

**Summary Status Table in Response to the
Report of the Auditor General of Ontario**

*Value-for-Money Audit: Assisted Living Services of the 2021 Annual Report of the Auditor General.
Ministry of Health*

Auditor's Recommendation	Completed undertaking	Outstanding undertaking (including timeline)
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Summary Status Table in Response to the Report of the Auditor General of Ontario

Value-for-Money Audit: Assisted Living Services of the 2021 Annual Report of the Auditor General.

Ministry of Health

Recommendation 1 To make the availability of assisted living services more transparent to the public and other public sector partners, we recommend that the Ministry of Health publish a basic program description of assisted living services on its website, including who is eligible for this service, and provide links to direct the public to Ontario Health and Home and Community Care Support Services organization websites.	• The Ministry has begun the process of updating the information that is available on its website re: Assisted Living Services. This includes the drafting of updated language and links to HCCSS websites. • On December 10, 2021, the Ministry issued a memo to Assisted Living Service providers clarifying in-scope services and eligible populations.	• The updated language for the website is currently in development between the program area and communications. It is anticipated to be published early in the 2022-23 fiscal year.
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Value-for-Money Audit: Assisted Living Services of the 2021 Annual Report of the Auditor General. Ministry of Health

Recommendation 3 To improve objectivity and consistency in assessing client eligibility for assisted living services according to Ministry policy, we recommend that the Ministry of Health transfer the responsibility of performing initial eligibility assessments from assisted living agencies to Home and Community Care Support Services organizations only or merge home care and assisted living services to help provide more integrated care.	On February 25, 2020, the government announced its intent to modernize home and community care, including by transferring, in a staged manner, the responsibility for providing home care—including for assessing needs and determining eligibility for home care services—from Home and Community Care Support Services to health service providers and Ontario Health Teams (OHTs) in order to better integrate care (see https://news.ontario.ca/en/backgrounder/55894/new-plan-to-modernize-home-and-community-care-in-ontario). Home and Community Care Support Services organizations will eventually be wound down as part of this process. At the conclusion of this modernization process, all needs assessments and eligibility determinations for all home and community care services, including assisted living services, will be the responsibility of the health service providers and Ontario Health Teams funded by Ontario Health to provide those services.	- The Ministry will continue to work with Ontario Health, Home and Community Care Support Services, health service providers, and Ontario Health Teams to develop, update, and distribute common tools and guidance for home and community care needs assessments, including for assisted living services. - The anticipated completion date for this recommendation is March 31, 2023.
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Recommendation 4 To improve the sharing of client assessment information between Home and Community Care Support Services organizations and assisted living agencies, we recommend that the Ministry of Health, in conjunction with Ontario Health: • require all assisted living agencies to upload client assessment information into a central repository that includes the entire continuum of care including long-term care services clients receive; • require all Home and Community Care Support Services organizations to enter assessment results into this central repository; • monitor that the central repository contains all clients' assessment information and follow up as needed; and • in the interim, prior to the creation of a central repository, build an interface between all repositories of assessment information, including those used by both assisted living agencies and home care agencies.	• The Ministry, in partnership with Ontario Health, is working to support access to provincial digital health assets for Ontario Health Teams (OHTs), which may support a repository of client assessment information for community providers of assisted living services. • In addition, the December 10, 2021 memo to assisted living service providers reminded them that for clients who are in receipt of both Assisted Living Services and home care, the approved agencies under HCCSA providing these services are in the circle of care and may share the client's personal health information in accordance with the Personal Health Information Protection Act, 2004, unless the client has expressly withheld or withdrawn consent.	• The Ministry will continue working with Ontario Health and OHT's towards a future state where at maturity, OHTs will support integration and access to many types of clinical data including client assessment information across the OHT to support integrated care delivery. • In the interim, the Ministry, in partnership with Ontario Health, will work to address information sharing within appropriate legal frameworks. • The anticipated completion date for this recommendation is March 31, 2023.
Recommendation 6 To better align the provision of assisted living with other health care services that a client may require, we recommend that the Ministry of Health update the assisted living services policies to clarify that assisted living clients of all population groups can access professional services and outline the pathway to do so.	• The Ministry has initiated its review of the assisted living policies to ensure they are meeting the current needs of the targeted populations, including if they are in receipt of adequate services, both within the assisted living program and professional services. • On December 10, 2021, the Ministry issued a memo to assisted living service providers reminding them that clients who are also eligible for professional services under HCCSA should have access to those services from an agency approved to provide those services, such as a Home and Community Care Support Services organization.	• As part of the review and updates to the Assisted Living Policies, the Ministry will ensure that clear provisions are included regarding access to professional services for assisted living clients. • The anticipated completion date for this recommendation is March 31, 2023.

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Value-for-Money Audit: Assisted Living Services of the 2021 Annual Report of the Auditor General. Ministry of Health

Recommendation 8 To improve the consistency and sufficiency of services that assisted living agencies provide to clients, we recommend that the Ministry of Health, in conjunction with Ontario Health: - collect and validate information on the number of service hours clients receive in the assisted living services program and in the home care program as well as the corresponding assessment scores, and compare them and re-assess whether the service maximum hours for both programs are still reasonable; and - develop monthly minimum service hour targets for various care levels—for example, based on assessment scores—and update its policies accordingly.	- On February 25, 2020, the Ministry announced its intent to remove service maximums from the regulations governing home and community care services, including in ALS (see https://news.ontario.ca/en/backgrounder/55894/new-plan-to-modernize-home-and-community-care-in-ontario). - The December 10, 2021 memo reminded Assisted Living Providers to adhere to the reporting requirements in their accountability agreement with Ontario Health. - To ensure accuracy in reporting, the memo also reminded providers that there is a separate Ontario Health Reporting Standards (OHRS) code to report the statistics related to High-Risk seniors through the Management Information Systems (MIS) Trial Balance Submission.	- The Ministry will continue working with Ontario Health to assess current service volumes in assisted living services and the development of monthly minimum service hour guidelines for assisted living services. - The anticipated completion date for this recommendation is March 31, 2023.
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Summary Status Table in Response to the Report of the Auditor General of Ontario

Value-for-Money Audit: Assisted Living Services of the 2021 Annual Report of the Auditor General. Ministry of Health

Recommendation 10 To provide equitable access to assisted living services for those who most need it to live independently, we recommend that Ontario Health, in conjunction with the Ministry of Health: • collect data on client needs and service hours, monitor cases where ineligible clients are admitted to assisted living services and clients who receive services above or below the intended level as established in Recommendation 8, and require agencies to provide services only to eligible clients, refer ineligible clients to other services and adjust the nature and amount of services provided as needed; and • at least annually, collect and analyze data on the assessment scores of assisted living and home care clients to confirm they are commensurate with their health profiles.	***This is an OH recommendation***	• The Ministry will continue to engage with Ontario Health to ensure progress towards completion of this recommendation.
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Value-for-Money Audit: Assisted Living Services of the 2021 Annual Report of the Auditor General. Ministry of Health

Recommendation 11 To provide more equitable services to all Ontarians who can benefit from assisted living services according to their need, we recommend that the Ministry of Health, in conjunction with Ontario Health: • monitor that assisted living agencies do not hereafter admit seniors according to criteria outlined in the 1994 policy; • evaluate whether the eligibility criteria for adults with physical disabilities, an acquired brain injury or HIV/AIDS should be updated to include evidence-based criteria such as capabilities to live independently, similar to the approach resulting in the updated 2011 policy for seniors; and • review and revise both the provincial exclusion criteria (such as those that do not allow services to be provided to people who reside in retirement homes and those on long-term care wait lists) and local exclusion criteria (such as those restricting eligibility to only those who reside within certain areas of the province) that have been used, considering the impact of these criteria on the broader health care system.	• To encourage applicability of the correct policy, the December 10, 2021 memo reminded providers to ensure their Declaration of Compliance requirement in their accountability agreement with Ontario Health accurately captures compliance with all applicable law and policy as defined in the accountability agreement, including both Assisted Living Services policies. • The Ministry has initiated its review of the assisted living program and policies, including analysis to better understand the unique care needs of adults with physical disabilities, an acquired brain injury or HIV/AIDS. The Ministry is currently in the preliminary phase of this review and has to date initiated discussions with stakeholders in the ABI sector.	• The Ministry will continue its review of the assisted living program and policies, including analysis to ensure they are meeting the current needs of the targeted populations. • The Ministry will review any criteria that may be perceived as exclusionary, consider their impact on the broader health care system and revise as appropriate. • The anticipated completion date for this recommendation is March 31, 2023.
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Recommendation 13 To best align funding with the future needs of those who will require assistance to live at home and to help ensure more efficient use of funding, we recommend that the Ministry of Health: - analyze relevant information, such as wait lists and demographics, to understand current and future expected demand for assisted living, home care and long-term care across the province, and determine funding for each of these programs while taking into account local factors such as marginalized or low-income populations; - request Ontario Health review local information, such as local wait lists and demographics, and reallocate funding across the continuum of care over all regions based on demonstrated need; - work with Ontario Health to analyze agency funding on a per client or per hour basis periodically and investigate anomalies; and - review and update all assisted living policies accordingly.	- The Ministry continues to have collaborative conversations with Ontario Health and Home and Community Care Support Services to inform funding decisions related to assisted living services. - In 2021-22, the Ministry approved additional dedicated funding of \$2.8M to facilitate the immediate provision of Assisted Living Services where buildings were already available to support individuals to live in the community. - In its review of the Assisted Living Services policies, the Ministry is considering new funding requirements that may be established that would plan for future needs. - As part of its budgetary planning for the 2022-23 fiscal year, the Ministry analysed relevant information to strengthen planning for assisted living services and home care in consultation with Ontario Health and Home and Community Care Support Services."	- In its review of the Assisted Living Services policies, the Ministry will consider new funding requirements that could be established. - The anticipated completion date for this recommendation is March 31, 2023.
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Recommendation 14 To help provide better coordinated care for clients who are eligible for assisted living services and may also receive other similar services such as home care, paramedical services and attendant outreach services, we recommend that the Ministry of Health, in conjunction with other relevant ministries such as the Ministry of Children, Community and Social Services and the Ministry for Seniors and Accessibility: • identify any duplication of services offered to clients with similar need profiles, and develop a plan to merge or streamline the offering of similar in-home services; and • improve clients' experiences accessing various services they may be eligible for in their communities, such as through coordinating care through the Home and Community Care Support Services organizations and providing up-to-date information on service offerings to primary-care providers.	• The Ministry continues to explore opportunities with inter-ministerial colleagues for improving the care co-ordination and navigation for clients, including work being done with the Ministry of Municipal Affairs and Housing and the Ministry of Children, Community and Social Services to establish a Pre-Screening Tool for housing and services. • The result of these discussions will be identification of duplication that the ministries can then work to address.	• The Ministry is preparing for an April 1, 2022 launch of a new "Digital Front Door" tool to support health care navigations called the Health Care Navigation Service. This service will be available publicly for all Ontarians and be used by OHTs to support more integrated system navigation. • The anticipated completion date for this recommendation is March 31, 2023.
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Recommendation 15 To strengthen assisted living services' role in helping clients improve their quality of life while living in the community, and lowering the overall costs to the health care system, we recommend that the Ministry of Health, in conjunction with Ontario Health: • identify what data is relevant to measure the performance of the assisted living program (including the break-even point between assisted living and long-term care, and gaps in availability); • collect and evaluate this data on an annual basis; and • use the results to inform how it funds and operates the program going forward.	• On December 10, 2021, the Ministry issued a memo to assisted living service providers reminding them reminding them to adhere to the reporting requirements in their accountability agreement with Ontario Health and provide timely and accurate information as part of the obligations under the accountability agreement.	• The Ministry will continue working with Ontario Health, will identify what data is relevant to measure program performance, collect the relevant data on an annual basis, and use the relevant data to inform how it funds and manages the program. • The anticipated completion date for this recommendation is March 31, 2023.
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Recommendation 16 To help ensure adults with physical disabilities, an acquired brain injury or HIV/AIDS receive quality assisted living services, we recommend that the Ministry of Health: • obtain trend data on the number of people in Ontario living with physical disabilities, an acquired brain injury or HIV/AIDS to inform planning decisions; • clarify whether assisted living services should be expanded into the community beyond designated assisted living buildings; • further to Recommendation 11 on updating the 1994 policy, and with input from relevant experts, identify appropriate outcome targets to help measure the effectiveness of assisted living services; and • work with Ontario Health to require all assisted living agencies measure and report on outcome data, including reductions of emergency room visits or delayed admissions to long-term care.	• The Ministry has initiated its analysis to better understand the needs of adults with physical disabilities, an acquired brain injury or HIV/AIDS. • The Ministry has engaged stakeholders re: the successes and challenges that assisted living clients experience related to their housing and care.	• The Ministry will continue gathering information that will result in better understanding of the care needs of adults with physical disabilities, an acquired brain injury or HIV/AIDS. • The Ministry will clarify its policy regarding the further expansion of assisted living services outside of supportive housing buildings. • The Ministry will work with Ontario Health to identify appropriate outcome targets and require all assisted living service providers to measure and report on outcome data. • The anticipated completion date for this recommendation is March 31, 2023.
Recommendation 17 To obtain the best value for money for assisted living services, we recommend that the Ministry of Health monitor that Ontario Health Teams provide competitively acquired assisted living services to clients.	• Ontario Health continues to be responsible for the acquisition of Assisted Living Services. • Ontario Health Teams are at various stages of maturation and are currently not in a position to acquire services. • The Ontario Public Service Procurement Directive sets out in clear terms the circumstances where non-competitive procurements are allowed, otherwise a competitive procurement must be held and are subject to appropriate procurement approvals. Ontario Health continues to be required to adhere to the Ontario Public Service Procurement Directive.	• The Ministry will continue to support the establishment and expansion of OHTs • The anticipated completion date for this recommendation is March 31, 2024 to reflect the staged implementation and development of OHTs.

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Recommendation 19 To improve the quality and consistency of assisted living services provided to clients, we recommend that the Ministry of Health establish standards for staff-to-client ratios (considering the level of client needs) and for direct-care staff qualifications (including minimum initial and ongoing training), and monitor that Ontario Health update the accountability agreements accordingly.	The Ministry has supported Ontario Health and Assisted Living Service Providers as they address current staffing challenges related to the COVID-19 Pandemic, including the issuance of Temporary Wage Enhancements for staff providing Personal Support Services.	- The Ministry will continue working with Health to define possible policy solutions for establishing effective practices for staffing and staff training. - The anticipated completion date for this recommendation is March 31, 2023.
Recommendation 20 To better inform the public and to confirm that assisted living clients' complaints and concerns are resolved appropriately by the assisted living agencies, we recommend that Ministry of Health establish clear pathways for clients to raise complaints with an entity that has the authority to resolve them, and that is independent of the assisted living agency, such as Ontario Health or the Patient Ombudsman, and monitor accordingly.	- The December 10, 2021 memo reminded assisted living service providers to review and understand all of their requirements under s. 39 of the <i>Home and Community Care Services Act</i>, 1994 (HCCSA) regarding client complaints. - In the same memo, providers were asked to ensure that complaints processes fully respect and promote the rights set out in the Bill of Rights.	- The following changes in regulations have been made: - Effective May 1, 2022, O. Reg. 187/22 (Home and Community Care Services) under the Connecting Care Act, 2019 requires all health service provider and Ontario Health Teams that provide home and community care services to have certain complaints processes in place. This includes home and community care services provided under the assisted living services program. - Effective September 1, 2022, O. Reg. 236/16 under the Excellent Care for All Act, 2010 extends the jurisdiction of the Patient Ombudsman to include health service providers and Ontario Health Teams that provide personal support services if the health service provider or Ontario Health Team is not permitted to charge for the services. This includes personal support services provided under the assisted living services program. - The anticipated completion date for this recommendation is March 31, 2023.

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Recommendation 22 To protect assisted living clients from harm and poor-quality services, we recommend that the Ministry of Health, through regulation under the Connecting People to Home and Community Care Act, 2020, develop appropriate processes whereby assisted living services clients can appeal each type of complaint, including those related to quality of care, that they do not believe were appropriately resolved.	• The December 10, 2021 memo reminded assisted living service providers to review and understand all of their requirements under s. 39 of HCCSA regarding client complaints. • In the same memo, providers were asked to ensure that complaints processes fully respect and promote the rights set out in the Bill of Rights.	• The following changes in regulations have been made: - Effective May 1, 2022, O. Reg. 187/22 (Home and Community Care Services) under the Connecting Care Act, 2019 requires all health service provider and Ontario Health Teams that provide home and community care services to have certain complaints processes in place. This includes home and community care services provided under the assisted living services program. - Effective September 1, 2022, O. Reg. 236/16 under the Excellent Care for All Act, 2010 extends the jurisdiction of the Patient Ombudsman to include health service providers and Ontario Health Teams that provide personal support services if the health service provider or Ontario Health Team is not permitted to charge for the services. This includes personal support services provided under the assisted living services program. • The anticipated completion date for this recommendation is March 31, 2023.
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Recommendation 23 To protect vulnerable adults living in assisted living buildings from the risk of financial exploitation and fire, we recommend that the Ministry of Health, in conjunction with Ontario Health: • update the inventory of assisted living buildings that was compiled for this audit (Appendix 8) and include other relevant information, including the characteristics of services provided to clients in those buildings; • develop mechanisms to segregate the provision of services from landlord responsibilities, such as competitively procuring services from another agency; • monitor whether third-party assisted living agencies charge for other provincially funded services, including personal support and/or homemaking services, and take corrective actions where non-compliances are noted; and • identify which assisted living buildings should be considered a care occupancy assisted living building under the Fire Protection and Prevention Act, 1997 and share the listing	• The December 10, 2021 memo reminded assisted living service providers of the following: - As per Sec. 28 of HCCSA, providers are prohibited from charging or accepting payment for all personal support services identified in the client's plan of service. - Any additional scheduled services requested by the client or non-essential services may be subject to a fee. These services include meal delivery services and additional, non-essential homemaking. If providers are issuing invoices for additional scheduled services and/or non-essential services, they are required to clearly itemize their charges. - Providers that are also landlords of their buildings that meet the definition of care occupancy in the Fire Code, a regulation under the Fire Protection and Prevention Act, 1997, must ensure compliance with these important laws.	• The Ministry has tasked Ontario Health with updating the inventory of assisted living buildings complied by the Auditor General in order to provide it to the Office of the Fire Marshall by March 31, 2022. • The remaining components of this recommendation have an anticipated completion date of March 31, 2023.
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Value-for-Money Audit: Assisted Living Services of the 2021 Annual Report of the Auditor General. Ministry of Health

Recommendation 24 To provide assisted living clients with protection against infection from COVID-19 and future infectious disease outbreaks, we recommend that the Ministry of Health, in conjunction with Ontario Health: • identify aspects of assisted living buildings that require oversight, including infection prevention and control, care standards and safety, and work with other partners, such as public health units, to conduct regular, risk-based inspections; and • work with the Ministry for Seniors and Accessibility to share the listing of assisted living buildings with the Retirement Homes Regulatory Authority such that buildings that meet the conditions in the Retirement Homes Act, 2010 are regulated as retirement homes.	• The Ministry has initiated discussions with Ontario Health to examine opportunities to strengthen inspection protocols. • The Ministry also continues to work with Ontario Health and other partners on the ongoing Infection Protect and Controls (IPAC) Hub initiative. This province wide network is a formal and coordinated pathway to access IPAC expertise through local IPAC Hubs to encourage readiness, prevention, and management of outbreaks.	• The inventory of assisted living buildings that Ontario Health is updating will be shared with the Ministry for Seniors and Accessibility so that they can share it with the Retirement Homes Regulatory Authority. • The Ministry is anticipating being able to do this by March 31, 2022, however the official anticipated completion date for this recommendation is March 31, 2023.
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Ministry of Health

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December 10, 2021

MEMORANDUM TO: Assisted Living Services Providers

CC: Ontario Health

FROM: Amy Olmstead
Acting Executive Lead
Ontario Health Teams Division

RE: **Assisted Living Services**

I am reaching out to thank you for all the work you are doing to support some of Ontario's most vulnerable citizens during these unprecedented times and to articulate some opportunities to strengthen Assisted Living Services programs in the year ahead.

As providers of Assisted Living Services under the *Long-Term Care Supportive Housing Policy* (1994) and/or the *Assisted Living Services for High-Risk Seniors Policy* (2011, updated September 2012), you are caring for persons with physical disabilities, persons with an Acquired Brain Injury (ABI), persons with HIV/AIDS, and high-risk seniors. The efforts of providers and staff to keep people safe and cared for are truly appreciated.

As you may be aware, the Assisted Living Services program was included in the [2021 Auditor General's Annual Report](#) released on December 1, 2021. The Auditor General acknowledged the value of work of providers by recognizing that Assisted Living Services "can significantly improve the quality of life for seniors and people with certain health conditions".

At the same time, the Auditor General found opportunities for improvement. The Ministry of Health (the "ministry") intends to use the recommendations in the Auditor General's report to inform a program review and oversight of Assisted Living Services. This program review is an opportunity to assess Assisted Living Services policies, which have not been refreshed in many years. The recommendations from the audit will be addressed in the context of the government's approved plan for health care system transformation, which includes the implementation of Ontario Health Teams (OHTs). At maturity, OHTs will provide a full and co-ordinated continuum of care, including Assisted Living Services, for a defined population.

The program review will commence in the coming months, in partnership with Ontario Health, Home and Community Care Support Services, and providers. In the meantime,

there are some immediate actions that the ministry is asking providers to undertake in response to the Auditor General's findings.

Policies Governing Assisted Living Services

Assisted Living Services were originally introduced in the [Home Care and Community Services Act, 1994 \(HCCSA\)](#) through the *Long-Term Care Supportive Housing Policy* (the "1994 Policy") to support people with certain needs who required services at a greater frequency or intensity than home and community care provided mainly by Home and Community Care Support Services (also known as the local health integration networks) but without the medical monitoring or 24/7 nursing supervision provided in long-term care. The four target populations identified in this policy were persons with physical disabilities, persons with an acquired brain injury (ABI), persons with HIV/AIDS, and the frail or cognitively impaired elderly.

In 2011, the *Assisted Living Services for High-Risk Seniors Policy* (the "2011 Policy") modernized the provisions of the 1994 Policy that pertained to seniors who are frail and/or cognitively impaired. The provisions of the 1994 Policy relating to persons with physical disabilities, ABI, and HIV/AIDS remained in place.

Providers serving seniors must be aware of the two policies mentioned above and the requirement that all seniors determined eligible for Assisted Living Services since the release of the 2011 Policy must receive services under the 2011 Policy.

The ministry also wishes to provide clarification about the in-scope services in both policies that apply to all providers. Listed below are the services under Assisted Living Services policies that, while required to be available at all times (24/7) both on a scheduled and unscheduled basis, are to be delivered based on the client's plan of service:

- **Personal Support Services** including dressing, personal hygiene, assisting with mobility, assisting with and monitoring medication use and other routine activities of living.
 - Please note that monitoring medication is not to be mistaken for medication administration.
- **Homemaking services** including shopping, housecleaning, and meal preparation that are necessary to maintain people in their own residences but that they are unable to perform safely for themselves.
- **Security checks** or reassurance services, including visits to assure client health or safety. These services shall be provided to address the individual needs of clients based on their clinical condition or environment.
- **Care Co-ordination** including co-ordinating all elements of client care. The care co-ordination role shall include the assessment of applicants' needs, determination of eligibility based on the eligibility criteria set out in this policy, and the development, review, evaluation and revision of a plan of service relating to the provision of Assisted Living Services.

Care co-ordination includes regular and ongoing communication with Home and Community Care Support Services, community support service agencies, community social and recreational services, community primary health care professionals (e.g. GPs, family health teams, geriatric and psychogeriatric

services, mental health services, and palliative care services), and with agencies providing disability aids, assistive devices and home help equipment.

Care co-ordination also includes developing effective working relationships with other health/ social service agencies located in the designated geographic service area and supporting client and caregiver social networks. This may involve planning for anticipated future health care requirements in co-operation with the client and establishing linkages to other services to help ensure continuity of care.

It is important that providers be aware that they should not be charging for the above-mentioned services. As per [Sec. 28 of HCCSA](#), providers are prohibited from charging or accepting payment for all personal support services identified in the client's plan of service. Providers are given funding and expected to manage that funding to cover all costs of the services and should not be charging for any of these services set out in the client's plan of service. Any additional scheduled services requested by the client or non-essential services may be subject to a fee. These services include meal delivery services and additional, non-essential homemaking.

If providers are issuing invoices for additional scheduled services and/or non-essential services, they are required to clearly itemize their charges.

Linkages with Home Care

Providers are reminded that clients who are also eligible for professional services under HCCSA should have access to those services from an agency approved to provide those services, such as a Home and Community Care Support Services organization. This option should be communicated to the clients at any appropriate opportunity. It is very important that clients who are eligible for professional services not be excluded from accessing them because of their receipt of Assisted Living Services.

To facilitate a collaborative approach to care, the ministry asks that providers review the definition of Care Coordination above and connect with [Home and Community Care Support Services](#), which is responsible for home and community care delivery (principally home care), long-term care home placement and community referrals. Over time, responsibility for home care will shift to OHTs and Assisted Living Services providers are asked to develop partnerships with their local OHTs.

If an individual is not eligible or no longer eligible for Assisted Living Services, the provider should be connecting the individual to Home and Community Care Support Services. Providers are to work with care delivery organizations to determine the appropriate services for the individual.

For clients who are in receipt of both Assisted Living Services and home care, the approved agencies under HCCSA providing these services are in the circle of care and may share the client's personal health information in accordance with the *Personal Health Information Protection Act, 2004*, unless the client has expressly withheld or withdrawn consent. Sharing of information and coordination of care will ensure safe, efficient and connected provision of care. Providers are asked to seek legal advice if they have questions about sharing of personal health information.

Pathway for Complaints Resolution

Providers are reminded of all of their requirements under [s. 39 of HCCSA](#) regarding client complaints and asked to ensure that complaints processes fully respect and promote the rights set out in the Bill of Rights.

Through the public engagement process related to proposed home and community care regulations under the *Connecting Care Act, 2019*, the ministry communicated its intention to enhance complaints process requirements for providers. As part of this proposed approach, the ministry has also communicated its intention to refine the scope of the Patient Ombudsman's jurisdiction to include personal support services provided by community agencies in programs such as Assisted Living Services. The ministry will provide updates as appropriate.

Accuracy of Reporting to the Ministry and Ontario Health

The Auditor General identified misalignment in provider reporting and ministry and Ontario Health oversight. It is critical that providers submit accurate and complete data to both the ministry and Ontario Health, regardless of the reporting system they are using.

Accordingly, providers are reminded to adhere to the reporting requirements in their accountability agreement with Ontario Health and provide timely and accurate information as part of the obligations under the accountability agreement.

Providers are further reminded that there is a separate Ontario Health Reporting Standards (OHRS) code to report the statistics related to High-Risk seniors through the Management Information Systems (MIS) Trial Balance Submission. Providers are asked to only use the S955 80 22 Individuals Served – High Risk Seniors code when reporting on clients admitted under the 2011 policy. The S955 80 20 Individuals Served – Frail and/or Elderly should only be used to report statistics for clients who were grandfathered after the release of the 2011 policy.

The ministry is committed to improving health system data management and improving the analysis of data across sectors within appropriate legal frameworks and has provided implementation funding to all approved OHTs to support the advancement of key priorities, including digital health. OHTs are required to develop a plan to integrate and coordinate digital tools and improve information sharing around organizations within an OHT. At maturity, OHTs are expected to support integration and access to many types of clinical data including client assessment information across the OHT to support integrated care delivery.

Fire Protection and Prevention Act, 1997

The ministry would like to take this opportunity to remind providers that are also landlords of their buildings that meet the definition of care occupancy in the Fire Code, a regulation under the *Fire Protection and Prevention Act, 1997*, to ensure compliance with these important laws.

Confirmation of Compliance

Providers are reminded to ensure their Declaration of Compliance requirement in their accountability agreement with Ontario Health accurately captures compliance with all applicable law and policy as defined in the accountability agreement, including both Assisted Living Services policies.

Continued Engagement

Once again, thank you for your continued commitment to the provision of high-quality health care service to individuals and families living in Ontario. The work you do makes a difference for many and it is recognized and appreciated.

I hope you will find this information helpful. Should you have any questions about the information contained in this memo, please connect with Ann Schrager, Acting Director of the Home and Community Care Branch via email at Ann.Schrager@Ontario.ca.

The ministry looks forward to working with all of you as well as Ontario Health and Home and Community Care Support Services as part of our Assisted Living Services program review.

Thank you,



Amy Olmstead

Enclosures:

Long-Term Care Supportive Housing Policy, 1994
Assisted Living Services for High-Risk Seniors Policy, 2011

c: Ann Schrager, Acting Director, Home and Community Care Branch, Ministry of Health
Adil Khalfan, Health System Performance and Support Executive, Ontario Health
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