

# **Cumberland Manor**



## **Application for Admission**

**154 Sunny Slope Drive  
Bridgeton, NJ 08302  
(856) 455-8000**

**APPLICATION FOR ADMISSION**

Date \_\_\_\_\_

**I. GENERAL INFORMATION CONCERNING PROSPECTIVE RESIDENT**

**A. Resident**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Place of Birth (county/state) \_\_\_\_\_

Marital Status: \_\_\_\_\_ Religion: \_\_\_\_\_ Church: \_\_\_\_\_

Clergy: \_\_\_\_\_ Number of Children: \_\_\_\_\_

Previous Occupation: \_\_\_\_\_ Military Service: Yes \_\_\_\_\_ No \_\_\_\_\_

Referred to Cumberland Manor by: \_\_\_\_\_

Resident now at  home  hospital  nursing home  Other Specify \_\_\_\_\_

Facility Information: Name \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Referral Source: \_\_\_\_\_

Has the resident ever been in another nursing home? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when and where:

Name of facility: \_\_\_\_\_ When: \_\_\_\_\_

Is the resident aware of the placement decision? Yes \_\_\_\_\_ No \_\_\_\_\_

**B. Primary Contact**

Name: \_\_\_\_\_ Relationship to resident: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**C. Power of Attorney**

Has anyone been appointed Power of Attorney or Guardian? Yes \_\_\_\_\_ No \_\_\_\_\_

Has an Advance Directive been prepared? Yes \_\_\_\_\_ No \_\_\_\_\_

**D. Additional Information (significant others):**

Name: \_\_\_\_\_ Relationship to resident: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (business) \_\_\_\_\_ (cell) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to resident: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (business) \_\_\_\_\_ (cell) \_\_\_\_\_

**E. Medical Condition (see nurse interview form)**

**II. METHOD OF PAYMENT**

**A. Financial Information Concerning Resident**

Social Security #: \_\_\_\_\_ Medicare #: \_\_\_\_\_ Date: \_\_\_\_\_

Part A \_\_\_\_\_ Part B \_\_\_\_\_

Medigap #: \_\_\_\_\_ Medicare Supplemental Insurance \_\_\_\_\_

Prescription Card: \_\_\_\_\_ Policy #: \_\_\_\_\_

Long-Term Care Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_

Other Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_

Method of Payment: \_\_\_\_\_

**B. Monthly Income (Government funded applicants only)**

Recipient's Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Retirement: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Rental Income: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Other (specify): \_\_\_\_\_ Amount \$ \_\_\_\_\_

I hereby certify that to the best of my knowledge and belief, the above stated information is true, correct and complete. I understand that if any information has been falsely represented, this will be sufficient cause for voiding my application for admission. All of the information will be kept confidential by the nursing center. If resident's application for financial assistance is denied after resident's admission to Cumberland Manor, the resident/sponsor/guardian will be held responsible for all charges incurred from the Date of Admission.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Manor Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Documents of importance that are needed for our admission office for prospective clients.

1. Copy of Social Security Card
2. Copy of Medicare Card
3. Copy of Prescription Card (PAAD, MEDICARE D)
4. Copy of any other Insurance (AARP, BC/BS, Etc.)
5. Copy of Power of Attorney if available
6. Copy of Advance Directive
7. Copy of Living Will
8. Copy of Durable POA
9. Copy of Prepaid Funeral
10. Copy of Life Insurance Policies
11. Copy of Social Security Check Amount
12. Copy of any pensions the client is receiving
13. Copies of all assets (recent bank statements, checking, savings) IRA's, CD's or stocks
14. Copy of Deed to house if resident is a widow or widower and house is in their name only
15. Copies of any other property if applicable

We will be glad to make copies for you if you are unable to do so.

Barbara Caselli  
Admitting Officer

# CUMBERLAND MANOR

## KEY CONTACT NAMES

Phone (856) 455-8000

Extension

Administrator	Mark Stratoti, LNHA	2100
Director of Nursing	Diane K. Smith, MA, RN, CS	2212
Assistant Director of Nursing	Diane Hill, BSN, RN, C	2244
Accountant/Business Office Manager	Tammi Reynolds	2205
Director of Recreation	Leslie Shannon, CTRS	2220
Housekeeper/Laundry Supervisor	Bonnie O'Brien	2214
Social Worker	Nina Bobkovs, LSW	2286
Social Worker	Denise Haney, BSW	2289
Dietitian	Diane Griffith, RD	2255
1st Floor Unit Coordinator	Heather Williams, RN	2267
2nd Floor Unit Coordinator	Micki Kimble, BSN, RN	2241
3rd Floor Unit Coordinator	Carole McManus, RN	2248
Nursing Supervisor		2102
Admissions Officer	Barbara Caselli	2285
Medicare Coordinator	Karen Price, RN	2339

## **Activity Programs**

A monthly Activity Calendar is distributed at the beginning of each month. The calendars are subject to change. A daily updated list of activities is posted across from the Nurses' Station. Each calendar includes activities that are held on the Sunporch and in the Main Activity Room.

Main Activity Room activities are generally geared towards the higher functioning residents. Church services for various denominations are held throughout the month. Check the daily Activity Roster located across from the Nurses' Station for times and location.

Outings are held on a monthly basis. Due to limited room on the CATS bus we must rotate turns for outings. Residents are responsible for paying for any outings that require money.

## **Beauty / Barber Services**

Beautician services are available at the Manor. Check Beauty Shop for schedule.

Barber Services are available at the Manor. Please check Beauty Shop for schedule.

## **Business Office**

Residents and/or family members may visit the Business Office, Monday - Friday (8:30 A.M. - 4:00 P.M.). The Business Office will assist with the following:

- To get change for currency (coins)
- To get money from their PNA Account
- To ask about their PNA Account (amount of money they have)
- To endorse Social Security, Pension and other checks
- To make payment for monthly charges
- To inquire about their Account
- To ask questions about Medicaid / Medicare payments
- To obtain change of address / payee form for Social Security
- To obtain A PAAD Application Form

## **Church Services**

Church services for various denominations are held throughout the month. Times and locations of all church services, Bible studies and related religious events can be found on the "Today's Activities" located across from the Nurses Station. If you need assistance with a specific spiritual need, please contact the Activity Department.

## **Home Visits**

We encourage our residents to go on home visits, whether it is just for a few hours or an overnight(s) stay. In order for us to prepare for your loved one's visit, we ask that you let us know the following:

1. Please give us as much notice as possible when planning to take your loved one home. During the holidays especially, we have many residents who go home and our Pharmacy needs time to prepare everyone's medications.
2. Please let us know when you will pick up your loved one and when you plan for them to return.
3. If you would like to have your loved one wear particular clothing on the day of the visit, please let the Nurse know when you arrange the visit.
4. When you come to pick up your loved one, please notify the Nurse that you are here to take the resident home, request any medication and instructions to go with the resident, and sign the resident out at the Nurse's station before you leave.
5. When you return the resident, please let the Nurse know how the visit went and return any unused medications.

This will help us to make sure that all arrangements for your loved one's home visit are complete when you arrive to take them home.

- Medicaid allows 24 overnight visits per year.
- Medicare Part A does not authorize any home visits.

If you have any questions regarding this, please contact the Business Office.

## **Laundry and Other Personal Items**

Please mark all personal items with **permanent markers**. You may obtain a laundry marker at the Nurses' Station. Remember to **mark all** personal items brought in throughout the year. Please bring all clothing so it may be labeled by our Laundry Department.

If you bring food in, please make sure you store it in an airtight container to protect the food and the resident from pests.

You may bring in personal items from home to make your living area more comfortable. Once again please mark the resident's name on all objects.

Personal pictures that have meaning or personal objects are welcomed to make residents more comfortable.

If you experience problems in any of the following areas or have any questions, please contact Housekeeping:

Cleaning of Room (except inside personal cabinets)

Laundry or Clothing (missing, damaged)

Drapes, Shades, etc., (torn, missing or falling)

Furniture (Repairs or Replacement and moving)

## **All Family Members and Visitors**

Please make sure all personal clothing items are marked with the resident's name and Cumberland Manor or C.M. on them. Items such as clothing/jackets, undergarments/knee highs or stockings, afghans and blankets.

If you are in need of assistance, please contact the Laundry Department between the hours of 7 AM and 3 PM, at Extension 2237.

We do have a computer labeling system available at your request to label the resident's clothing.

## **Mail Delivery**

The Activities Department delivers all resident mail in accordance to the Mail Authorization Form filled out on admission. Activity Staff will assist in reading personal cards and letters to residents on request.

## **Meals**

All residents receive the least restricted diet possible and are given the opportunity to make food choices. Meal plans are individualized and consideration is given to likes and dislikes and food tolerances of individual residents. The main dining room is open daily for lunch and dinner and a choice of menus is offered. Residents may also eat in their rooms or the dayroom areas if desired.

### **Family Style Breakfast**

A family style breakfast is offered daily in the main dining room. Breakfast is served from 7:00 - 8:00 A.M.

### **Guest Meals**

Family and/or friends who are visiting during mealtime may request a guest tray. There will be no charge for guest trays. However, guest trays are limited to two per resident per day. Additionally, guest trays are limited to the main entree and beverages include coffee, tea or milk. Vending machines are located throughout the facility for those desiring soft drinks or juices. Arrangements to obtain a guest tray should be made at least one-half hour prior to the meal. Requests should be made at the nursing desk on the floor the resident resides.

### **Newspaper Delivery**

If you choose to have a newspaper delivered to the Cumberland Manor, please notify the Activity Director, once it is ordered. This will insure proper delivery is made. If you stop delivery of the newspaper, the Activity Director should also be notified.

### **Nursing Services**

On behalf of all the nurses and nurse aides, I welcome you to Cumberland Manor. We will do all we can to make you comfortable, keep you healthy and meet your needs. We are proud to have a very competent and caring staff. Many of our nurses are certified in gerontology and all of our nurse aides are certified. We strive for excellence.

The facility has three nursing units. Each has a Clinical Coordinator who oversees the clinical care of the residents on that unit. She is usually on duty during the daytime hours, but if needed, can be available at other times. There is a nurse in charge of each nursing station 24 hours a day, so if you have any questions or concerns, please direct them to the person in charge. Also, a Nursing Supervisor is always on duty to provide administrative and clinical support to the nursing staff. (We utilize a primary

nurse aide system which means that during the daytime and evening, the same nurse aide will provide care to you.) This provides consistency in care and helps to get to know your individual needs and preferences.

We are committed to providing excellent care and welcome your comments.

## **Parking**

Visitors may park in all non-reserved parking slots. Handicapped parking is available.

## **Smoking Policy**

The Cumberland Manor is a smoke free facility. Smoking areas are available outside the Activity Room, outside the front entrance and the first floor patio. Residents are not allowed to have cigarettes, lighters or matches, until an assessment is completed.

## **Social Services**

Social Services is available to residents of Cumberland Manor. The office is open Monday through Friday, 8:30 A.M. To 4:00 P.M. Should a need to speak with a Social Worker arise after 4:00 P.M., the office telephone extensions are connected a voice mail. Your message will be answered promptly.

Social Workers assist residents admitted to a nursing facility with the following: Discharge Planning for community reentry; financial assistance; referral to other community based agencies, i.e., Social Security; Board of Social Services for Medicaid application, and the Office on Aging,

Resocialization to assist the resident with adjustment to the new environment and maximize their interests and abilities, clinical assessment and counseling, to address social, emotional and psychological needs; assistance with securing glasses, hearing aids, and dentures and other durable medical equipment and prostheses; assist with transportation needs; and execution of Advance Directives and Durable Power of Attorney documents.

Additionally, Social Workers are available to the families of residents for ongoing problem-solving and supportive counseling. Information about special clothing purchases and laundry needs is available through the department also.

Social Workers are participants on the Interdisciplinary Clinical team and begin assessing the residents' psychosocial, behavioral, and emotional needs from the day of admissions. Social Workers assume the roles of advocate, enabler, facilitator, and mediator for both residents and their families in the nursing facility setting.

Overall, the Social Worker's primary goal in the nursing facility is to afford the maintenance of dignity of the resident while increasing the quality of life. The assurance of Resident Rights is the foundation of our professional services offered.

## **Stamps**

Stamps and stationary are available for purchase through the Activity Department.

## **Visiting Hours**

Visiting hours are from 8:00 A.M. To 8:00 P.M., or you may call if you have special needs.

## **Committees**

### **Resident Council**

The residents of Cumberland Manor hold a meeting at least once a month to discuss ways in which to make their home comfortable to voice concerns and establish goals. Everyone is welcome to attend. Please refer to your activity calendar for scheduled date and time.

### **Resident Food Committee**

This is a meeting held once a month where residents can openly discuss the food and the menus of the Cumberland Manor. The Committee's input is valuable to improving your dining experience at the Manor. Please refer to your Activity Calendar for time and date of the Meeting.

### **Manor Newsletter Committee**

The Cumberland Manor publishes a Newsletter approximately once a month. We encourage resident input into the paper. If you have any information you would like to publish, please see any Activity Staff Member or you may join us at the Newspaper Meeting held at 10:30 A.M. On the first Friday of every month.