

Long-Term Care Information Checklist – Hospital

The following checklist is a reference tool for Ontario Health atHome care coordinators, individuals applying to long-term care and their substitute decision maker(s).

Key items related to the application process are listed below and are to be checked off after the information is provided by the care coordinator to the applicant and/or their substitute decision maker.

All documents are to be returned to the care coordinator within one week.

Please retain this document for future reference.

Patient name: _____

Guide to Placement in Long-Term Care Homes and Transitioning from Hospital to Long-Term Care information sheet

- ☐ A copy of the **Guide to Placement in Long-Term Care Homes** has been provided for review. The guide is also available at: <https://ontariohealthathome.ca/document/guide-to-placement-in-long-term-care-homes/>
- ☐ A copy of the **Transitioning from Hospital to Long-Term Care information sheet** has been provided for review. The information is also available at: www.ontariohealthathome.ca/document/transitioning-from-hospital-to-long-term-care-english

Health Assessment

- ☐ While a patient is in hospital, hospital staff will complete a health assessment form in order to proceed with a long-term care application.
- ☐ The health assessment is valid for three months.

Substitute Decision-Maker Documentation

- ☐ If a capable applicant wishes to make changes to their identified substitute decision-maker(s), it is their responsibility to update the information on the Application for Determination of Eligibility for Long-Term Care Home Admission form and submit to their care coordinator or Ontario Health atHome.
- ☐ If an applicant is found incapable of making long-term care home decisions it is understood that:
 - A copy of the Power of Attorney for Personal Care document is to be provided to the Ontario Health atHome care coordinator.
 - If a Power of Attorney for Personal Care document does not exist, a substitute decision-maker will be determined according to Ontario's substitute decision-maker hierarchy as outlined in The Health Care Consent Act. This information is available for review at: <https://advancecareplanningontario.ca/substitute-decision-makers/who-is-my-sdm>
 - The Ontario Health atHome care coordinator requires the address(es) and phone number(s) for the applicant's substitute decision-maker and/or or Power of Attorney(s) for Personal Care.

Long-Term Care Home Information and Special Needs

- ☐ The following information has been discussed:
 - Location of long-term care homes
 - Accommodation types
 - Secure unit
 - Cultural designation
 - Bed types (e.g., dialysis, veterans' priority-access beds, specialized veteran beds, short-stay beds.)

- If patient is applying for a Veterans bed, enter Veteran number (K number): _____
- ☐ Helpful information online including:
 - Overview of homes on the champlainhealthline.ca.
 - Long-term care home performance indicators such as wait times for admission and the quality of resident care at: hqontario.ca/System-Performance/Long-Term-Care-Home-Performance.
 - An overview of the long-term care application process at: ontario.ca/page/long-term-care-ontario.

Short-Stay Interim Care

- ☐ Hospital patients may choose up to five short-stay interim beds in long-term care homes.
- ☐ These choices are in addition to the long-stay long-term care home choices.
- ☐ Short-stay interim beds are available to patients moving from hospital to long-term care who are deemed as requiring an alternate level of care (ALC).
- ☐ Short-stay beds are temporary. If a patient wishes to live in the same long-term care home where their short-stay bed is located, the home must be identified as one of the patient's long-stay choices on their Long-Term Care Home Choice form.
- ☐ The patient must have at least one long-stay long-term care home choice while in the Short Stay interim bed.

Wait Times / Waitlists

- ☐ The applicant or substitute decision-maker is aware that:
 - Long-term care home wait times vary based on a number of factors including gender, type of room selected / accommodations or secure vs. non-secure units.
 - Waitlist information for long-term care homes of interest can be provided by Ontario Health atHome care coordinators.
 - They are encouraged to choose long-term care homes with empty beds or short waitlists to support the transition from hospital.

Touring Homes

- ☐ As part of the process for choosing a home, the applicant or their substitute decision-maker are encouraged to:
 - Visit and tour long-term care homes being considered.
 - Use Champlainhealthline.ca to find and explore each home's website, including photos.

Long-Term Care Home Choices

- ☐ An applicant or substitute decision-maker may:
 - Choose as many bed types and long-term care home options as possible, including short waitlisted long term care homes.
 - Make changes to choices at any time after Ontario Health atHome has received the initial application forms with the following conditions:
 - **Within six weeks** – any new choice(s) will have a waitlist date backdated to the date when Ontario Health atHome received all the initial application forms.
 - **After six weeks** – any new choice(s) will have the waitlist date of when the new choice list is received by Ontario Health atHome.
 - **After three months** – an updated assessment by a care coordinator and health assessment form are required along with the new choice form.

Alternate Level of Care and Admission to Long-Term Care

- ☐ The More Beds, Better Care Act, 2022 allows for temporary care arrangements in LTCHs of people who no longer require treatment in hospitals and can safely transition to long-term care homes.
- ☐ Hospitals are not designed to meet an Alternate Level of Care (ALC) patient's restorative, supportive or rehabilitative needs. When a patient no longer requires in-hospital care and all discharge options have been explored, they may be informed by their hospital team that admission to long-term care home is the most appropriate discharge destination for the patient in order to receive the right care at the right place.
- ☐ An Ontario Health atHome care coordinator will work with the patient or substitute decision maker(s) to obtain consent, complete an assessment to determine eligibility for long-term care, discuss the patient's preferences and work with the patient or substitute decision-maker(s) to find the best homes to meet their care needs.
- ☐ If a patient does not consent to the long-term care assessment and placement process, an Ontario Health atHome placement coordinator will use a patient's hospital and health records, consult with the patient's care providers, to determine their eligibility, where required.
- ☐ If a patient is eligible for long-term care, the placement coordinator will identify one or more homes within the patient's geographic radius that meets their care needs and will share information with the homes for the purposes of accepting or declining the application.
- ☐ The placement coordinator will continue to keep the patient, or their substitute decision maker informed throughout the process and inform them when a bed becomes available.

Secondary Placement

- ☐ Once admitted to a long-term care home, the resident can remain on the waitlist for alternate choices. In this case, the initial placement is considered a secondary placement.
- ☐ The long-term care home that is selected as the applicant's first choice will remain waitlisted at a higher priority, and all other choices will be waitlisted at a lower priority.
- ☐ The applicant or substitute decision-maker can modify the ranking of choices at any time.

Cost, Subsidies and Financial Package

- ☐ Information provided about long-term care home rates as indicated on the Long-Term Care Homes Choice List.
 - Accommodation rates are subject to yearly increases. Information is available at: www.ontario.ca/page/paying-long-term-care.
 - Subsidies or rate reductions are available for basic accommodation only.
- ☐ When applying for subsidy, and at the time the individual is admitted into long-term care, a copy of their income tax Notice of Assessment is required.
- ☐ A Rate Reduction Application Package is available through your Ontario Health atHome care coordinator or downloaded from the Ministry of Long-Term Care website at: <https://forms.mgcs.gov.on.ca/dataset/014-4815-69>.
- ☐ After admission, changes in accommodation are managed by the long-term care home.
- ☐ Residents may be offered a semi-private or private accommodation temporarily until an internal transfer to a basic bed can be arranged.

Application Requirements and Timelines

- ☐ An application for long-term care is considered complete after the patient or substitute decision maker has provided the Ontario Health atHome care coordinator with all the following documents completed, signed and dated by the patient or substitute decision-maker:
 - Long-Term Care Choice List
 - Application for Determination of Eligibility for Long-Term Care Home Admission form.
 - Required documents are to be returned to the care coordinator within 5 days.
 - It is the responsibility of the applicant or substitute decision-maker to submit the **completed, signed and dated documents** indicated above to the Ontario Health atHome care coordinator. Otherwise, the **placement file will be closed**, and the applicant may re-apply when ready.

Bed Offer Process

- ☐ A bed offer may be made at any time for any of the homes where the applicant is on a wait list.
- ☐ A patient has up to 24 hours to accept or refuse a bed offer.
- ☐ If the patient or substitute decision-maker will not be available for the bed offer, the Ontario Health atHome care coordinator must be notified, and an alternate contact identified.

Bed Acceptance

- ☐ Once a bed offer is accepted:
 - The applicant must move into the home as soon as possible.
 - If the admission is delayed, bed holding charges may apply.
 - Admissions to homes are not usually possible on the weekend.
 - The patient or substitute decision-maker is responsible for arranging the patient's transportation to the long-term care home. The hospital social worker may be able to support with providing options and information, if needed.

Moving to a Long-Term Care Home Selected by an Ontario Health atHome Care Coordinator:

- ☐ In addition to the information provided earlier in this checklist:
 - Once a patient or substitute decision-maker accepts a bed offer, the patient has up to five days to move in. Bed holding charges may apply from the date the bed becomes available.
 - The patient will advise the Ontario Health atHome care coordinator at time of bed offer if they wish to add or review the choices currently on their choice list.
 - Once a patient has moved, a placement care coordinator will contact the patient or substitute decision-maker to determine if the patient wants to review, add, remove or continue waiting for the homes on their choice list.
 - If a patient has not selected any homes and does not add additional long-term care homes to their list as options to transfer to within the first six months after admission, the long-term care home the patient has been admitted to will become the selected home and the patient's long-term care file will be closed.

Refusing a Bed Offer

- ☐ If a patient declines a long-term care bed offer, they will remain on the waitlist for the homes the patient and the care coordinator have selected.
- ☐ The hospital discharge team will be informed if the bed offer is declined regardless of whether the home was selected by a patient or a care coordinator.

- ☐ If a discharged patient remains in the hospital for more than 24 hours after the date set out in the discharge order, the hospital shall charge the patient a fee of \$400 for every day that the patient remains in the hospital following the expiry of that 24-hour period. Patients or substitute decision-makers are encouraged to speak with hospital staff if they have questions about the fee.

Smoke-free Legislation in Long-Term Care Homes, Cannabis use and Vaping

- ☐ If the applicant smokes, it is understood that:
- Long-term care homes are not required to assist residents with smoking or to move residents away from the building to smoke in compliance with smoke-free legislation.
 - If a resident requires support to smoke, their visitors are responsible for assisting and/or supervising the resident.
 - Smoking is not permitted in or on long-term care home property. Individuals must be at least nine meters away from the property in accordance with smoke-free legislation.
 - Residents are responsible for inquiring about nicotine replacement therapy with their primary care provider.
 - Nicotine replacement therapy is not financially covered by the long-term care home.
 - It is the patient's responsibility to verify the smoking, vaping and/or cannabis policy with each long-term care home directly.

Least Restraints Policy in Long-Term Care Homes

- ☐ Long-term care homes have policies to minimize restraining and confining of residents, as indicated in section 33 to 39 of the Fixing Long-Term Care Act 2021. Other supports and strategies are used in long-term care to safely manage a patient's behaviour and safety when indicated.

Notes

Ontario Health atHome Care Coordinator Name (printed)

Date

Telephone and extension

Contact Information

If you have any questions regarding this service please contact: **1-833-515-1234 • ontariohealthathome.ca**
