

**Communications to Retirement Home Operators/Staff,
Home and Community Care Support Services Staff
and Service Provider Organization Staff about Missed
Home Care Visits in Retirement Homes**

**Ministry of Health
Ministry for Seniors and Accessibility**

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Purpose

This document aims to reduce the negative impacts of missed home care visits on retirement home residents by providing key information, clarifying the roles and responsibilities of care providers and outlining best practices that support a collaborative approach to risk assessment and neglect prevention, care and contingency planning, strong communication, and transparency.

Key information related to missed home care visits provided in this communication includes:

- [How missed home care visits are defined and tracked.](#)
- [How missed home care visits are communicated.](#)
- The role of collaborative [contingency](#) and [care planning](#) in reducing the risks of negative impacts to residents, including the prevention of neglect as defined in *Retirement Homes Act, 2010*.
- [Where to direct complaints about missed home care visits.](#)
- A summary of [the roles and responsibilities described throughout the document.](#)

This document does not replace requirements for retirement homes, service provider organizations and home and community support services laid out in applicable legislation, regulation and guidance. If anything in this document conflicts with requirements in applicable legislation, regulation or any other provincial requirements, those requirements prevail.

Context and Overview

In addition to the care they may purchase from licensed retirement home operators, approximately half of retirement home residents in Ontario are also patients of home and community care support services (HCCSSs) and receive HCCSS-funded care delivered by [Service Provider Organizations](#) (SPOs)¹.

Widespread staffing shortages have impacted all care providers and contributed to increased rates of missed home care visits in many regions across the province. Missed home care visits can have negative impacts on the health and wellbeing of retirement home residents, including on their physical and mental health, and finances. Missed

¹ If a direct contract has been established between the HCCSS and an individual retirement home for delivery of home care services to residents, retirement homes may take on the responsibilities of an SPO.

home care visits can also lead to increased stress and operational impacts for care providers, including staff of retirement homes, SPOs and HCCSSs.

The negative impacts of missed home care visits can be reduced by implementing the following measures which focus on timely, consistent and transparent communication, planning and collaboration between retirement home residents, their substitute decision-makers, designated caregivers, retirement homes, SPOs, and HCCSS care coordinators.

Definition and Tracking of Missed Home Care Visits

As part of the system of home care delivery, missed home care visits are defined as the incidence of care that is not provided in accordance with the HCCSS home care plan because a visit is missed or the SPO does not have the capacity to deliver the care. The definition includes any visit to a home care patient/retirement home resident that the SPO fails to attend and is **unable to reschedule to the satisfaction of the resident***. It is measured as a monthly rate (missed home care visits in the month divided by all scheduled home care visits in the month). Missed home care visits do not include absent visits that are rescheduled or resolved to the satisfaction of the resident.

***Residents include substitute decision maker(s) and designated caregiver(s) as appropriate when notification, engagement or consent is required.**

Accurate reporting and tracking of missed home care visits are critical to enabling the identification and resolution of issues experienced by retirement home residents. The rate of missed home care visits should continue to be tracked by SPOs and reported to Ontario Health under the terms of their contract with HCCSSs. Ontario Health monitors the rate of missed home care visits by region and HCCSSs use this information to inform the planning of ways to reduce risks posed to home care patients, including those living in retirement homes.

Communication of Missed Home Care Visits

SPOs should endeavor to avoid missed home care visits in retirement homes. If the care can't be delivered as scheduled and can't be rescheduled to the satisfaction of the resident, the SPO must communicate the home care visit will be missed to the resident and the retirement home at the earliest opportunity so that contingency plans can be initiated.

Where retirement homes are observing missed home care visits for residents that are frequent or repeated at the individual or home level, or result in risk of harm or neglect, they should bring these to the attention of the appropriate HCCSS care coordinator/contact.

Contingency Planning

It is important to ensure a back-up plan is in place so that the retirement home resident stays safe, and they and their other care providers are prepared with alternate arrangements if a home care visit is going to be missed.

Contingency planning for service interruptions is an established part of the home care planning process. Contingency plans play a critical role in supporting retirement home resident decision-making about how to reduce risks to their health, safety and wellbeing in the event that home care visits are missed.

Contingency planning for residents in retirement homes benefits from a collaborative approach between the SPO, HCCSSs, the retirement home, and the retirement home resident. While SPOs and HCCSSs are responsible for initiating the collaborative planning process at the onset of service, participation in contingency planning is a shared responsibility between the retirement home resident, the retirement home and SPO/HCCSS. Collaborative contingency planning for residents should include discussion on assessed risks, resident wishes, retirement home obligations, and resident risk of additional fees.

In the event that home care visits will be missed, the SPO is responsible for supporting the retirement home resident in initiating the execution of the contingency plan and notifying the retirement home the contingency plan is being executed. As an additional precaution, retirement homes are encouraged to support resident safety by checking in with the retirement home resident, confirming with the SPO the home care visit has been missed and supporting prompt initiation of the contingency plan if required.

Care Planning

The retirement home resident must be engaged in care planning. As part of the care planning process, retirement home residents should be advised of how information sharing between care providers can help to improve health outcomes and reduce missed home care visits. Retirement home resident consent to information sharing between care providers should be requested as part of the care planning process.

In addition, with the consent of the resident, collaboration is needed between retirement home staff, SPO staff and HCCSS staff in care planning in order to improve resident health outcomes and minimize risks due to missed home care visits.

Retirement home residents who receive home care must have both a:

- Home care plan including fulsome strategies/options to support resident outcomes, a client risk assessment, and the contingency plan for missed home care visits; and
- Retirement home Plan of Care, including the details of the planned home care services that will be provided by an SPO and the goals that the services are intended to achieve, to the extent that such information is available to the retirement home. Information about the risk assessment reflected in the home care plan would help to inform collaborative decisions about alternate care that may be provided by the retirement home, based on resident consent.

Under the *Retirement Homes Act, 2010*, the retirement home must take all reasonable steps to obtain details from the resident and the SPO about the planned home care services that will be provided by an SPO as well as the goals that the services are intended to achieve.

With the consent of the retirement home resident, retirement homes, SPOs and HCCSSs that are involved in the resident circle of care should transparently share information to support positive resident outcomes. In addition, a communication cycle should be established between care providers to share relevant information regarding changes or updates to care plans for retirement home residents.

Preventing Neglect in the Event of Missed Home Care Visits

Neglect is defined in the *Retirement Homes Act, 2010* as the failure to provide a resident with the care and assistance required for his or her health, safety or well-being and includes inaction or a pattern of inaction that jeopardizes the health or safety of one or more residents.

Missed home care visits may have varying degrees of impact on the health, safety and well-being of residents. Some home care services may be rescheduled to later dates or not replaced without resulting in harm or neglect to the retirement home resident. However, some missed home care visits can have serious implications for a retirement home resident, including an increased risk of neglect. Of particular concern are late, missed, or rescheduled home care visits that present a risk of harm because the retirement home resident's basic needs cannot be met in a timely manner (e.g., assistance with feeding that is required at certain times for individuals with diabetes).

SPOs, HCCSSs and retirement homes have a shared responsibility for retirement home resident outcomes and should work collaboratively to support resident health, safety and well-being.

Regardless of whether a home provides the service normally delivered by the SPO, the retirement home has an obligation to ensure that residents are protected from neglect, and that care is aligned with the requirements in the *Retirement Homes Act, 2010* and its Regulation. This must include:

- Monitoring residents to ensure care is adequate and aligned with the Plan of Care and requirements of the *Retirement Homes Act, 2010* and its Regulation.
- Considering the risks to resident health, safety and wellbeing when informed/aware that care is late, missed or rescheduled.
- If necessary to prevent neglect to the resident, providing services or assisting the resident with arranging services that are appropriate to reduce the observed risks to health, safety and wellbeing.

In instances where home care visits are missed frequently or repeatedly at the individual or home level or results in risk of harm or neglect to retirement home residents, the HCCSS care coordinator should work with the retirement home and the retirement home operator to find alternate solutions.

Directing Complaints

In the event that retirement home residents have complaints regarding the delivery of their home care, including lack of communication by the SPO regarding its inability to provide care as originally scheduled, the retirement home resident should be directed to contact their HCCSS using the regional contact information provided to them by HCCSS at the time of onboarding new patients. If requested by the retirement home resident, retirement homes can support residents in making complaints to HCCSS about missed home care visits.

To report harm, neglect or other complaints about home care in Ontario, call the Long-term Care ACTION Line at 1-866-434-0144.

General questions regarding home and community care support services can be directed to 310-2222 (no area code required).

Concerns about resident risk of harm or neglect should be brought to the attention of the retirement home, including as a result of the quality of care, the operation of the home or actions of a retirement home staff member.

Persons who suspect harm or risk of harm to residents from abuse or neglect must report it to the Retirement Homes Regulatory Authority (RHRA). If you see or suspect a retirement home resident is being harmed or is at risk, please call 1-855-275-7472 or use this [form](#).

Roles and Responsibilities Related to Missed Home Care Visits in Retirement Homes

Individual/ Organization	Roles and Responsibilities
Retirement Home Resident	<ul style="list-style-type: none"> • Works with the home care SPO, the HCCSS Care Coordinator and, as appropriate, with the retirement home to establish a contingency plan for alternative care in the event of a missed home care visit • Provides consent for sharing of information between the SPO and other care providers, including their retirement home • Contacts HCCSS with any complaints about home and community care delivered by SPOs, including missed home care visits
Service Provider Organization	<ul style="list-style-type: none"> • Leads the development of the resident’s contingency plan, in collaboration with the retirement home resident, HCCSS Care Coordinator and retirement home • Endeavors to avoid and prevent missed home care visits • Troubleshoots to find solutions to missed home care visits • Notifies the retirement home resident, HCCSS, and the retirement home about missed home care visits at the earliest opportunity • Works with the retirement home resident to initiate the execution of the home care contingency plan when home care will be missed • Tracks and reports missed home care visits to Ontario Health
Home and Community Care Support Services	<ul style="list-style-type: none"> • Contracts with SPOs and monitors the delivery of HCCSS-funded services by SPOs • Monitors the tracking and reporting of missed home care visits • Resolves regular or systemic occurrences of missed home care visits • Establishes HCCSS Care Plans for every retirement home resident receiving funded home care – which includes the assessment of risk posed to individuals in the event of missed home care visits • Supports contingency plan development for missed home care visits in collaboration with retirement home residents,

Individual/ Organization	Roles and Responsibilities
	substitute decision-makers or designated caregivers, SPOs and retirement homes
Retirement Home Operator	<ul style="list-style-type: none"> • Develops the resident’s retirement home Plan of Care, including information about services delivered by SPOs and any direct costs for alternate care provided by the retirement home in the event of missed home care visits • Supports contingency plan development for missed home care visits in collaboration with retirement home residents, SPOs and HCCSSs • Helps facilitate delivery of care as per the home care contingency plan to ensure resident safety • Brings frequent or repeated missed home care visits at the individual or home level and instances of missed care that create risk of retirement home resident harm or neglect to the attention of HCCSS • Advises retirement home resident to contact HCCSS regarding complaints about home and community care, including missed home care visits • If requested, supports retirement home residents in making complaints to HCCSS regarding missed home care visits • Prevents neglect by providing or facilitating the necessary care when all other contingencies fail and there is a risk of harm/neglect to the resident as per the <i>Retirement Home Act, 2010</i> and its Regulation

Glossary of Terms

Retirement Home Plan of Care: Refers to the plan of care developed in accordance with section 62 of the *Retirement Homes Act, 2010* and section 47 of its Regulation (O. Reg. 166/11) which requires retirement home licensees to assess each resident and develop a written plan of care, based on that assessment and with the resident’s participation, that sets out:

- The care services that are part of a package of care services that the resident is entitled to receive under the resident’s agreement with the licensee, whether or not the resident receives the services;
- The planned care services for the resident that the licensee will provide, including:
 - (i) the details of the services;
 - (ii) the goals that the services are intended to achieve; and

(iii) clear directions to the licensee's staff who provide direct care to the resident;

- If the resident has consented to the inclusion of the information in the plan of care, the planned care services for the resident that external care providers will provide with the consent of the resident, to the extent that such information is available to the licensee after the licensee has taken all reasonable steps to obtain such information from the resident and the external care provider. This information should include the details of the services, the goals that the services are intended to achieve, and evidence indicating that the resident has provided consent to the licensee to collect information from external care providers to use such information and to disclose the contents of the plan of care to external care providers and others.

Under 62(8) of the *Retirement Homes Act, 2010* retirement homes must also ensure there are protocols to promote collaboration between the staff, external care providers and others involved in the different aspects of care of the resident:

- In the assessment of the resident so that their assessments are integrated and are consistent with and complement each other; and
- In the development and implementation of the care plan so that the different aspects of care are integrated and are consistent with and complement each other.

Under 42(5) of O. Reg. 166/11, the resident's plan of care must take into account the results of an interdisciplinary care conference held as part of the development of the plan of care if the resident's assessment indicates the resident's care needs may include dementia care, skin and wound care or the use of a personal assistance services device.

Contingency Plan: Collaborative contingency planning for residents in retirement homes should include discussion on:

- Assessed risks to the retirement home resident if care is not delivered as outlined in the home care plan.
- Discussion of the retirement home resident wishes and retirement home obligations if the alternate arrangements named in the plan are not available.
- Risk of direct fees that may be charged to retirement home residents if alternate care is provided by the retirement home in the event of a missed home care visit.

Contingency plans should be a documented component of the home care plan, provided to the retirement home resident and, with appropriate retirement home resident consent, provided to the retirement home Director of Care/General Manager for inclusion in the resident's retirement home care plan.

Designated Caregiver: Individuals named as a caregiver by the person receiving care, support or services (includes their substitute decision-makers within the meaning of the *Health Care Consent Act*); the named individual may continuously or occasionally provide significant, unpaid, non-professional support and/or share an emotional bond with the person receiving care, support or services.

Home Care Plan: Refers to the care plan for every person receiving home and community care services in accordance with the Home and Community Care Services Regulation (O. Reg. 187/22) of the *Connecting Care Act, 2019*. (Referred to in this document as the home care plan.)

Service Provider Organization: Organizations under contract to provide services to patients on behalf of HCCSS. These services may include: nursing, physiotherapy, occupational therapy, speech-language therapy, social work, dietetics, and other professional services, as well as personal support services (help with activities of daily living such as bathing, dressing, etc.), medical supplies and equipment. This may include retirement homes that are under direct contract with HCCSS to deliver home care to retirement home residents.