A Helping Hand While Caring For a Loved One

Important Information for Carers

We are continually updating this booklet to better serve you.
If you want the latest version, please visit our website www.healthcareathome.ca/mh
Things You Should Know to Better Care For a Loved One

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Note: As of May 31, 2017, the Mississauga Halton Community Care Access Centre (CCAC) has become part of the Mississauga Halton Local Health Integration Network (LHIN). All home and community care services continue as before. Your care team has not changed.
We respect and value the important role family and friends fulfill in supporting loved ones to remain at home. Caring for elderly parents, family members or ailing friends requires time, attention and patience. The impact you have on a loved one’s care and comfort is life changing.

You are a strong, courageous person who is being asked to take on new and sometimes challenging roles when a person you care about ages or becomes ill, and relies on you for support. You are now a “carer” or “caregiver.”

We are in this together. We are here to help you. You are our best partners in care.

If you are caring for a loved one and need assistance, advice or a break, please contact your loved one’s Mississauga Halton LHIN, care coordinator (see below).

Your loved one’s expert care coordinator can keep you up to date on your loved one’s care plan, anticipate you or your loved one’s future needs and provide advice. Your loved one’s expert care coordinator can also refer you to a number of helpful resources, including Adult Day Programs or support groups. He or she is your advisor, advocate and coach — your lifeline to the health system.

Your loved one’s Mississauga Halton LHIN, care coordinator is:

______________________________________________________________________________

You can reach him or her at 905-855-9090 ext. ______________________________

from Monday to Friday, between the hours of 8:30 a.m. and 4:30 p.m.

If you need support outside those hours, please call 905-855-9090 and another member of our care team will help you.

Date: ______________________________
Understanding How Your Loved One Feels

Like you, the person you are caring for may be feeling many emotions because of the changes and losses they are experiencing.

The person you are caring for may feel:
- A sense of losing control over their life because of their condition; in an attempt to try and maintain control, they may resist your attempts to care for them. This is a common reaction to the loss of independence
- Sadness from a changed self-image
- Fear of becoming dependent on and a burden to the family
- Fear old friends will distance themselves
- Anger and frustration toward their condition, which at times, may be misdirected
- Denial of the condition or its lasting effects
- Fear of becoming isolated from the world, since they may no longer be able to get around as easily as they once did

With time and your support, your loved one will adjust to their new situation. If your loved one is able, encourage them to get involved in something outside the home, such as an Adult Day Program, support group or leisure activity.

This can provide your loved one with a sense of purpose. It can help them create a “new normal.”

If you feel your loved one’s emotions are not being managed, please contact their Mississauga Halton LHIN, care coordinator (see page 3). He or she can suggest options to support your loved one in realizing their new, best quality of life.

Resources:
- Canadian Caregiver Coalition (www.ccc-ccan.ca)
- Family Caregiver Alliance (www.caregiver.org)
- Managing Stress and Anxiety Following a Cancer Diagnosis (www.findyournewnormal.com)
Taking Care of Yourself

Taking care of yourself will help you take better care of your loved one.

Eat a healthy and balanced diet; keep physically active; get enough sleep and do activities you enjoy. Learn and pay attention to the signs of carer burnout and stress.

Learn about the signs of burnout and how to cope.

Burnout is a sense of being completely overwhelmed and unrewarded.

This feeling may be created by:

• High expectations of yourself and others
• A strong and unrealistic dedication to making things ideal for the person you are caring for
• Difficulty saying “no”
• Having difficulty asking or accepting help
• Consistently sacrificing yourself and your needs to benefit others
• Feeling as though you are the only person capable of providing care

To help avoid burnout, acknowledge your new roles and responsibilities. Pay more attention to yourself and be able to recognize the physical and emotional signs and symptoms that you may be getting overwhelmed.

<table>
<thead>
<tr>
<th>Emotional signs of burnout:</th>
<th>Physical signs of burnout:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Being easily irritated or frustrated</td>
<td>• Trouble sleeping or always feeling tired</td>
</tr>
<tr>
<td>• Feeling anger, resentment or sadness</td>
<td>• Headaches or backaches</td>
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<tr>
<td>• Feeling overwhelmed or overloaded</td>
<td>• Changes to your weight</td>
</tr>
<tr>
<td>• Depression and decreased self-esteem</td>
<td>• Lingering colds</td>
</tr>
</tbody>
</table>

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Tips to Reduce Stress*

- Take opportunities to be physically active. Go for a short walk.
- Eat sensibly. Avoid excessive use of caffeine and alcohol. Drink plenty of water.
- Know and respect your limits. If you feel exhausted and need time off, take it. Respect your commitment to regularly scheduled time off. Read about your options for taking a break on page 14.
- Spend time with other family and friends. Talk to them. Listen to them if they become concerned with your wellbeing.
- As much as possible, continue to participate in previous social and recreational activities.
- Look for any changes in your habits, attitudes or moods.
- Ask others for advice or support. You do not need to be on this journey alone.
- Focus on your loved one’s strengths. Encourage them to do more for themselves and acknowledge their efforts.
- Include yourself in the list of people you are taking care of. Take time to do something for yourself every day.


Resources:
- Information for Caregivers Portal (www.seniors.gc.ca)
- Caregivers Need Care Too (www.caregiverstress.com)
- American Association of Retired Persons (AARP) Caregiving Resources (www.aarp.org)
- HelpGuide.org – Caregiver Burnout and Stress (www.helpguide.org)
- Alzheimer Society of Canada – Self Care for the Caregiver (www.alzheimer.ca)
Knowing Your Rights*

Know your rights and use them.

Employers cannot discriminate against an employee based on his or her family status. This is part of the Ontario Human Rights Code. The law says that family status protections extend to a person’s family carer role.

This means that when someone must care for a family member, employers have a legal obligation to provide accommodating through flexible work arrangements that enable the employee to care for a family member and continue to do their work.

Make your needs known.

Be your own advocate. Talk to your employer and share your needs related to your role as a carer. Make it clear you are committed to your job and want to find ways to stay productive. Educate your employer on the issues family carers face and what your employer can do to help.


Resources:

- Ontario Human Rights Code (www.ohrc.on.ca)
- The Canadian Ministry of Labour (www.labour.gov.on.ca)
- Tips and tools for employers to support caregiving employees (www.cdnhomecare.ca)
Helping Your Loved One Plan for Big Decisions

Start now to plan ahead.

Advance care planning is a process of reflection and communication. It is a time for your loved one to let people know what kind of health and personal care they will want in the future. Helping your loved one plan ahead for big decisions helps ensure their wishes are respected when they can no longer make decisions on their own.

It is important for patients to think about and communicate to loved ones and health care providers what they want to happen if medical decisions need to be made, and they can no longer communicate their wishes. The conversation may also include talking to financial or legal professionals.

It is often uncomfortable to talk about things like money, wills, sickness and death. By overcoming your uneasiness now, you can sometimes avoid problems or difficult decisions if a crisis arises and your loved one is no longer able to communicate their wishes. Now is the right time.

Resources:

- Speak Up Campaign – Advance Care Planning in Canada (www.advancecareplanning.ca)
- “Make My Plan” online tool (www.advancecareplanning.ca/making-your-plan/)
- Ontario Senior’s Secretariat – Guide to Advance Care Planning (www.seniors.gov.on.ca)
- Video series: Starting the Conversation – Tips from an Estate Lawyer (https://www.youtube.com/watch?v=oz-iBph1dlU)
Prefering Your Finances

Caregiving can be financially challenging.

It is hard to predict the costs you might experience as a carer. Prepare early, so you are financially ready to support your loved one.

As a carer, you may be eligible for help from the Government of Canada. Service Canada — a federal government agency — offers information to help you prepare for this role.

Talk about advance financial planning with your loved one.

If you and your loved one have talked about how you will make decisions about their medical care if they can no longer communicate, finances are one topic you may have discussed.

While your loved one is still able to tell you their wishes, it is important to understand how they want their banking, investments, real estate, insurance and benefits to be handled as their illness progresses.

**Tips to help planning for financial decisions**

- Make a list of assets and where they are located. This may include insurance policies, stocks, bank assets, real estate deeds or pension and retirement funds.

- Make a list of debts or liabilities.

- Talk to your loved one’s bank about its policies on releasing money from frozen accounts in the event someone cannot communicate.

- Talk about advance care planning, and your loved one’s wishes for a funeral and burial.

**Resources:**

- Service Canada ([www.servicecanada.gc.ca](http://www.servicecanada.gc.ca))
- Speak Up Campaign – Advance Care Planning in Canada ([www.advancecareplanning.ca](http://www.advancecareplanning.ca))
- Veteran’s Affairs ([www.veterans.gc.ca](http://www.veterans.gc.ca))
Learning About Your New Role

Be aware of what resources are available.

Today, many organizations exist to help carers better prepare themselves for their new role.

Caregiver resources:

- **MississaugaHaltonhealthline.ca** – An online directory of more than 3,000 resources in the Mississauga Halton LHIN region, as well as across the province, that you can access to help support you or your loved one. Topics include support groups, disease-specific resources, end-of-life care and contact information for health professionals, such as doctors and dentists. ([www.mississaugahaltonhealthline.ca](http://www.mississaugahaltonhealthline.ca))

- **CaregiverExchange.ca** – An online catalogue of carer resources in Ontario. ([www.caregiverexchange.ca](http://www.caregiverexchange.ca))

- **Canadian Caregiver Coalition** – A group of regional and national organizations that works to build awareness of the needs of family carers and advocates on their behalf. ([www.ccc-ccan.ca](http://www.ccc-ccan.ca))

- **Choosing Wisely Canada** – An organization that provides plain language materials to help you ask the doctor the right questions, and together, make the best choices about your loved one’s care. ([www.choosingwiselycanada.org](http://www.choosingwiselycanada.org))

- **Canadian Virtual Hospice** – An organization that provides support and personalized information about palliative and end-of-life care. ([www.virtualhospice.ca](http://www.virtualhospice.ca))

- **Caregiving Matters** – An internet-based charity whose mission is to offer education and support to family caregivers. ([www.caregivingmatters.ca](http://www.caregivingmatters.ca))
Educate yourself as much as possible.
Understand your loved one’s health condition, how the illness will progress and what behavioural changes you can expect.

Disease-specific resources:

- Canadian Cancer Society (www.cancer.ca)
- Multiple Sclerosis (MS) Society Canada (www.mssociety.ca)
- The Arthritis Society (www.arthritis.ca)
- Heart and Stroke Foundation (www.heartandstroke.on.ca)
- ALS Society of Canada (www.als.ca)
- Canadian Diabetes Association (www.diabetes.ca)
- Parkinson’s Society of Canada (www.parkinsons.ca)

If a disease you are interested in learning more about is not listed here, please go to www.mississaugahaltonhealthline.ca for more information or contact your loved one’s care coordinator (see page 3).

Video resources:

Family Caregiver Alliance (www.caregiver.org)
UCLA Alzheimer’s and Dementia Care Program (www.uclahealth.org)

Caregiver Action Network Video Library (www.caregiveraction.org)

When caregiving comes your way (www.ted.com/talks)
Five Steps of Advance Care Planning (www.advancecareplanning.ca)
Knowing how and when to take medications is important.

Many frail or sick people take several medications and often see more than one doctor. It is important to keep track of your loved one’s medication and how they must take it, so the medications work as they are intended. Keep your loved one’s medication list current and take it with you to all doctor’s appointments.

Keep track of prescriptions and medication side effects.

Try to get all prescribed and over-the-counter (OTC) medications at the same pharmacy, so the pharmacist can maintain an up-to-date list of all medications.

Read the labels carefully and be alert to any possible side effects of each drug. Ask your doctor or pharmacist for more information on medication side effects.

**Tips to help your loved one take the right medicine at the right time**

- Do not increase/decrease the dosage without checking with a doctor.
- Give the entire prescription, even if symptoms are gone.
- Do not crush pills or capsules unless you check with your pharmacist. Many medications have a coating to protect the throat or stomach lining. A crushed or chewed pill could release all the medicine at once, instead of the way it is meant to work.
- Do not cut pills in half unless instructed by your doctor. Ask the pharmacist for help.
- Throw away medications that are past their expiration date.
- Store all drugs in a cool, dry area.
- Use a pill container to organize medication.
- Ask your pharmacist or family doctor what you should do if you miss a dose/pill.

**Resources:**

There is a medication tracking sheet, as well as instructions for taking medications, in your loved one’s *My Story* binder, provided by the Mississauga Halton LHIN. Ask your loved one’s care coordinator (see page 3) for more information.
Protecting Yourself from Carer Abuse

Learn about signs and symptoms of abuse.

Abuse is the misuse of power, or the betrayal of trust or respect of an individual, which can sometimes result in physical or emotional harm.

We know that in a caregiving relationship, abuse may intentionally or unintentionally occur. The victims of abuse – those who are hurt by abuse – can be the carer, care recipient or both.

Sometimes abuse may occur when someone is no longer in control of their emotions or behaviours and hurts another person, such as an older adult living with dementia. This type of abuse does not happen on purpose, but it needs to be addressed.

Denial of a vulnerable person’s fundamental rights can also be considered abuse. For example, withholding information, denial of privacy or visitors, restriction of liberty or mail censorship for someone you are taking care of is considered abuse.

If you think you may be experiencing abuse from the person you are caring for, or if you think you are at risk of abusing your loved one and need extra support, please contact your loved one’s Mississauga Halton LHIN, care coordinator (see page 3).

Resources:

• Alzheimer’s and Dementia Caregiver Centre (relevant to all carers) (www.alz.org/care/alzheimers-dementia-elder-abuse.asp)
If you are caring for a loved one and need a break or extra support, please contact the Mississauga Halton LHIN. Our care coordinators can link you to a number of resources, if you call 1-877-336-9090 (toll free) or visit www.healthcareathome.ca/mh.

Safe, overnight stays for your loved one, while you complete personal tasks or take a break (Respite Care)

From time to time, it might be necessary for you to temporarily step away from your carer role so you can deal with an event in your own life, have a rest and rebuild your strength, or take a vacation. Respite care programs provide space in long-term care homes where your loved ones can stay temporarily and be cared for when you are unavailable. This service costs $36.85 per day in Mississauga Halton LHIN region.

The use of short-stay care is usually planned in advance as there is demand for peak holiday seasons. On occasion, emergencies require immediate assistance and efforts are made to accommodate those situations. Contact your loved one’s care coordinator (see page 3) for more information.

Partial or full-day, engaging group activities for your loved one in the community (Adult Day Programs)

Adult Day Programs provide partial or full-day programming, outside the home, for individuals with Alzheimer’s disease, dementia or physical impairments. Participants enjoy time with others, doing activities they love, while carers have peace of mind knowing that their loved one is safe and having fun. Flexible hours make it easy to fit individual needs and schedules. Costs vary by program.

Watch video tours of adult day programs in the Mississauga Halton LHIN region to find one right for your loved one, or contact your Mississauga Halton LHIN, care coordinator (see page 3) for more information.

Online resources in your community

MississaugaHaltonhealthline.ca is an online directory of more than 3,000 resources in the Mississauga Halton LHIN region, as well as across the province, that you can access to help support you or your loved one. For resources in other LHIN regions, please visit www.thehealthline.ca.
At some point, you may decide that caring for your loved one in your home or their home is no longer the safest option. The Mississauga Halton LHIN, can help you and your family understand your options. (www.healthcareathome.ca/mh)

**Assisted living**

Assisted living programs may be the right service for people who need higher levels of support and more frequent, unscheduled assistance. Services vary according to need, and can include personal care, essential homemaking and an emergency response system.

Assisted living programs may be offered in a variety of settings, depending on where you live, including seniors apartments, social housing buildings or in a person’s own home in some communities.

**Supportive housing**

Supportive housing programs provide seniors and adults with physical or cognitive disabilities, mental health issues or HIV/AIDS with support and accommodation in specially-designed buildings, or in a cluster of apartments within an ordinary apartment building. In most cases, the rent charged is based on ability to pay or rent is subsidized through the Ontario Ministry of Housing.

**Retirement homes**

Retirement homes can provide residents with housekeeping, meals and laundry. They may also provide assistance with bathing, dressing, medications, nursing, wound care, supervision and other services.

Each retirement home is privately owned and operated without funding from the Ontario government. Each home offers different services at different costs. You must apply directly to a retirement home for admission. We encourage you to discuss your specific needs with a representative from each of the homes in your desired community.

(Continued on page 16)
Long-term care

_Long-term care homes_ are residential homes that provide ongoing care to patients whose care needs cannot be met in the community. People may require this level of support due to advancing age, disability or declining health.

If your loved one requires additional support, and you are concerned that staying at home is no longer possible, long-term care may be an option. No longer being able to care for your loved one at home is not a failure on your part. We recognize that for some people can be better and more safely care for in a professional setting, if their needs increase or change.

The Mississauga Halton LHIN has developed a [Planning for Long-Term Care Guide](#) to provide information on the application process and answer common questions.

The Mississauga Halton LHIN facilitates all aspects of the long-term care application process. Please contact your loved one’s care coordinator for more information (see page 3).

**Resources:**

- [Long-Term Care Home video tours](#)
- [Planning for Long-Term Care Guide](#)
Caring for a partner

Caring for a partner can be hard on any relationship. While you still love your partner, you may have to cope with the loss of their companionship, wage-earning capacity, role imbalance, sexual relationship and your future plans.

**Tips for coping**

- Accept help from family, friends or professionals.
- Take time for yourself away from your carer responsibilities.
- Seek a support group or counselling.
- Encourage your partner to do as much for themselves as possible; caregiving does not mean parenting. This will result in feelings of confidence and self-worth, and an improved sense of control over your loved one’s environment.

Caring for a parent

Nearly fifty percent of carers in Canada report caring for parents. When roles are reversed, you may experience some challenges taking on the role of carer to your parents or parents-in-law.

**Tips for coping**

- Share your parent’s progress with other family members frequently.
- Try to work on a plan that enables you to share your carer role with other members of your family, if possible.
- Connect with your Mississauga Halton LHIN, care coordinator if you need extra support (see page 3).

(Continued on page 18)
Special Types of Caregiving (continued)

Long-distance caregiving

It is common for family members to live long distances apart. Long-distance carers have to deal with travel costs, difficulty exchanging information, feelings of guilt or anxiety about not being able to be near their loved one more often, and difficulty travelling frequently due to one’s own family responsibilities or job demands.

Tips for coping

- Plan for unexpected situations. You can use the Mississauga Halton LHIN, Planning for the unexpected (see page 19) form to get started.
- If your loved one lives alone, think about leaving a key to their home with a neighbour or someone else you trust.
- Attend care conferences (see page 23), either in-person, over the phone, or via videoconference when available, so you can discuss and hear updates about your loved one’s care plan.
- Prioritize tasks you want to accomplish during each visit with your loved one.
- Make sure all those in your loved one’s circle of care know how to reach you.

Stay in contact with your loved one’s Mississauga Halton LHIN, care coordinator (see page 3). Consult them regularly to discuss concerns and assist with relaying information to other members of the circle of care.

Resources:

- Helping Take Care of Sick Spouse (www.healthywomen.org)
- Caring for Elderly Parents – Managing Role Reversal (www.aplaceformom.com/senior-care-resources)
- So Far Away – 20 Questions and Answers About Long Distance Caregiving – National Institute on Aging (www.nia.nih.gov)
Planning for the unexpected

In the event something prevents you from being able to care for your loved one, you need to have a plan. Your back-up plan will help you think about what you can do when unexpected situations arise. It can help decrease your stress and anxiety during an unexpected situation and help keep your loved one safe.

It may be needed because:

• You become ill
• Other responsibilities demand your attention
• You need a break from your caregiving obligations
• There is a personal emergency
• You are having difficulty managing your loved one’s needs
• You are unable to get to your loved one due to unforeseen circumstances, such as bad weather or car trouble

Develop a plan (below) with your loved one and discuss it with your family and friends who will serve as your emergency supports. You should also share your plan with your loved one’s Mississauga Halton LHIN care coordinator (see page 3).

My Back-Up Plan

Name of family doctor: _______________________________________________________________

Name of care coordinator: ___________________________________________________________

Emergency contacts and supports:

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship</th>
<th>Phone number</th>
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</table>

Important facts that my emergency supports need to know:

____________________________________________________________________________________
____________________________________________________________________________________

Date to review and update plan with emergency supports: _______________________________

What can I do if my loved one’s nurse, personal support worker or therapist can’t get to my loved one as scheduled?

Call your Mississauga Halton LHIN, care coordinator at toll free at 1-877-336-9090 (see page 3). If you need help after hours, please call that number and another member of our care team can assist you.
### Important contacts

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Cell:</td>
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<tr>
<td>Family doctor</td>
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<tr>
<td>Pharmacy</td>
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<td></td>
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<tr>
<td>Support services</td>
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<tr>
<td>• Nursing</td>
<td></td>
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<tr>
<td>• Personal Support/PSW</td>
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<tr>
<td>• Therapy</td>
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<td>(if applicable)</td>
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<td></td>
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<tr>
<td>Other:</td>
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</tr>
<tr>
<td>Mississauga Halton LHIN, <strong>afterhours</strong></td>
<td></td>
<td>1-877-336-9090</td>
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### Questions for the doctor

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Who to call for help

We know that sometimes things may not go as planned, and sometimes you may have questions after hours about your care or your loved one’s care. Should any of the following situations arise while you or your loved one is receiving care at home through the Mississauga Halton LHIN, please follow the instructions on whom to call listed below for help.

I have an emergency.

**Medical:** Call 9-1-1

**Disaster** (e.g. severe weather, power outage, etc.): Follow your emergency preparedness plan. If you do not have a plan, you can:

- Ask a family member or friend to help you make one.
- Visit the Public Safety Canada’s “Get Prepared” website to download its Emergency Preparedness Guide. ([www.getprepared.gc.ca](http://www.getprepared.gc.ca))
- Ask your loved one’s care coordinator ([see page 3](#)) for a print copy of the Emergency Preparedness Guide.

I have an urgent question about my loved one’s care, but it is late at night or a weekend.

**Your action:** Your Mississauga Halton LHIN, care coordinator works from 8:30 a.m. to 4:30 p.m., Monday to Friday ([see page 3](#)). If you need to speak to a care coordinator urgently after hours, please call 1-877-336-9090 and another care coordinator can assist you. If you leave a message and need immediate assistance, our on-call manager will return your call within one hour.

My loved one’s provider did not show up at the scheduled time.

**Your action:** Call the service provider. Their phone number is listed on your care plan, which can be found in your loved one’s *My Story* binder. Your provider can arrange for someone to come immediately if you have urgent needs, or they can schedule a make-up visit for another time. Your provider will also inform the LHIN that a visit has been missed, so it is recorded on your health record.

If you do not hear back from your service provider within 30 minutes, call your Mississauga Halton LHIN, care coordinator. If you continue to have concerns about missed service provider visits, please contact your care coordinator ([see page 3](#)).

I cannot remember the date or time of my loved one’s next scheduled visit with their care provider.

**Your action:** Call the service provider.

I don’t think my loved one’s provider is giving them the best care he or she could.

**Your action:** Call your loved one’s Mississauga Halton LHIN, care coordinator ([see page 3](#)) if you have concerns about the quality of service. If you have a complaint or want to say thank you, please follow the Mississauga Halton LHIN complaint or compliment escalation process. ([www.healthcarehome.ca/mh](http://www.healthcarehome.ca/mh))
Important definitions that relate to your loved one’s care

Abuse:
Abuse is the misuse of power or the betrayal of trust or respect of an individual, which can sometimes result in physical or emotional harm.

Adult Day Program:
Provide partial or full-day programming, outside the home, for frail elderly people who are living alone in the community, including those with Alzheimer’s disease and dementia. As well, some programs are designed for adults with physical disabilities or those recovering from stroke or brain injury.

Assisted living:
Assisted living programs are appropriate for people who need higher levels of support and more frequent, unscheduled assistance. Services vary according to need, and can include personal care, essential homemaking and an emergency response system. Assisted living programs may be offered in a variety of settings, depending on where you live, including seniors apartments, social housing buildings or even in a senior’s own home in some communities.

Burnout:
Burnout is a sense of being completely overwhelmed and unrewarded. It is a common feeling among carers that can have various negative consequences on the carer and care recipient if not addressed quickly.

Care conference:
A meeting that is conducted in person, by telephone or videoconference. It includes two or more of a patient’s health professionals, such as their care coordinator or family doctor. The patient and their family are also invited to attend. The purpose of the meeting is to discuss and revise the patient’s care plan.

Care coordinator:
Your loved one’s care coordinator is a regulated health professional who acts as you and your loved one’s trusted advisor, advocate and point of contact with the health care system and circle of care.

He or she will answer your questions to help you understand the health care system and what will happen next in your loved one’s health journey. He or she will also assess your loved one’s health and social needs to coordinate your personal care plan to help achieve their care goals.

(Continued on page 23)
Carer/caregiver:

A caregiver or carer is an individual who provides ongoing care and assistance, without pay, for family members, friends or other loved ones, who are in need of support due to physical, cognitive or mental health conditions. The term is sometimes qualified with family carer, informal carer, or unpaid carer to differentiate from paid providers and other health care professionals who provide care (e.g. nurses, personal support workers, doctors, therapists, etc.).

Circle of care:

All the people involved in a patient’s care that, with the patient’s consent, have access to the patient’s health information to support care planning and delivery are part of the circle of care. This may include, but is not limited to, the patient, family doctors, hospitals, pharmacies, nursing, therapy or personal support agencies, specialists, family members and other informal carers.

DNR:

A do-not-resuscitate order, or DNR order, is a medical order written by a doctor. It instructs health care providers not to do cardiopulmonary resuscitation (CPR) if a patient’s breathing stops or if the patient’s heart stops beating.

Family meeting:

A meeting that is conducted in person, by telephone or videoconference, which includes the patient, their family members or other informal carers, and the patient’s care coordinator, to discuss the patient’s care plan. Sometimes, care coordinators hold family meetings with patients and loved ones to prepare for a care conference with health professionals.

Incapacity:

Under the Substitute Decisions Act, 1992, incapacity refers to mental incapacity. It means that the person is unable to understand information that is relevant to making a decision or is unable to appreciate the reasonably foreseeable consequences of a decision or lack of decision.

Long-term care:

Long-term care homes are residential homes that provide ongoing care to patients whose care needs cannot be met in the community. People may require this level of support due to advancing age, disability or declining health. Services may include nursing and personal care, assistance with activities of daily living, treatment and medication administration, meals, laundry services and social/recreational programs. LHINs (formerly CCACs) facilitate all aspects of the long-term care application process in Ontario.
Mississauga Halton Local Health Integration Network (LHIN), Home and Community Care: *formerly the Community Care Access Centre (CCAC)*

The Mississauga Halton LHIN guides ongoing and future initiatives in the development and implementation of a seamless health system for our communities. As one of Ontario’s 14 LHINs, we manage the planning and performance of the health care system, and bring greater accountability and leadership as it changes and evolves. LHINs are the only organizations in Ontario that bring together health care partners from the following sectors – hospitals, community care, community support services, community mental health and addiction, community health centres, long-term care and primary care – to develop innovative, collaborative solutions leading to more timely access to high-quality services for the residents of Ontario, and through the Mississauga Halton LHIN for our local communities.

The Mississauga Halton LHIN, Home and Community Care (formerly the Mississauga Halton Community Care Access Centre-CCAC), helps adults and children leave hospital earlier to recover at home, remain at home, enter long-term care or die at home as the wish. Our experienced care coordinators assess people’s needs and organize in-home and community-based services for residents living in South Etobicoke, Mississauga, Oakville, Milton and Halton Hills. The services we provide are delivered at no direct cost to patients.

**Power of Attorney:**

Power of Attorney (POA) refers to the authority to act for another person in a specified or all legal and/or financial matters. There are two types of POAs.

- A **Continuing POA for Property** is a legal document in which a person gives someone else the legal authority to make decisions about his or her finances.

- A **POA for Personal Care** is a legal document in which one person gives another personal the authority to make personal decisions on their behalf if they become mentally incapable. Personal care includes health care, shelter, clothing, hygiene and safety.


**Retirement home:**

Retirement homes are privately owned and operated. They are regulated and licensed, but they do not receive funding from the government. People reside in retirement homes as tenants under the Residential Tenancies Act, 2006, and residents pay directly for the care services that they choose to receive. There are a wide-range of retirement homes that provide care and services for residents with varying needs. Retirement homes can provide residents with housekeeping, meals, and laundry. They may also provide assistance with bathing, dressing, medications, general support, nursing, wound care, supervision and other services.

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Making Sense of Health Care Terms (continued)

Substitute decision maker (SDM):

A substitute decision maker (SDM) is an individual appointed to make decisions for a vulnerable person who is unable to make certain decisions for him or herself. A SDM has the legal authority to make decisions for the vulnerable person in those specific areas in which he or she has been given power.

Supportive housing:

Supportive housing programs provide seniors, adults with physical or cognitive disabilities, mental health issues or HIV/AIDS with support and accommodation in specially-designed buildings, or in a cluster of adapted apartments within an ordinary apartment building. Living arrangements may include shared houses or apartments and self-contained apartments. Through the Ministry of Health and Long-Term Care, personal support is provided on-site, with staff available to respond 24 hours a day. Supportive housing buildings are owned and operated by not-for-profit corporations such as municipal governments, housing cooperatives, or non-profit groups including faith groups, seniors’ organizations, service clubs, cultural groups, and service providers. In most cases, the rent charged is based on ability to pay, or the market level rent is subsidized through the Ministry of Housing.

Will:

A will is a legal document that outlines what happens to your property after you die. A will defines who is to get the property and in what amounts. A will can also, if necessary, name a guardian for children or pets, identify someone else to handle the property after death, or identify an “executor” to handle property and affairs from the time of death until the estate is settled.
Oakville Office
700 Dorval Drive Unit 500
Oakville, ON L6K 3V3
8:30 a.m. to 4:30 p.m.

Etobicoke Office
401 The West Mall
Suite 1001
Etobicoke, Ontario M9C 5J5
8:30 a.m. to 4:30 p.m.

Milton Office
611 Holly Avenue
Unit 203
Milton, Ontario L9T OK4
8:30 a.m. to 4:30 p.m.

Mississauga Office
2655 North Sheridan Way
Suite 140
Mississauga, Ontario L5K 2P8
8:30 a.m. to 4:30 p.m.

Our Access Care Team is available from
8:30 a.m. to 9:00 p.m.

We have offices and staff located in the following hospitals. No referral is required to contact them.

**Trillium Health Partners (THP)**
Mississauga Hospital, Queensway Health Centre, Credit Valley Hospital

**Halton Healthcare**
Oakville Trafalgar Memorial Hospital, Georgetown Hospital, Milton Hospital

310-2222
no area code required

[www.mississaugahaltonlhin.on.ca](http://www.mississaugahaltonlhin.on.ca)
[www.healthcareathome.ca/mh](http://www.healthcareathome.ca/mh)
[www.mississaugahaltonhealthline.ca](http://www.mississaugahaltonhealthline.ca)