

**Ministry of Health
and Long-Term Care**

Assistant Deputy Minister
Health System Accountability
and Performance Division

5th Floor, Hepburn Block
Queen's Park
Toronto ON M7A 1R3

Telephone: (416) 212-1134
Facsimile: (416) 212-1859

**Ministère de la Santé
et des Soins de longue durée**

Sous-ministre adjoint
Division de la responsabilisation et de la
performance du système de santé

Édifice Hepburn, 5^e étage
Queen's Park
Toronto ON M7A 1R3

Téléphone : (416) 212-1134
Télécopieur : (416) 212-1859



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MEMORANDUM TO: LHIN CEOs

FROM: Catherine Brown
Assistant Deputy Minister
Health System Accountability and Performance Division

SUBJECT: The Home First Philosophy

We recognize that LHINs have made great strides towards supporting seniors to live in their homes through initiatives such as the province-wide roll-out of the "Home First" philosophy. This philosophy is shifting the focus to discharging elderly patients to their home after an acute episode in hospital where appropriate, instead of assuming that a long-term care (LTC) home is the only option. We acknowledge the extensive work of the LHINs and their health service providers over the past two years to embrace this philosophy, through cultural and organizational changes. LHINs have expanded community supports so that patients being discharged from hospital have the supports needed to return home in a timely manner, or to return home while awaiting their choice of LTC home.

The ministry continues to receive a number of complaints regarding *the Home First Program*. This memorandum is intended to clarify that Home First is a **philosophy**; it is not a **program** with defined parameters and hours of CCAC services from which one is discharged after a specified period of time.

While hospitals and CCACs may implement a philosophy that home is the best place for the person, the requirements under current legislation/regulation/ policy relating to the provision of hospital and community services still apply.

The questions and issues raised are related to the following:

Hospital Discharge and Appropriate Discharge Destination

Patients can only be discharged once the attending physician or other attending health care professional has determined that the patient is no longer in need of treatment in the hospital.

The development of the discharge plan with the hospital discharge planner/CCAC case manager must be in collaboration with the patient/family/substitute decision-maker. There are no pre-determined destinations that a patient must accept, such as a retirement home, LTC home or their home.

The Home First philosophy must comply with admission requirements set out in the *Long-Term Care Homes Act, 2007* (LTCHA). While going home with the necessary community supports and taking time to understand the implications of a move to a LTC home provides elderly patients and their families with more time to consider options, this is not a requirement. Patients can apply to a CCAC placement coordinator for admission to a LTC home while in a hospital bed.

The Provision of Community Services and Service Maximums

The community services provided by CCACs are regulated under the *Home Care and Community Services Act, 1994* (HCCSA). Under the HCCSA, the CCAC case manager must assess the needs of the client, determine eligibility and develop a plan of service that sets out the amount of each service to be provided to the client.

The eligibility criteria and service maximum amounts for personal support services provided by CCACs are set out in Regulation 386/99 under the HCCSA. CCACs must comply with these eligibility criteria and service maximums when providing services to all clients, including those being discharged from hospital.

A client is eligible for personal support services provided by a CCAC if the person has an OHIP card, the place where services are to be provided has the necessary physical features to enable the provision of the services and the risk to a service provider of serious physical harm is not significant, or if significant, the service provider can take reasonable steps to reduce the risk. The CCAC does not have the authority to apply more restrictive criteria, such as only providing personal support services to "high risk seniors".

The maximum amount of homemaking and personal support services that can be provided by CCACs in a person's residence is 120 hours, in the first 30 days of service, and 90 hours, in any subsequent 30-day period.

However, if a CCAC case manager determines as part of a client's assessment that there are extraordinary circumstances that would justify the provision of additional services, the CCAC may provide more than the maximum amount of homemaking and personal support services to a:

- Person who is in the last stages of life (no time limit);
- Person who is currently on a CCAC waiting list for admission to a LTC home (no time limit); or
- Any other person for up to 90 days in any 12-month period.

Key Messages

The implementation of the Home First philosophy must comply with the requirements set out in the HCCSA and the LTCHA. Please work with your CCAC to ensure that their services are provided in accordance with these requirements. When implemented correctly, the Home First philosophy will uphold the ministry's commitment to providing appropriate care in the appropriate setting and reduce any further misunderstanding by the public.

Thank you,

A handwritten signature in black ink that reads "Catherine Brown". The signature is written in a cursive, flowing style.

Catherine Brown

- c. Kathryn McCulloch, Director, LHIN Liaison Branch
Susan Paetkau, Director, Health Policy and Care Standards Branch
Rachel Kampus, Director, Performance Improvement and Compliance Branch

