



## **Reuniting family with their loved ones in long-term care homes during COVID-19**

*Essential family care partners: A safe, humane and step-by-step approach*

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## *Essential family care partners: A safe, humane and step-by-step approach*

### Introduction

The Registered Nurses' Association of Ontario (RNAO) actively calls on the Ontario government to reunite residents in long-term care (LTC) homes with their loved ones. This statement reflects the urgent need for action in all LTC homes, including those in COVID-19 outbreak. This call is guided by the need of residents and their loved ones to access the foundational person- and family-centred care that is vital to their quality of life.<sup>i</sup>

We know the interaction of residents in LTC homes with their family<sup>1</sup> members is vital for the physical, mental and overall well-being of residents. These interactions are beneficial to family members as well. In addition, LTC home staff welcomes the regular presence of family members and considers them partners in care.<sup>2</sup>

Many long-term care residents benefit from the active engagement of their family members in a caregiver role that may include assisting with eating, toileting, transporting to activities and socializing, alongside physical, psychosocial and spiritual care.<sup>ii</sup> Family caregivers may also have a formal role as the resident's substitute decision-maker and as such have legal duty of care. Family caregivers augment the care provided by staff, and in fact assist with up to 30 per cent of this care.<sup>iii</sup> We believe they must be seen as "essential visitors" as defined by the current health ministry directive, and recommend they are identified as *Essential Family Care Partners* (EFCP). Without the restrictions placed by COVID-19 directives, EFCPs are welcomed by the LTC home staff -- considered integral to the care team -- and contribute to person- and family-centred care. The presence of family members in these roles means their loved ones and other residents benefit from their care, support, monitoring and encouragement. These significant contributions have been overlooked in the past months of separation of family caregivers from residents during the COVID-19 pandemic.<sup>iv</sup>

### Background

COVID-19 has drastically impacted visiting in LTC homes since March 2020, when, for the safety of residents and staff, most in-person visits were suspended. Subsequently, both anecdotal and emerging research evidence have clearly demonstrated that after four months, continued restriction on family members' visiting is unethical, inhumane, unsafe and debilitating for both residents and family members.<sup>v vi</sup> Fully aware that COVID-19 will be with us for some time – possibly even years – nurses cannot stand by and watch this tragic situation continue.<sup>vii</sup> Moreover, it is RNAO's view that including families is essential to residents' well-being and will contribute to a safer environment. Thus, using harm reduction principles and a risk-tailored approach,<sup>viii</sup> RNAO offers a five-step process to immediately reinstate EFCPs in LTC homes province-wide.

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<sup>1</sup> "Family" is unique to each individual and whomever the person defines as being family, including spouse, children, siblings, friends, neighbours and significant people in their community.

<sup>2</sup> Ibid.

## Five steps to EFCP reunification

RNAO urges that this statement be followed up with a clear and concise government directive that will apply to all LTC homes within the province, without exception. In doing this, the government enacts its leadership and ensures the care of residents in LTC homes is based on a risk-tailored harm-reduction strategy.

**Step 1:** The LTC home invites families, including the resident (as appropriate) to **identify up to three EFCP(s) for each resident**. During the EFCP identification process, every effort is made to achieve consensus, however in cases where consensus cannot be reached between the family and the LTC home, family members have access to the office of the patient ombudsman to help reach a mutually agreeable decision.

**Step 2:** The LTC home utilizes and/or augments current **internal policies** related to COVID-19 screening, personal protective equipment (PPE) provision, and communication, specifically to staff and others related to the identified EFCPs and their role. For LTC homes in an active outbreak, the EFCP will be asked to sign a statement of understanding that they are placing themselves at an increased risk of contracting COVID-19, and accept all responsibility for it.

**Step 3:** The LTC home provides the formally identified EFCPs with current and regularly updated **information/education** related to PPE, required infection prevention and control practices, and any directives in place because of COVID-19. To minimize risk, each EFCP is responsible to follow the guidance provided by the LTC home while attending to their loved one, and failure to do so may result in losing EFCP status.

**Step 4:** The EFCP is provided with **identification** to be used for entry to the LTC home and to facilitate **documenting their presence** in the home **should contact tracing be necessary**.<sup>ix</sup> **One EFCP** is able to be present at a time in the home and in the company of the resident, **without undue restriction on the number or length of visits**.

**Step 5:** Government facilitates **access to PPE** and the LTC home ensures there is **adequate PPE** for use by EFCPs, consistent with the requirements for staff, given the resident's care needs. The goal is a **risk-tailored strategy that focuses on safety while simultaneously providing a humane and ethical approach** to interaction between the resident and their family member. This **approach can include touch, hugging, and close face-to-face interaction** between the EFCP and the resident. However, the EFCP commits to keep two metres physical distance from the LTC home staff, any other residents and other EFCPs.

## Discussion

Heart-shattering stories from family members of LTC home residents have revealed their deep and personal experiences of loss, guilt, shame and moral distress when contact with their loved one has been sharply cut off, with no indication of how long this separation will continue.<sup>x</sup> Personal time with loved and cherished family members living in LTC homes is limited at best, and may, at worst, never happen in a face-to-face way again.<sup>xi</sup> Added is the emerging research showing the presence of family members encourages hydration and

adequate nutrition, prevents falls, and enables timely toileting to avoid humiliation and the skin damage resulting from incontinence.<sup>xii</sup> In addition, concerns extend to the impact on the residents' quality of life, interest in engaging with those around them, cognition and will to live.<sup>xiii xiv</sup>

This five-step plan is designed to urgently reunite EFCPs with their loved ones who are residents in Ontario's nursing homes. It should in no way impact on the inclusion of other family and friends as regular visitors in LTC homes. In this regard, the focus on person- and family-centred care must remain paramount, and the goal should be to establish a normal home-like environment for the resident, which includes regular visitors. It is anticipated that the EFCP be engaged in planning and supporting such visits.

## Conclusion

As government directives are being reviewed and position statements developed<sup>xv</sup>, RNAO urges the immediate reunification of EFCPs with their loved ones who are residents in all Ontario nursing homes. We offer a five-step plan to be adopted immediately to restore a person- and family-centred care environment that avoids further lost time and maximizes functioning of LTC residents with family support – including during COVID-19 outbreaks.

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<sup>i</sup> Registered Nurses' Association of Ontario (RNAO). (2015). *Person- and Family-Centred Care Best Practice Guideline*. Retrieved from [https://rnao.ca/sites/rnao-ca/files/FINAL Web Version 0.pdf? ga=2.11389684.1340154002.1589466165-1934498124.1589466165](https://rnao.ca/sites/rnao-ca/files/FINAL%20Web%20Version%200.pdf?ga=2.11389684.1340154002.1589466165-1934498124.1589466165)

<sup>ii</sup> Stall, N.M., Reddy, M., & Rochon, P.A. (2020). Nothing informal about family caregiving. *JAMA Internal Medicine*, 180(3), 470-471.

<sup>iii</sup> Regional Geriatric Programs of Ontario, Provincial Geriatrics Leadership Office, & Canadian Geriatrics Society. (2020, June 29). *Family presence in older adult care: A statement regarding family caregivers and the provision of essential care*. Retrieved from <https://rgps.on.ca/wp-content/uploads/2020/06/2020-June-29-Family-Presence-in-Older-Adult-Care-Family-Caregivers-FINAL.pdf>

<sup>iv</sup> Ibid.

<sup>v</sup> Ibid.

<sup>vi</sup> Suárez-González, A. (2020, July 1). *Detrimental effects of confinement and isolation on the cognitive and psychological health of people living with dementia during COVID-19: emerging evidence*. International Long Term Care Policy Network. Retrieved from <https://ltccovid.org/2020/07/01/detrimental-effects-of-confinement-and-isolation-on-the-cognitive-and-psychological-health-of-people-living-with-dementia-during-covid-19-emerging-evidence/>

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<sup>vii</sup> Actiz, Alzheimer Nederland, LOC, VIP, V&VN, Verenso & Zorgthuisnl. (2020). Handreiking voor bezoekbeleid verpleeghuizen in corona-tijd [Nursing home visiting policy during COVID-19]. p. 3. Retrieved from [https://resources.planetree.org/wp-content/uploads/2020/05/Handout\\_Nursing-Home-Visitation-Policy-During-COVID-19\\_TheNetherlands.pdf](https://resources.planetree.org/wp-content/uploads/2020/05/Handout_Nursing-Home-Visitation-Policy-During-COVID-19_TheNetherlands.pdf)

<sup>viii</sup> Canadian Foundation for Healthcare Improvement (CFHI). (2020, July). *Better together: Re-integration of family caregivers as essential partners in care in a time of COVID-19*. p.12. Retrieved from <https://www.cfhi-fcass.ca/docs/default-source/itr/tools-and-resources/bt-re-integration-of-family-caregivers-as-essential-partners-covid-19-e.pdf>

<sup>ix</sup> The Change Foundation. (n.d.). *The caregiver identification (ID) program and family presence policy*. Retrieved July 14, 2020, from <https://changefoundation.ca/the-caregiver-identification-id-program-and-family-presence-policy/>

<sup>x</sup> Justice Centre for Constitutional Freedoms. (2020, June 9). Letter to Dr. Fullerton: Family access to elderly residents in Ontario long term care homes. Retrieved from <https://www.iccf.ca/wp-content/uploads/2020/06/Letter-Ontario-Govt-Long-term-care-homes-2020-06-08-final.pdf>

<sup>xi</sup> Actiz, Alzheimer Nederland, LOC, VIP, V&VN, Verenso & Zorgthuisnl. (2020). Handreiking voor bezoekbeleid verpleeghuizen in corona-tijd [Nursing home visiting policy during COVID-19]. p. 3. Retrieved from [https://resources.planetree.org/wp-content/uploads/2020/05/Handout\\_Nursing-Home-Visitation-Policy-During-COVID-19\\_TheNetherlands.pdf](https://resources.planetree.org/wp-content/uploads/2020/05/Handout_Nursing-Home-Visitation-Policy-During-COVID-19_TheNetherlands.pdf)

<sup>xii</sup> Regional Geriatric Programs of Ontario, Provincial Geriatrics Leadership Office, and Canadian Geriatrics Society. (2020, June 29). *Family presence in older adult care: A statement regarding family caregivers and the provision of essential care*. Retrieved from <https://rgps.on.ca/wp-content/uploads/2020/06/2020-June-29-Family-Presence-in-Older-Adult-Care-Family-Caregivers-FINAL.pdf>

<sup>xiii</sup> Simard, J. & Volicer, L. (2020). *Loneliness and isolation in long-term care and the COVID-19 pandemic*. The Journal of Post-Acute and Long-Term Care Medicine (JAMDA), p. 1. Retrieved from [https://www.jamda.com/article/S1525-8610\(20\)30373-X/pdf](https://www.jamda.com/article/S1525-8610(20)30373-X/pdf)

<sup>xiv</sup> Welsh, M. (2020, May 18). *Isolated and lonely, 'caged' seniors driven to despair—and defiance*. Toronto Star. Retrieved July 10, 2020, from <https://www.thestar.com/news/canada/2020/05/18/isolated-and-lonely-caged-seniors-driven-to-despair-and-defiance.html>

<sup>xv</sup> Canadian Foundation for Healthcare Improvement (CFHI). (2020, July). *Better together: Re-integration of family caregivers as essential partners in care in a time of COVID-19*. Retrieved from <https://www.cfhi-fcass.ca/docs/default-source/itr/tools-and-resources/bt-re-integration-of-family-caregivers-as-essential-partners-covid-19-e.pdf>