



Course: **Personal Support Worker 101**

Module 1: **Individuality of the Person**

Chapter 11: **Legislation: The Client's Rights and Your Rights**

I. INTRODUCTION

- A. Ethics is concerned with what you should or should not do.
- B. Legislation tells you what you can and cannot do and is a body of laws that govern the behaviour of a country's residents.
- C. Courts protect the client and the support worker's rights.

II. UNDERSTANDING RIGHTS

- A. A right is something to which a person is justly entitled.
- B. Moral rights are based on a sense of fairness or ethics and are based on moral principles.
- C. Legal rights are based on rules and principles outlined in the law and enforced by society.

III. BASIC HUMAN RIGHTS IN CANADA

- A. All provinces and territories have legislation that addresses the rights of people using health care services
 - 1. They vary across the country and are constantly being revised
 - 2. Box 11-1, p. 140; and Box 11-2, p. 141 in the textbook, show examples of legislation
 - B. Legislation consists of acts (specific laws) and regulations (detailed rules that implement the requirements of the act)
 - C. Most health care acts consist of general requirements for maintaining health, safety, and well-being
 - D. If a province or territory does not have regulations, they lay out detailed standards.
 - E. All residential facilities must abide by the rules or risk losing their licence
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IV. BILLS OF RIGHTS

A. Introduction

1. Provinces such as Manitoba and Ontario have created a bill of rights for clients
2. Box 11-3, p. 142 in the textbook, lists Ontario's Resident's Bill of Rights for long-term care
3. Box 11-4, p. 143 in the textbook, lists the Bill of Rights for community care clients
4. Figure 11-1 (p. 141) shows a pictographic version of the Residents' Bill of Rights. This is helpful for clients who do not read English or French.
5. Some facilities and agencies write their own bills of rights based on their federal or provincial laws.
6. You must know your provincial or territorial laws, and your employer's policy regarding client's rights
7. In general, all clients have the following rights:
 - a. The right to be treated with dignity and respect
 - b. The right to privacy and confidentiality
 - c. The right to give or withhold informed consent
 - d. The right to autonomy

B. The right to be treated with dignity and respect

1. This is an ethical principle and legal obligation
2. Most health care legislation refers to the client's right to be treated with dignity
3. A long-term facility is the resident's home and should provide the same freedoms as the resident's own home
 - a. Many have policies, acts, or regulations that recognize the resident's rights:
 - (1) To live in a safe and clean environment
 - (2) To be properly sheltered, fed, clothed, groomed, and cared for according to their needs
 - (3) To keep and display personal possessions
 - (4) To have family present 24 hours per day if the person is dying
 - (5) To be free from emotional, physical, sexual, and financial abuse
 - (6) To discuss problems with, or suggest changes, to any aspect of the services provided to them
4. Respecting the person's dignity and independence is a basic and important part of support work
5. Treating a person with dignity provides emotional support and greatly contributes to quality of life
6. Box 11-5, (p. 145) in the textbook, list ways to show respect for the client's dignity

C. The right to privacy and confidentiality

1. People have the right to receive care in private, and in a way that does not expose their body unnecessarily
2. Only those involved in the person's care should see, handle, or examine a person's body

3. Information about the client's care, treatment, and condition is confidential; all provinces and territories have privacy and confidential legislation
4. Box 11-6 (p. 145) in the textbook, lists measures that show respect for privacy and confidentiality

D. Electronic privacy

1. In health care, electronic privacy could be defined as not disseminating a client's image, words, character description or comments about his or her reputation by electronic means, including forwarding these through any Web site, chat room, or e-mail, by way of cell phones, electronic listening devices, spy cameras, computers, or personal messaging devices of any sort.
2. It is wrong, both ethically and now legally in many provinces, to post pictures, names, or discussions about your clients, no matter how "nice" you think you are being to that client (see the box Supporting Mrs. Jones on page 146 for an example of how one client's privacy rights were violated).

E. Informed consent recognizes the person's right to decide what will and will not be done to his or her body, and who can touch his or her body

1. Consent is informed when a person clearly understands:
 - a. The reason for treatment
 - b. What will be done
 - c. How it will be done
 - d. Who will do it
 - e. The expected outcomes
 - f. Other treatment options
 - g. The effects of not having the treatment
2. A parent or legal guardian gives consent for persons under the age of 18
3. A responsible party gives consent for:
 - a. A mentally incompetent person
 - b. Persons who are unconscious, sedated, or confused
 - c. Persons with certain mental health disorders
4. A form is signed giving general consent to treatment when the person enters the agency
5. Special consent forms are required for surgery and other complex and invasive procedures
6. The doctor is responsible for informing the person about all aspects of treatment
7. You are never responsible for obtaining written consent

F. Advanced Care Directives

1. These are legal documents that allow clients to convey their decisions about their own end-of-life care.
2. These documents are signed ahead of time, usually when the client is admitted to an extended care facility, and are usually done in consultation with the client, their next of kin (usually their substitute decision maker) and the agency's director of care.

3. In a living will, a person can state whether or not he or she wishes to accept or refuse medical care when the time comes. There are many issues that a living will can address, such as:
 - The use of dialysis and breathing machines • Resuscitation if breathing or heartbeat stops
 - Tube feeding
 - Organ or tissue donationA living will is not legally enforceable (see the box Supporting Mme. LeBrun, on p. 147) but is merely used to encourage family members to make decisions that respect the client's wishes.

G. Substitute Decision Maker

1. Consent is often needed for clients under the legal age (usually 18 years of age) and for clients who are unable to make informed decisions for themselves or their property. The generally accepted generic term for this in Canada is substitute decision maker. In some provinces, the legal term for a substitute decision maker is power of attorney.
2. A Substitute Decision Maker for Personal Care is required when a client with certain mental illnesses, confusion, dementia, or intellectual disabilities may not be able to give informed consent. In other situations, for example, an unconscious client cannot give consent for a procedure. Such situations require a substitute decision maker for health care.

H. Substitute Decision Maker for Property

1. In situations when the client is unable to make decisions regarding his or her property, the client's interests would be represented by a substitute decision maker for property. This person may or may not have been chosen by the client when he or she was able to make these decisions.
2. Sometimes, if the client does not have a substitute decision maker, the Provincial Court of that province might appoint someone to act as one. That person would be legally bound to act in the client's best interests. Although terms may vary from province to province, a generally accepted term in Canada for the person who acts on behalf of a client with regard to property is an estate trustee.
3. A will is a legal document that states one's wishes about where (or to whom) his or her property should go. It should be drawn (or written) while the client is cognitively intact, witnessed by a lawyer, and kept in the lawyer's office. Most people also keep a copy of their will in a safe, or in a fireproof place, such as a safety deposit box.
4. It becomes the duty of the guardian of property (depending on the province, this person is sometimes called an executor if the person is a man, and an executrix if the person is a woman) to deal with the deceased client's possessions according to his or her wishes, as stated in the will.
5. If the client dies without leaving a will, the Provincial Courts will appoint an administrator to divide up the client's property.

I. The right to autonomy

1. People using health care have the right to make decisions and choices concerning their care and lifestyle, as well as their admission, discharge, or transfer to or from a facility (see Focus on Long-Term Care box, p. 148)
2. All clients have the right to participate in assessing and planning their own care and treatment
3. They need to have complete and accurate information about their condition, care, and treatment; if the client has questions about their condition, inform your supervisor, do not discuss diagnosis or health conditions with clients
4. Personal choice is important for quality of life, dignity, and self-respect; you must allow the client to make choices whenever safely possible

V. UNDERSTANDING LEGAL ISSUES**A. Laws tell you what you can and cannot do**

1. Law is a rule of conduct made by a government body
2. Criminal laws are concerned with offences against the public and against society
 - a. Violation is called a crime
3. Civil laws deal with relationships between people

B. Torts are part of civil law

1. Unintentional torts
 - a. Negligence means the person did not mean or intend to cause harm
 - (1) The negligent person failed to act in a reasonable and careful manner
 - b. Malpractice is negligence by professionals
 - c. Box 11-7, p. 150 in the textbook, lists common negligent acts of support workers
 - d. Remember:
 - (1) You are legally responsible for your own actions
 - (2) Sometimes refusing to follow a nurse's directions is your right and duty
2. Intentional torts are acts meant to be harmful
 - a. Defamation is injuring the name and reputation of a person by making false statements to a third person
 - b. Libel is making false statements in print, writing, pictures, or drawings
 - c. Slander is making false statements orally
 - d. Assault is intentionally attempting or threatening to touch a person's body without consent
 - e. Battery is touching a person's body without the person's consent
 - (1) The person must consent to any procedure, treatment, or other act that involves touching the body
 - (2) The person has the right to withdraw consent at any time
 - (3) Consent must be informed to be valid
 - (4) Consent can be verbal or a gesture

- f. False imprisonment is unlawful restraint or restriction of a person's freedom of movement
 - (1) Threat of restraint or actual physical restraint is false imprisonment
- g. Invasion of privacy is exposing a person's name, photograph, or private affairs without the person's permission
- h. Fraud is saying or doing something to trick, fool, or deceive another person
 - (1) Giving inaccurate or incomplete information

VI. YOUR LEGAL RIGHTS

- A.** Federal, provincial, and territorial legislation ensures that Canadian workers receive fair wages and work in a fair and safe environment
- B.** There are laws that protect workers' rights and clarify their requirements and duties
- C.** These laws have different names across the country
- D.** These laws address:
 - 1. Human rights legislation—protects worker's basic human rights of equality and nondiscrimination, and freedom from harassment
 - 2. Occupational health and safety legislation—outlines the rights and responsibilities of workers, employers, and supervisors in creating and maintaining a safe work environment
 - 3. Employment standards and legislation—state minimum acceptable employment standards within the workplace
 - 4. Labour relations legislation—addresses how employers and employees can resolve workplace issues, and ensures that employees have the right to form or join a union
 - 5. Workers' compensation legislation—addresses how workers are financially compensated for accidental injuries on the job
 - 6. Long-term care facilities legislation—addresses basic rights of residents and describes requirements for operating the facility
 - 7. Community services legislation—sets out the rules and procedures for accessing and providing community services

In-Home Services

In-home health services are provided through Community Care Access Centres. Staff case managers will assess, in collaboration with you, your health and support requirements. In-home services provided through Community Care Access Centres include:

- nursing care
- physiotherapy
- occupational therapy
- speech and language therapy
- palliative care
- dietetic services
- social work
- personal support services such as bathing and dressing, meal preparation and feeding
- homemaking, such as cleaning and doing the laundry

Consumer/Client Rights

1. **Right** - Observing and obeying conduct and conversation from both an ethical and legal point of view.
*Includes - health concerns/consent and treatment, lower costs and a choice of health care providers, greater involvement in care/treatment planning, privacy, human rights and freedoms, freedom of religion and education, mobility, democratic rights to vote, legal rights, life, liberty and the security of the person and their belongings.
2. **Dependent** - relies on another or others for aid or support
Independent - not relying on others for aid or support
Interdependent - to depend on one another or a group for aid or support or to be mutually dependent
3. Discover rights of residents and a person's rights to privacy

Residents' Bill of Rights

For the residents of Licensed Nursing Homes and Approved Charitable and Municipal Homes for the Aged.

These facilities are primarily the home of their residents. As such they are to be operated in such a way that the psychological, social, cultural and spiritual needs of each resident are met. Furthermore, each resident should be given the opportunity to contribute, in accordance with his or her ability, to the physical, psychological, social, cultural and spiritual needs of others. The following rights of residents are to be fully respected and promoted:

Every resident has the right:

- a. to be treated with courtesy, respect, and in a way that fully recognizes the resident's dignity and individuality, free from mental and physical abuse;
- b. to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs;
- c. to be told who is responsible for and who is providing the resident's direct care;
- d. to be afforded privacy in treatment and in caring for his or her personal needs;
- e. to keep and display in his or her room personal possessions, pictures and furnishings in keeping with safety requirements and other residents' rights;

- f. to be informed of his or her medical condition, treatment and proposed course of treatment:
to give or refuse consent to treatment, including medication, in accordance with the law and to be informed of the consequences of giving or refusing consent; to have the opportunity to participate fully in making any decision and obtaining an independent medical opinion concerning any aspect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a home; and, to have his or her medical records kept confidential in accordance with the law;
- g. to receive reactivation and assistance towards independence consistent with his or her requirements;
- h. to communication in confidence, to receive visitors of his or her choice and to consult in private with any person without interference;
- i. to designate a person to receive information concerning any transfer or emergency hospitalization of the resident, and where a person is so designated to have that person so informed forthwith;
- j. to exercise the rights of a citizen and to raise concerns or recommend changes in policies and services on behalf of himself or herself or others to the residents' council, facility, staff, government officials or any other person inside or outside the home, without fear of restraint, interference, coercion, discrimination or reprisal;
- k. to form friendships, to enjoy relationships and to participate in the residents' council;
- l. to meet privately with his or her spouse in a room that assures privacy and where both spouses are residents in the same home, they have a right to share a room according to their wishes, if an appropriate room is available;
- m. to pursue social, cultural, religious and other interests, to develop his or her potential and to be given reasonable provisions by the home to accommodate these pursuits;
- n. to be informed in writing of any law, rule or policy affecting the operation of the home and of the procedures for initiating complaints;
- o. to manage his or her own financial affairs where the resident is able to do so, and where the resident's financial affairs are managed by the home, to receive quarterly accounting of any transactions undertaken on his or her behalf to be assured that the resident's property is managed solely on the resident's behalf;
- p. to live in a safe and clean environment;
- q. to be given access to protected areas outside the home in order to enjoy outdoor activity unless the physical setting makes this impossible;

Every resident who is being considered for restraints has the right:

- r. to be fully informed about the procedures and the consequences of receiving or refusing them;

Every resident, whose death is likely to be imminent, has the right;

- s. to have members of the resident's family present twenty-four hours per day.

4. Principles of Respecting Human Rights And Human Individuality

Self-determination	The client has the right to decide to choose or to refuse in all aspects of their care.
Harassment	Engaging in a course of vexatious comment or conduct that is known or ought to be known to be unwelcome.
Vexatious	A series of inappropriate comments and/or conduct that is bothersome and/or irritating and/or threatening and/or demeaning or an annoyance to someone else.
Complaint	A statement of displeasure, grievance, pain or discomfort.
Allegations	To declare or cite as to be true certain situations or opinions yet to be confirmed or denied.
Discrimination	Differentiate because of race, ancestry, place of origin, colour, ethnic origin, religion, citizenship, creed, sex, sexual orientation, age, marital status, family status, handicap or a person in receipt of public assistance.
Gender	A cluster of social characteristics that are attributed to the classification of either the male or female sex. Based on stereotypes about what constitutes femaleness or maleness gender, discrimination can and does take many forms in our society.

5. Relevant Human Rights Provisions

- Every person has a right to equal treatment with respect to services, goods and facilities, without discrimination because of race, ancestry, place of origin, colour, ethnic origin, religion, citizenship, creed, sex, sexual orientation, age, marital status, family status or handicap.
- Every person has the right to equal treatment with respect to occupancy of accommodation, without discrimination because of race, ancestry, place of origin, colour, ethnic origin, religion, citizenship, creed, sex, sexual orientation, age, marital status, family status or handicap or the receipt of public assistance.
- Every person who occupies accommodation has the right to freedom from harassment by the landlord or an agent of the landlord or by an occupant of the same building because of race ancestry, place of origin, colour, ethnic origin, religion, citizenship, creed, sex, sexual orientation, age, marital status, family status or handicap or the receipt of public assistance.
- Every person having legal capacity has the right to contract on equal terms without discrimination because of race, ancestry, place of origin, colour, ethnic origin, religion, citizenship, creed, sex, sexual orientation, age, marital status, family status or handicap.
- Every person has the right to equal treatment with respect to employment without discrimination because of race, ancestry, place of origin, colour, ethnic origin, religion, citizenship, creed, sex, sexual orientation, age, record of offences, marital status, family status or handicap.
- Every person has the right to equal treatment with respect to membership in any trade union, trade or occupational association or self-governing profession without discrimination because of race, ancestry, place of origin, colour, ethnic origin, religion, citizenship, creed, sex, sexual orientation, age, record of offences, marital status, family status or handicap.

- Every person who is an employee has the right to freedom from harassment in the workplace because of gender by his or her employer or an agent of the employer or by another employee.
- Every person has the right to be free from:
 - a sexual solicitation or advance made by a person in a position to confer, grant or deny a benefit or advancement, where the person making the solicitation or advance knows or ought reasonably to know that it was unwelcome.
 - a reprisal or threat of reprisal for the rejection of a sexual solicitation or advance where the reprisal is made or threatened by a person in a position to confer, grant, or deny a benefit for advancement to the person.
- Every person has the right to claim and enforce his/her rights under this Act, to institute and to participate in proceedings under the Human Rights Code, and to refuse to infringe a right of another person under the Code, without reprisal or threat of reprisal for doing so.
- Where it appears to the Commission that:
 - the complaint is one that could or should be more appropriately dealt with under an Act other than this Code;
 - the subject matter of the complaint is trivial, frivolous, vexatious or otherwise made in bad faith;
 - the complaint is not within the jurisdiction of the Commission; or
 - the facts upon which the complaint is based occurred more than six months before the complaint was filed, unless the Commission is satisfied that the delay was incurred in good faith and no substantial prejudice will result to any person affected by the delay.

Commission may, in its discretion, decide to not deal with the complaint.

6. **Sexual Harassment/Inappropriate Gender-Related Comments**

1. gender-related comments about an individual's physical characteristics or mannerisms
2. unwelcome physical contact
3. suggestive or offensive remarks or innuendoes about members of a specific gender
4. propositions of physical intimacy
5. gender-related verbal abuse, threats or taunting
6. leering or inappropriate staring
7. bragging about sexual powers
8. demands for dates and sexual favours
9. bragging of sexual powers
10. offensive jokes or comments of a sexual nature about an employee, client or tenant
11. displaying sexually offensive pictures, graffiti, screen savers or other materials

7. **Maintaining the Balance of Power (between the PSW and the client)**

- Respect the client's right to have and communicate an opinion.
- Maintain a calm and relaxed demeanour in both conduct and conversation.
- Be open minded (listening).
- Respect cultural, religious and family backgrounds.
- Recognize that life experiences will vary, therefore, so will client reactions.
- Recognize that adjustment to illness, pain and/or separation is a difficult human process and related reactions and behaviours will have to be managed in a positive and professional manner.

Canadian Charter of Rights and Freedoms**A. Guarantee of Rights and Freedoms****1. Rights and Freedoms in Canada**

The Canadian Charter of Rights and Freedoms guarantees the rights and freedoms set out in it subject only to such reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society.

2. Fundamental Freedoms

Everyone has the following fundamental freedoms:

- a. freedom of conscience and religion;
- b. freedom of thought, belief, opinion and expression, including freedom of the press and other media of communication;
- c. freedom of peaceful assembly; and
- d. freedom of association.

Explanation

This part of the Constitution Act, 1982, sets out a **Canadian Charter of Rights and Freedoms** that establishes for all Canadians protection of certain basic rights and freedoms essential to maintaining our free, democratic society and united country.

This Charter of Rights applies to all governments ---- federal, provincial and territorial--- and will provide protection of the following:

- a. fundamental freedoms
- b. democratic rights
- c. the right to live and to seek employment anywhere in Canada
- d. legal rights
- e. equality rights for all individuals
- f. official languages of Canada
- g. minority language and education rights
- h. Canada's multicultural heritage
- i. native people's rights

Canadians have enjoyed many of these basic rights and freedoms as a matter of practice for many years. Certain rights were set out in the Canadian Bill of Rights, which was introduced by Prime Minister John G. Diefenbaker in 1960, as well as in various provincial laws. However, including them in a Charter of Rights, written into the Constitution, will clarify and strengthen them.

At the same time, though, in a democratic society, rights cannot be absolute; they must be qualified in order to protect the rights of others. For instance, freedom of speech must be qualified by libel and slander laws.

Therefore this section will allow that the rights that the Charter guarantees will be subject to a "notwithstanding clause". This means that Parliament or a provincial legislature could pass legislation that conflict with a specific provision of the Charter in one of those areas.

Any such legislation would expire after five years unless specifically renewed. The value of this clause is that it will ensure that legislatures rather than judges have the final say on important matters of public policy. The provision will allow for unforeseen situations to be corrected without the need for constitutional amendment.

The Charter enshrines certain fundamental freedoms for everyone in Canada. They are freedoms that custom and law over the years have made almost universal in our country. Now these freedoms will be protected by the Constitution.

As Canadians, we are guaranteed the right to worship, or not, as we wish, in the place of worship of our choice. Freedom of the press and other media is ensured. Our right to gather in peaceful groups as well as our right to freedom of association is protected.

Even though we have, over the years, tended to take our rights for granted, there have been cases in Canada where some fundamental rights have been denied by laws of Government.

B. Human Rights Code in the Province of Ontario summarizes:

Human Rights Code Statutes of Ontario 1990, Chapter H.19 Freedom From Discrimination

Equality and equity with respect to employment, education and rental property issues

- the fair and non-prejudicial treatment of employees, fellow workers, clients and those with less power
- establishes boundaries that demonstrate respect, professionalism and cohesiveness in the workplace and for those receiving and providing personal/professional services
- defines that those in positions of power should establish professional working practices
- relationships with staff and our clients and refrain from establishing preference pools of people and engaging in unprofessional conduct or conversation, i.e., dirty jokes, any inappropriate touching or financial matters outside of a mutually agreed on contract
- provides a complain procedure for those with issues around discrimination and harassment
- encourage the workplace to have a human rights policy and complaints procedure in place

C. Advocacy in Ontario

Introduction

In July, 1995 the government of Ontario announced its intention to repeal the Advocacy Act, and review the **Consent to Treatment and Substitute Decisions Acts.**

The outcome of the review has resulted in proposed changes that will:

- repeal the *Advocacy Act*;
- abolish the Advocacy Commission;
- replace the *Consent to Treatment Act* with the *Health Care Consent Act*; and
- amend the *Substitute Decisions Act*.

The *Advocacy, Consent and Substitute Decisions Statute Law Amendment Act, 1996*, which came into effect on March 29, 1996 is the new law that encompasses these changes. This document highlights the major amendments for general information and is not a comprehensive guide to the new statute. For more complete information, a copy of the Advocacy, Consent and Substitute Decisions Statute Law Amendment Act, 1995 may be ordered through:

Publications Ontario
880 Bay Street
Toronto, ON M7A 1N3
or by calling (416) 326-5300 or, toll-free, 1-800-668-9938

The Current Law

The *Substitute Decisions Act* replaced or changed a number of laws in Ontario that affect mentally incapable people. It revised the law concerning continuing powers of attorney for property and introduced a new power of attorney for personal care. It also revised the methods of appointing guardians for mentally incapable people, clarified the powers and duties of guardians and attorneys acting for incapable people, and established a definition of incapacity.

There are three types of substitute decision makers for property:

1. a continuing power of attorney for property;
2. statutory guardian of property (a procedure for a family member or the PGT to be appointed without having to go to court);
3. court appointed guardian of property.

There are two types of substitute decision makers for personal care:

1. a power of attorney for personal care;
2. court appointed guardian of property.

Features of Part III of the Advocacy, Consent and Substitute Decisions Statute Law Amendment Act, 1995

The effect of the proposed amendments is to simplify substitute decision making for mentally incapable people and to better ensure that people's wishes are honoured and that family members are empowered to act on behalf of those who are mentally incapable.

The amendments will not invalidate existing powers of attorney. Existing powers of attorney will not be adversely affected.

Property Decision Making

A **continuing power of attorney** will not automatically be terminated when a person is found to be mentally incapable, which was a possible outcome under the Substitute Decisions Act (SDA). Now, when a person makes a continuing power of attorney that applies to all of his or her property, it will be honoured and respected.

Now, the Public Guardian and Trustee will not be appointed as statutory guardian under the SDA where it is known that a person has made a continuing power of attorney covering all of their property.

A person under statutory guardianship can apply to the Consent and Capacity Board to review a finding of incapacity.

The category of persons who can apply directly to the PGT to replace it as statutory guardian is expanded from immediate family to any relative, including those related by marriage. The posting of security may not be required in all circumstances, as this requirement has been made more flexible.

Role of the Public Guardian and Trustee (PGT)

The amendments emphasize the role of the PGT as substitute decision maker of last resort for a mentally incapable person, by providing that the court should not appoint the PGT as guardian of property or guardian of the person unless there is no other suitable person who is available and willing to be appointed.

Amendment of the Public Guardian and Trustee Act will enable the PGT to charge user fees for services it provides.

Important Definitions

Property Management

The Act refers to decisions about property management and powers of attorney for property and finances. Finances include any type of financial decision or transaction that a person would make in the course of managing his or her income, spending, assets, and debts. For example, it could include budgeting expenses and paying bills, doing tax returns, safeguarding valuables, or selling real estate.

Continuing Power of Attorney for Property

A continuing power of attorney is a legal document in which a person gives someone else the legal authority to make decisions about their finances if they become unable to make those decisions themselves. The person who is named as the attorney does not have to be a lawyer. The power of attorney is called "continuing" because it can be used after the person who gives it is no longer mentally capable.

Guardian of Property

A guardian of property is someone who is appointed to look after an incapable person's property or finances. A guardian is different from an attorney: an attorney is chosen by the individual, before becoming incapable, to act on their behalf; while a guardian is appointed afterwards. A guardian can be a statutory guardian or a guardian appointed by the court.

D. Consent to Treatment Act stipulates that clients must be informed of the following:

- What - is being done
- Why - it is being done
- Who - will be doing it
- How - it will be done
- End - results expected
- Other - treatment options available
- Effects - of not having the treatment

Consent is to be secured in writing at the time of admission (**informed**). Support Workers should ask for consent when providing personal care (**implied**).

E. Long-term Care Statutes

- require that different levels of government or support agencies monitor care being given
- that quality care is provided by trained and/or supervised staff
- that clients have nourishing, pleasing and well-balanced diets appropriate to their health requirements
- that medical supervision is provided
- that social and recreational activities are provided
- that basic rights are recognized and that clients are free from abuse

About Long-term Care

Long-term care programs provide:

- visiting health and support services in a home or school setting
- support services to enable people with physical disabilities to live independently
- a variety of services that help frail elderly people to remain living independently at home
- facility-based care for those whose needs can be best met in a long-term care centre

Community-based services are designed to do two things:

- provide quality visiting health services at home and in school to people who would otherwise need to go to or stay longer in hospitals
- assist elderly people and person with physical disabilities to live independently and remain in their own homes for as long as possible

In-home health and support services are available in the community so that people can:

- recuperate comfortably at home
- live independently
- receive important health services at home

The Ontario Ministry of Health funds 43 Community Care Access Centres (CCACs) and more than 1200 agencies that provide services that include homemaking, personal care, community support services and in-home professional health services. These services significantly improve quality of life and care for thousands of people in Ontario. In 1998, CCACs alone assisted more than 380,000 Ontarians.

Community Care Access Centres coordinate access to homemaking, nursing, therapy and other services for people living at home, as well as providing long-term care centre placement and vital information about the services and support available in each community.

Long-term Care Services in Your Community

- Community Care Access Centres
- Long-term Care Centres
- Community Support Services
- Children's Treatment Centres
- Supportive Housing
- Attendant Outreach
- Services for People with Acquired Brain Injury