.5185, ext. 222 for more information on completing a Medicaid application.

MEDICARE ADVANTAGE

Medicare Advantage plans are offered by private companies and typically bundle Parts A, B, and D. Networks and prior approvals may apply; coverage varies by plan.

MEDICARE COINSURANCE

During a Medicare stay, daily coinsurance applies for days 21–100 at CMS-set rates. Supplemental insurance will be verified but is not a guarantee of payment.

MEDICARE PART A

Part A may cover semi-private rooms, meals, skilled nursing, therapies, and medically necessary services after a qualifying 3-day inpatient hospital stay. If eligible, days 1–20 may have no cost; coinsurance applies for days 21–100; all costs apply beyond day 100. Check with your plan.

To qualify for skilled nursing facility care, your doctor must certify that you need daily skilled care (like intravenous fluids/medications or physical therapy) which, as a practical matter, you can only get as a skilled nursing facility inpatient.

MEDICARE PART B

Part B helps cover medically necessary services from providers, outpatient care, home health care, durable medical equipment and some preventive services.

MEDICAL SERVICES/PHYSICIAN VISITS

Our Medical Director advises nursing. Residents may choose a primary physician; non-affiliated physicians must obtain privileges. Physicians must visit at least every 30 days for the first 90 days, then every 30–60 days. Nursing updates physicians daily as needed.

MEDICATIONS

Medications are provided via pharmacy under physician orders and administered by licensed nurses. Self-administration may be considered when appropriate. Over-the-counter items (e.g., creams, supplements) require physician approval. Ask a nurse for assistance with this.

MENTAL HEALTH

Emotional well-being is an essential part of daily life. Our Social Services team provides guidance and support to help residents cope with challenges. Licensed social workers are available to address concerns and coordinate specialized mental health services when needed

NEWSLETTER

The Oakleaf is a monthly newsletter from Recreational Therapy with events and department updates. It is typically distributed on the first of each month and mailed to resident representatives. Residents and families may submit content to Therapeutic and Recreational Services.

OMBUDSMAN

The Michigan Long-Term Care Ombudsman Program advocates for residents of licensed long-term care facilities. Visit mltcop.org or call **1.866.485.9393**.

Local Ombudsman Services

- Explain resident rights and empower self-advocacy.
- Assist with resolving concerns and promote best practices.
- Provide community education and monitor long-term care issues.

When To Call An Ombudsman

- Unresolved questions or concerns about care.
- Questions about rights or alternatives to nursing home care.
- Shopping for long-term care services or seeking technical expertise.
- Scheduling presentations on long-term care topics.

PATIENT PORTAL

A free patient portal provides access to select resident chart information consistent with the Cures Act. Some items (e.g., external labs) may not be viewable. To enroll, submit a *Patient Portal Request (OMCF Form 10-41)* with email and mobile number. After activation, you will receive an email from noreply@connectedcarecenter.com to create an account with text verification. Login at www.connectedcarecenter.com. Questions: Admissions Coordinator 231.845.5185 x227.

PERSONAL BELONGINGS

Personal items are welcome, provided space and safety allow. Wall-mounted televisions with cable are provided at no cost, and basic toiletries are provided. Essential items such as eyeglasses, hearing aids, and dentures should be brought

with secure cases. All belongings must be presented to nursing staff for documentation and labeling; plug-in electronics require a maintenance safety check.

Please leave the following items at home: valuables, large amounts of money, medications, purses/wallets, harmful or illegal objects, electrical items (extension cords, space heaters, heating pads/blankets television, or fans), special care clothing that require no or low heat drying.

Report any damage or loss immediately. The facility is not responsible for damage or loss of electronic devices.

PETS

We love when pets visit! Your furry friends are welcome as long as they're up to date on vaccinations and remain under your care during the visit. For added joy, Oakview also has its own family of pets—like cheerful birds, colorful fish, and occasionally playful kittens or puppies—to brighten our residents' days.

PHYSICIAN APPOINTMENTS AND TRANSPORTATION

Oakview provides transportation for appointments; families are encouraged to transport when possible. Communicate plans to the nursing station and sign out/in.

Scheduling and Packets

Appointments are scheduled through Nursing. Residents bring an appointment packet for office completion and return it to the nursing station afterward.

PRIVACY PRACTICES

Oakview complies with HIPAA Privacy and Security Standards. The Notice of Privacy Practices is provided at admission. Questions: HIPAA Officer at 231.845.5185 x266.

PRIVATE PAY

The Mason County Department of Health & Human Services Board sets the daily private pay rate for room, board, and routine care. In addition, you may see charges for physician visits and certain specialized services such as medications, oxygen, x-rays, or therapy. If rates need to change, we will provide at least 60 days' notice. Private pay is billed one month in advance.

REHABILITATION/THERAPY SERVICES

Our goal is to help each resident achieve the highest possible level of independence. When medically necessary, individualized therapy programs focus on restoring movement, relieving pain, promoting healing, improving communication, and

supporting daily living activities. Whenever possible, we aim to facilitate a safe return home or transition to a lower level of care.

If therapy is required, the resident's physician will provide orders for Physical, Occupational, or Speech Therapy. A licensed therapist will evaluate the resident and develop a treatment plan. If formal therapy is not appropriate, the therapist may recommend nursing-assisted programs such as walking, dressing, or communication support.

Therapy sessions are typically scheduled Monday through Friday for 30–60 minutes, with additional visits on weekends or holidays as needed. Family meetings or training sessions may also be arranged.

Occupational Therapy

Occupational Therapy focuses on improving activities of daily living (ADLs), transfers, upper-body strength, and coordination. Treatment may occur in the resident's room, ADL kitchen, therapy room, or a simulated home environment, and typically includes instruction in dressing, personal hygiene, meal preparation, and other routine tasks.

Physical Therapy

Physical Therapy addresses issues with mobility, transfers, strength, and balance, as well as certain types of musculoskeletal pain. Most sessions occur in the therapy department and may include gait training, assistive device selection, bed mobility, and safe transfer techniques. When weakness or balance deficits are present, individualized exercise programs are developed to meet the resident's needs.

Speech Therapy

Speech Therapy addresses communication challenges (speech, language, voice), cognitive-linguistic skills, and swallowing disorders. Treatment may include exercises to improve communication or comprehension, as well as swallowing assessments with recommendations for safe food and liquid textures.

REPORTING CORPORATE COMPLIANCE AND HIPAA CONCERNS

Oakview encourages residents, families, staff, and the public to report any suspected violations of law, facility operations, or resident care. Reports can be made through any of the following:

- **Phone:** 231.845.5185 (ext. 266)
- **Confidential Hotline:** 231.845.6605
- **Email:** ccd@oakviewmcf.com

- **Written Note:** Place in the Compliance Director’s mailbox near the Business Office
- **Mail:** Corporate Compliance Director
Oakview Medical Care Facility
1001 Diana Street
Ludington, MI 49431

Reports may be submitted anonymously. If you request a written response, your identity will be required. Oakview strictly prohibits retaliation against anyone who reports a concern in good faith.

RESIDENT ABUSE

Residents have the right to be free from all forms of abuse, including verbal, physical, sexual, mental, corporal punishment, involuntary seclusion, and misappropriation of property. If you believe you are a victim of abuse or witness an incident, immediately notify the on-duty Charge Nurse, Director of Nursing Services, or the Nursing Home Administrator.

RESIDENT CARE BY NON-EMPLOYEES

Direct care services may only be provided by licensed, registered, or certified staff members, or individuals granted clinical privileges within their scope of practice. Non-employees are not permitted to medicate, ambulate, bathe, transfer, dress, or feed residents except under the following conditions:

- **Activities of Daily Living (ADLs):** After training by facility therapists to support discharge planning.
- **Ambulation:** Only with a qualified staff member present and performing the transfer.
- **Dressing:** Permitted if the resident is typically independent; otherwise, staff assistance is required.
- **Feeding:** Allowed only after documented training by facility staff to ensure safe technique and prevent aspiration.

Staff observing unauthorized care must immediately stop the activity and may seek assistance from nursing or administration.

RESIDENT COUNCIL

Established in 1986, Oakview’s Resident/Family Council is a nonprofit organization dedicated to supporting all residents. The Council is resident-led, with staff assistance as requested. Membership includes every resident and their representative, with no dues or fees required. Meetings are typically held monthly.

RESIDENT PERSONAL FUNDS

Oakview maintains resident trust funds in an interest-bearing account separate from facility funds. Balances over \$50 earn interest and are considered assets for Medicaid eligibility.

Residents receive quarterly statements and may request account details at any time. Medicaid residents will be notified when their balance is within \$200 of the SSI resource limit, as exceeding this limit may affect eligibility.

Upon discharge, eviction, or death, funds and a final accounting are returned within seven days to the resident or, in the case of death, to the estate administrator per state law.

The facility carries a surety bond to protect resident funds. No charges will be applied for items covered by Medicaid or Medicare, except applicable deductibles and coinsurance. Charges for optional services beyond covered benefits may apply as outlined in the Resident Contract.

Access to funds is provided promptly:

- Same day for amounts under \$100 (\$50 for Medicaid residents)
- Within three banking days for larger amounts

A petty cash fund is available for small withdrawals during business hours; after hours, the Charge Nurse manages access. Receipts are issued for all transactions.

RESIDENT RESPONSIBILITIES

Residents are expected to follow facility rules and provide accurate medical history to support their care plan. Courtesy toward other residents, staff, and property is required. Residents or their legal representatives must promptly supply complete payment information. Social Services staff are available to assist with questions about alternative payment options.

RESIDENT RIGHTS

Residents are entitled to care that respects their dignity, individuality, and rights. Providing appropriate, high-quality care is central to their daily routine and plan of care. No resident will be denied care based on race, creed, color, national origin, religion, sex, age, disability, sexual orientation, marital status, or payment source.

SAFETY

Residents should not keep scissors or needles in their rooms unless approved for independent craft projects. Approval requires demonstrating safe use and proper

storage. Once confirmed, staff will provide a lock box for secure storage. If safety concerns arise, items may be removed at staff discretion.

SMOKING

Smoking and the use of all tobacco products, including e-cigarettes and similar materials, are strictly prohibited on Oakview Medical Care Facility property, including buildings, grounds, and vehicles. Violations may result in involuntary discharge or transfer in accordance with state law and facility policy.

SOCIAL SERVICES

Your comfort and peace of mind matter to us. Our Social Services team is here to listen, support, and help resolve any concerns you may have. Please share issues as soon as they arise so we can address them promptly and ensure you feel safe and cared for.

TELEPHONES

Each resident room is equipped with a telephone jack. Residents or their representatives are responsible for providing a personal telephone and covering all installation, connection, and service costs.

To arrange service, contact Frontier at **1.888.920.9520**. Installation must occur Monday–Friday between 8:00 a.m. and 3:00 p.m. Notify the Maintenance Director when the appointment is scheduled.

For residents without a personal phone, cordless phones are available at the nursing stations for local calls only (collect calls are not accepted):

- Main Nurses Station: 231.233.2681
- SLC Nurses Station: 231.233.4119

VISITATION

We warmly welcome family and friends to visit at any time. Your presence brings comfort and joy to our residents, and we encourage you to spend meaningful time together. Occasionally, staff may ask visitors to step out briefly during personal care to ensure privacy and dignity—we appreciate your understanding.

Security

For everyone’s safety, entrances are locked in the evening. If you arrive after hours, simply use the call button and speaker at the main entrance or the Sutter Living Center doorbell, and a staff member will assist you promptly.

Sign In

Please sign in at the kiosks located at each entrance. If a kiosk is unavailable, use the manual log. This helps us keep residents safe and ensures we can reach you if needed.

Visitation Areas

Visits may take place in resident rooms or welcoming spaces such as the lobby, aviary, or commons. If you'd like a private area for a family gathering, let the nursing station know—we'll gladly make arrangements.

VOTING

We're committed to helping every resident exercise their right to vote. For assistance or questions, contact a member of our Social Services team.

WAITING LIST

We receive referrals from multiple sources. As a county-owned facility, we give priority to Mason County residents to ensure we serve our local community first. Applicants from other counties or states are admitted based on bed availability in the order received. Individuals on our waiting list may be living at home, in adult foster care, another nursing facility or a hospital.

RESOURCE INFORMATION

Facility Numbers

Oakview Main Number	231.845.5185
Main Nurses Station	Extension 234 or 235
Sutter Living Center Nurses Station	Extension 256 or 257
Administrator	Extension 228
Corporate Compliance/HIPAA	Extension 266
Dietary Services	Extension 231
Environmental Services	Extension 294
Financial Services (Business Office)	Extension 223
Maintenance Services	Extension 237
Nursing Services	Extension 224
Rehabilitation Services	Extension 249
Social Services	Extension 261
Therapeutic Recreation (Activities)	Extension 259

Office Hours: Office Staff are generally available Monday-Friday, 8:00am-4:30pm. Leave a voicemail for return phone call.

Portable Phones for Resident Use

Main Nurses Station Portable Phone	231.233.2681
SLC Nurses Station Portable Phone.....	231.233.4199

Local Transportation

Dial-a-Ride

231.845.6218

Hours: Mon-Fri: 6am – 7pm* | Sat: 8am – 4pm* | Sun: 8am – 2pm*

* Last call: 30 minutes prior to close each day

TV CHANNEL GUIDE

Following is a list of channels available on facility TVs An individual laminated guide is also provided separately upon admission and available upon request.

#	CHANNEL NAME	#	CHANNEL NAME
2	TV GUIDE	26	FETV
3	HOUSE CHANNEL	27	FOOD NETWORK
4	WWTW (CBS)	28	FREEFORM
5	WFQX (FOX)	29	FX
6	WCMV (PBS)	30	HALLMARK
7	WPBN)NBC)	31	HALLMARK M&M
8	WGTU (ABC)	32	HGTV
9	ACCUWEATHER	33	HISTORY
10	CNN	34	IFC HD
11	FOX NEWS	35	IMPACT
12	MSNBC	36	ION TV
13	BALLY SPORTS	37	LIFETIME
14	BIG TEN NETWORK	38	NATIONAL GEO
15	ESPN	39	SUNDANCE
16	GSN	40	TBS
17	A&E	41	TCM
18	AMC	42	TLC
19	ANIMAL PLANET	43	TNT
20	BRAVO	44	TRUTV
21	CARTOON NETWORK	45	TV LAND
22	CMT	46	USA
23	COMEDY CENTRAL	47	WE TV
24	DISCOVERY	48	INSP

