

Reassessment and Discharge <11 RAI PSS Clients

Overview

The Champlain CCAC must support a rising number of clients whose health care needs have become increasingly acute and complex. In the past year, we have seen a 20% increase in referrals combined with a 36% increase in the number of chronic clients. To reach a sustainable budget position and ensure service to those in greatest need, the Champlain CCAC is revising its guidelines in relation to lower needs clients with RAI scores under 11 (<11).

Effective Tuesday, September 16, 2014, we are proceeding with reassessment and planning for discharges for all <11 RAI clients.

First Step – No admittance or transfers – September 16 2015

- **New <11 RAI clients:**
 - Will no longer be admitted to the CCAC (i.e. they will not be waitlisted); services for these lower needs clients is no longer available. Intake staff will use the same system navigation processes currently in place for 0-7 RAI clients.
- **Transfers of existing <11 PSS clients:**
 - All teams: effective immediately, do not transfer <11 RAI clients to the Community Independence teams.

Second Step – Active discharging of <11 RAI PSS clients

- The exact date for the start of active discharging of <11 clients is being determined and will be communicated in the coming days. The start date will occur within the next few weeks
- Process information, resources and education will be provided leading up to the start date.

Key Messages

- The Champlain CCAC is obligated to reach a sustainable budget position **and** meet the needs of clients with increasingly complex and acute care needs.
- To ensure service to those in greatest need, the Champlain CCAC is shifting its focus to clients with acute and complex needs.
- The introduction of the revised guidelines ensures that CCAC delivers vital health care services to those who need them the most.
- Partnerships between the Champlain CCAC and other regional health care providers are central to transforming the delivery of health care services in our region.

- The Champlain CCAC is not the only CCAC to revise its guidelines on lower risk clients.
- The Champlain CCAC acknowledges that a shift in focus to more acute care and complex needs clients may present unforeseen challenges during this transition period.

Questions and Answers

Why is there a need for the Champlain CCAC to shift its focus to clients with acute and complex needs?

- Demand for chronic and complex care continues to rise:
 - Champlain CCAC provided care to 59,126 clients in 2013/14 – a 20% increase from the previous year
 - 33.4% of the total number of clients served had high care needs
 - 22% Champlain CCAC’s clients were over age 85
 - Since the introduction of Home First, more than 6,000 high needs clients are being cared for at home
- Since the Champlain CCAC’s operating budget is a fixed amount, the organization is required to prioritize health care services to those with the greatest needs.
- The Champlain CCAC is therefore discharging <11 RAI clients to continue to deliver health care services to those in the greatest need.

What are the benefits of revising the guidelines for clients that fall into the lower needs category?

- The Champlain CCAC is able to prioritize those clients in greatest need:
 - The Champlain CCAC, working in partnership with Community Service Providers, aims to ensure that clients receive the care they need
 - Clients with more urgent, complex needs will be able to receive services once capacity is created (e.g. resources for lower needs clients reinvested to service higher needs clients who are on the waitlist)

When did the Champlain CCAC start reducing services to those clients scoring within the <11RAI range?

- As of September 16th, 2014, the Champlain CCAC has not been admitting clients with a <11 RAI score.
- The transition is being carefully planned. All clients will be reassessed to ensure their needs have not changed. The Champlain CCAC is working

closely with its health care partners to minimize the impact to clients and their families as much as possible.

Is the Champlain CCAC closing the door on all clients with an <11 RAI score?

- Clients with RAI scores between <11 RAI who are already receiving CCAC services will be assessed at home.
- The decision to discharge a client will be carefully considered and Care Coordinators will consider a number of factors before doing so.
- The RAI score is not the only factor taken into consideration. The Care Coordinator's professional judgment is also critical.
- Certain exceptions may be made based on significant risk factors.

What is the Champlain CCAC doing to ensure that there is equitable access to health care services?

- The Champlain CCAC will do everything possible to ensure that those no longer eligible for care in this category are provided with alternative care options.
- The Champlain CCAC has a comprehensive communications strategy in place and will collaborate closely with health care partners including hospitals, Community Support Services (CSS) agencies and others.
- A variety of other health care options exist for clients who fall within the 8-10 RAI score, including CSS, municipal services where available, private agencies, and support from families/caregivers where possible.

What happens if a CCAC client with a previous <11 RAI score experiences a change in their condition upon reassessment?

- The reassessment is a fundamental part of the Champlain CCAC's discharge strategy. The reassessment ensures that we are able to identify and prioritize those clients whose needs have changed since they were last assessed.
- Similarly, if a client is discharged and their needs change they should contact the CCAC for a reassessment.

What are the possible exceptions to the new policy for a <11 RAI score client?

- Exception criteria are consistent for all clients referred to Champlain CCAC and include waitlisting, discharge and admission. We have at present no ability to take on more clients and as such only clients in extreme need will be considered for exception; most <11 RAI clients will not qualify for exception. Please see [exception process and template](#) in PSS folder on the Navigator for more information.

Where can I go if I have a specific concern?

- Please submit any specific concerns to your Manager.
- Do not direct clients to contact their MPP, LHIN or media.
- Client complaints/appeals should follow standard CCAC practices.
- All concerns will be closely monitored and analyzed in order to identify any common trends. Solutions will be suggested and shared with other Care Coordinators by regularly updating this Questions and Answers document and via live forums.

What do I do if a client threatens to go the media?

Ask him or her to first express their concern or complaint by following Champlain CCAC's formal feedback process.

Step 1: Our feedback process requires Care Coordinators to address client concerns or complaints one-on-one, since you are most familiar with their needs and situation.

If he/she still threatens to go to the media, please send a short report about the situation including what you did to mitigate the situation to your Manager, your Director, and the Director of Communications (Jennifer Schenkel). They will ensure that the appropriate media relations strategies can be implemented.

In any case, you should advise the client to follow the next steps in the formal feedback process:

Step 2: If the complaint or concern is not resolved to the client's satisfaction after speaking with you, he or she can ask to speak with your Manager.

Step 3: If the issue remains unresolved after Step 2, the client may request a formal review of their situation by contacting Client Relations at:

Mail: Client Relations
c/o Department of Quality,
Champlain CCAC
4200 Labelle Street, Suite 100
Ottawa, ON K1J 1J8

Email: quality@champlain.ccac.ont.ca

Phone: 310-2222 (ask for Client Relations)

Client Relations will acknowledge each request within two business days. However, clients should be informed that a formal review may take between 30–60 days to complete.

Appealing a Service Decision

Clients also have the right to appeal any Champlain CCAC service decision to the Health Services Appeal and Review Board of Ontario. This Board is independent of the CCAC. Clients can appeal in writing to:

Mail: Registrar, Health Services Appeal and Review Board
151 Bloor Street West, 9th Floor
Toronto, ON M5S 1S4
Fax: 416-327-8524

Is the Champlain CCAC the only CCAC to revise its guidelines on low risk clients?

- It is important to remember that the demographics within each CCAC are different and therefore policies vary from one geographic region to another. The Champlain region has clients with the highest MAPLe scores.
- Other CCACs are reviewing their guidelines and implementing various measures to provide care to those in greatest need and maintain a balanced budget position.

The Champlain CCAC acknowledges that this shift in focus to more acute care and complex needs clients may present unforeseen challenges during this period of transition.

- Any change in system guidelines contains an element of risk and we cannot know in advance all of the impacts such changes will have on clients and caregivers.
- The Champlain CCAC is doing everything possible to mitigate this risk by communicating clearly with clients, assessing each existing client on a face-to-face basis and taking a number of factors into consideration prior to discharging them.
- The Champlain CCAC is also making information available about other health care service providers on Champlainhealthline.ca.
- The Champlain CCAC is giving clients who do not qualify for CCAC services a list of alternate health care providers.
- The Champlain CCAC is communicating directly with the relevant health care providers throughout the region.
- Feedback from clinical care will be monitored on an ongoing basis to maintain a regular two-way information flow.
- Through its work with other health care providers, Champlain CCAC will do its utmost to ensure that health care services to the public are as equitable as possible.

What is the Champlain CCAC doing to help those who are no longer eligible to receive CCAC services but still need care?

- Champlain CCAC Care Coordinators can use information from the Champlainhealthline.ca website to find alternate services for clients who require it.

Ontario's Ministry of Health and Long-Term Care says that health care is universally available. Is this still true?

- Yes, this is still true. But the public now has a variety of options. Some health care continues to be fully funded by the Ministry; other services are subsidized; while others are provided through private health care agencies.
- The Champlain CCAC is now focusing on clients with more complex and urgent needs.

Are there any legal implications if services are discontinued to existing clients?

- Any decision to change the level of services to a client must be the result of a professional reassessment of client need.
- Regular Care Coordinator assessments are required to ensure clients have up-to-date care/service plans. CCACs are accountable to adjust care/service plans based on recent assessments and existing/new guidelines.
- Providing clients with options as well as clearly documenting actions taken is crucial to client interactions.

What notes should I enter in CHRIS following my client assessment and subsequent client discharge?

- Here is a suggestion for documentation: "Client advised of CCAC discharge, referred to appropriate community resources (system navigation options as available – specify which given), and informed to contact CCAC if their situation changes or their care needs increase".
- Please help client connect to community resources as required.