



POLICY: Complementary and Alternative Therapies in Personal Care Homes & Transitional Care Units

Program Area: Personal Care Home

Section: General

Reference Number: CLI.6410.PL.030

Approved by: Regional Lead – Community & Continuing Care

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Revised yyyy/mmm/dd

Residents and Families were engaged in the development of this policy.

POLICY SUBJECT

Complementary and Alternative Therapies/Services provided by Southern Health-Santé Sud Representatives or Contracted by a Resident and/or Alternate Decision-Maker

PURPOSE:

To offer clinicians guidance and to mitigate risks when requests are made from residents and/or alternate decision-makers to:

- Utilize services by an external organization and/or External Care Provider;
- To deliver, administer and/or support the use of complementary and alternative therapies in personal care homes (PCHs) and transitional care units (TCUs).

BOARD POLICY REFERENCE:

Executive Limitation-1 (EL-1) Global Executive Restraint & Risk Management
Executive Limitation-2 (EL-2): Treatment of Clients
Governance Process (GP-19). Quality, Patient Safety and Risk Management

POLICY:

Residents are to be given the freedom of choice and have the right to make decisions that affect their life and to have those decisions respected, even if there is some risk, whether this be perceived or actual risk (this is referred to as **dignity of risk**), subject always to reasonable limits based on impacts to the safety of other residents or third parties, or harm to Southern Health-Santé Sud facilities.

Services provided by Southern Health-Santé Sud Providers:

- Regulated health members are to meet professional practice expectations from their licensing body related to complementary and alternative therapies while supporting residents and/or alternate decision-makers to make evidenced informed decisions as part of the plan of care.
- Regulated health members are to seek endorsement from the interdisciplinary team and approval from the site leadership prior to undertaking any complementary or alternative therapies while ensuring there is no conflict of interest with an existing (or future) role(s) with Southern Health-Santé Sud.

- When recommending or providing complementary or alternative therapies, approved in advance by site leadership, regulated health members are to provide the resident and/or alternate decision-maker with the necessary information to make an informed decision prior to any intervention taking place.

Services provided by External Organization/External Healthcare Providers or Complementary

Service Providers:

- Residents and/or alternate decision-makers who wish to obtain complementary or alternative therapies or additional services may arrange to have those services contracted privately at no cost to Southern Health-Santé Sud.
- Residents and/or alternate decision-makers who hire an External Organization/ External Healthcare Provider are responsible for screening and verifying that the individual that is hired holds the appropriate licensure and credentials to perform the service, along with security checks. Recommended security checks include a current Criminal Record Check including a Vulnerable Sector Search (CRC) and Adult Abuse Registry check and are obtained not more than six (6) months prior to being hired/contracted by the resident and/or alternate decision-maker. The vetting is the sole responsibility of the resident and/or alternate decision-maker and shall not be undertaken by any representative of Southern Health-Santé Sud.
- Site leadership is to encourage the resident and/or alternate decision-makers to confirm that the External Organization/External Healthcare Provider carries valid liability insurance with coverage of at least 5,000,00 for any one occurrence, if there will be physical contact with the resident and \$2,000,00 any one occurrence if there is no physical contact with the resident. Insurance coverage by an External Organization/External Healthcare Provider is not a requirement in order to provide care & services. Site leadership is to inform the resident and/or alternate decision-makers that Southern Health-Santé Sud insurance coverage does not extend to External Organizations/External Healthcare providers.
- Resident and/or alternate decision-makers are encouraged to validate that the External Organization/External Healthcare Provider carries their own Worker's Compensation coverage.
- The provision of services by the External Healthcare Provider shall be collaboratively negotiated and scheduled between the resident and/or alternate decision-maker, PCH and the External Healthcare Provider so as to avert any conflicts between all parties.
- Southern Health-Santé Sud nurses are to document on the Integrated Care Plan (ICP) (CLI.6410.PL.002) the type and frequency of the treatment that the resident receives from the External Healthcare Provider.
- The provision of all therapeutic equipment and supplies are the responsibility of the External Organization/External Healthcare Provider and/or the resident and/or alternate decision-maker. Any equipment brought into the PCH by the External Healthcare Provider is to comply with CSA Standards.
- The PCH is not responsible for providing dedicated space for External Healthcare Providers albeit reasonable efforts are to be taken to accommodate requests,
- External Healthcare Providers and Complementary Service Providers are to complete documentation immediately following treatment to detail the nature of the treatment, resident's response to the treatment and the continued plan of treatment, which is to be filed in the resident's health record.

- External Healthcare Provider services may be restricted, withdrawn or denied for the following reasons:
 - The degree of coordination and communication required to provide the complementary services prevents Southern Health-Santé Sud staff from fulfilling their mandated roles; and/or
 - The inability of the External Healthcare Provider to adhere to conditions identified in this policy such as unwillingness to work within the integrated plan of care, failure to document sessions; failure to communicate and/or the creation of issues that effect resident safety or well-being.
- The site leadership and resident and/or alternate decision-maker are to take the appropriate action if there are practice concerns related to the External Healthcare Provider which compromise the resident's safety and/or well-being.

DEFINITIONS:

Alternate Decision-maker: a person who has decision-making capacity and is willing to make decisions on behalf of a resident who does not have the capacity to make a decision. An alternate may be legally authorized (e.g. health care proxy or committee) or may be a person designated (e.g. family member) in the absence of a legally authorized individual.

Alternative Therapies: modalities or interventions used *in place of* conventional healthcare practices to address resident health needs.

Authorized Southern Health-Santé Sud Representative: a regulated health member that is competent to perform a complementary and/or alternative therapy in accordance with their professional licensing body and has received approval by the site leadership of the personal care home to perform a specific intervention(s) in advance of any intervention.

Complementary Therapies: treatments that are employed *in conjunction with* mainstream health-care practices. Examples may include herbal products, visual imagery and traditional medicine such as Ayurvedic and Indigenous medicines.

Complementary Service Provider: is a person who is contracted by a resident and/or alternate decision-maker to provide complementary therapy services to the resident in addition to the treatment and therapies already by representatives of Southern Health-Santé Sud.

Dignity of Risk: beliefs and actions that support residents to make decisions that affect their lives, and to have those decisions respected by others, even if there is some inherent actual or potential risk.

Evidence-Informed Decision-Making (EIDM): is the ongoing process that incorporates evidence from research findings, clinical expertise, resident preferences and other available resources to inform decisions impacting resident care. EIDM ensures there is sufficient knowledge of complementary and alternative therapies so regulated health care professionals, residents and/or alternate decision-

makers are knowledgeable about actions, effects, risks and benefits of the interventions within the context of the resident's diagnosis/diagnoses and plan of care.

External Healthcare Provider: a regulated health member or complementary service provider who is not currently employed by Southern Health-Santé Sud.

Integrated Care Plan (ICP): a document which provides direction on the type of care a resident may need. It is initially compiled based on assessment of each resident's needs. An ICP is a highly personal and individualized document.

Most Responsible Provider (MRP): a regulated health member who may be a physician and/or nurse practitioner providing professional care and services in the personal care home.

Regulated Health Member: means in respect of a regulated health profession, an individual whose name is entered on the register of regulated members.

IMPORTANT POINTS TO CONSIDER:

When recommending to perform a complementary therapy, regulated health members are to consider the following questions:

- Is this an appropriate intervention for this resident?
- Is this intervention included as part of the recognized care plan?
- Have I consulted with the broader health care team about this intervention?
- Have I reviewed if there are organizational policies and guidelines about using this complementary and alternative therapies?
- Is there a conflict of interest between my current (or future) role(s) with Southern Health-Santé Sud and with providing any complementary or alternative therapies?
- Do I have the authority to perform this therapy?
- Am I competent to provide this therapy safely and effectively?
- Do I understand, and can I manage the possible outcomes of this complementary and alternative therapy (including any effects on the resident, Southern Health-Santé Sud or other third parties)?

PROCEDURE:

For Services provided by Southern Health-Santé Sud Providers:

1. Prior to a regulated health member recommending a complementary or alternative therapy, the following actions are to be taken:
 - a. information is to be gathered to share with the interdisciplinary team and site leadership about the actions, effects, risks and benefits of the intervention within the context of a specific resident's diagnosis/diagnoses and plan of care;
 - b. the questions under the heading titled ***Important Points to Consider*** are to be reviewed so that answers can be offered to the interdisciplinary team and site leadership;
 - c. should there be uncertainty about the benefit of the complementary or alternative therapy to the resident, the interdisciplinary team and site leadership team, are to

utilize the regional ethical decision-making process to determine the most suitable course of action.

2. Once endorsement is obtained from the interdisciplinary team and approval granted from site leadership, discussion is to occur with the resident and/or alternate decision-maker so they can make an evidenced-informed decision in advance of any intervention.
3. Written consent is to be obtained from the resident and/or alternate decision-maker prior to undertaking any complementary or alternative therapy utilizing the *Consent to Perform a Complementary or Alternative Therapy by an Authorized Southern Health-Santé Sud Representative* (CLI.6410.PL.030.FORM.01). The resident and/or alternate decision-maker is to be informed that consent can be withdrawn at any point in time by verbally informing any regulated health member.
4. Should written consent be obtained the regulated health member is to complete documentation in the resident's health record immediately following treatment to detail the nature of the treatment, the resident's response to the treatment and the continued plan of treatment. Documentation is to occur in the section of the resident's health record where the regulated health member would normally document assessments, interventions and evaluations (e.g. integrated progress notes or physician notes).

Services provided by External Healthcare Providers or Complementary Service Providers:

1. Residents and/or alternate care providers who want to hire an External Organization/External Healthcare Provider(s) are to notify the site leadership or designate of their intent as outlined in the Complementary and Alternative Therapies Information Sheet for Resident & Alternate Decision-Makers (CLI.6410.PL.030.SD.01). The site leadership or designate are to provide the resident and/or alternate decision-maker with the following documents and for them to have these documents reviewed and signed, as noted below, by the External Organization/External Healthcare Provider and returned to the site leadership or designate **prior to** any interventions taking place on/with the resident:
 - a. Confidentiality of Personal Health Information (ORG.1411.PL.201 - **Read only**);
 - b. Supporting Document Information and Agreement for Persons Associated with Southern Health-Santé Sud (ORG.1411.PL.201.FORM.02 - **Document to sign**);
 - c. Request to Access Personal Health Information Form (ORG. 1411.PL.101.FORM.01- **Read and sign, if requesting resident Personal Health Information**);
 - d. Indemnification and Hold Harmless Agreement (CLI.6410.PL.030.FORM.03 - **Document to sign**);
 - e. External Healthcare Provider Treatment Notes & Plan of Care (CLI.6410.PL.030.FORM.02)
2. Site leadership are to sign the Indemnification and Hold Harmless Agreement, once returned by the resident or alternate decision-maker, and signed by the External Organization/External Healthcare Provider. This agreement is to be kept in trust in the administration area and a dated and signed copy, by both parties, is to be given to the external company/External Healthcare Provider by site leadership or designate. Site leadership are to inform the resident and/or alternate decision-maker about recommended insurance coverage (see statement

under the policy heading) as Southern Health-Santé Sud's insurance does not extend to External Organizations/External Healthcare providers.

3. Nursing staff are to document in the integrated care plan (ICP) the type and frequency of intervention(s) as communicated by the resident and/or alternate decision-maker.
4. The resident and/or alternate decision-maker are to schedule any appointments in collaboration with the nursing staff and External Healthcare Provider.
5. Should an External Healthcare Provider require any health information from the resident's health record prior to any intervention, written consent for access to health information is to be obtained from the resident or alternate decision-maker in advance of any intervention(s) utilizing the Request to Access Personal Health Information Form (ORG.1411.PL.101.FORM.01).
6. External Healthcare Providers are to document on the External Healthcare Provider Treatment Notes & Plan of Care immediately following any intervention(s) and provide the documentation to the nurse on duty to file in the resident's health record where these notes are kept.
7. Should there be an adverse outcome(s) related to the intervention(s), the External Healthcare Provider is to communicate information immediately to the nurse in charge who in turn is to assess and communicate information to the most responsible provider (MRP) and document actions in the integrated progress notes.
8. Disclosure of an adverse outcome is to be undertaken in accordance with the regional disclosure process (ORG.1810.PL.002) and Shared Health's disclosure process of patient safety events.

SUPPORTING DOCUMENTS:

CLI.6410.PL.030.FORM.01	Consent to Perform a Complementary or Alternative Therapy by an Authorized Southern Health-Santé Sud Representative
CLI.6410.PL.030.FORM.02	External Healthcare Provider Treatment Notes & Plan of Care
CLI.6410.PL.030.FORM.03	Indemnification and Hold Harmless Agreement
CLI.6410.PL.030.SD.01	Complementary and Alternative Therapies Information Sheet for Residents & Alternate Decision-Makers

REFERENCES:

CLI.4110.PL.001.FORM.01	Consent to Procedure, Treatment or Investigation
ORG.1411.PL.101.FORM.01	Request to Access Personal Health Information Form
ORG.1411.PL.201	Confidentiality of Personal Health Information
ORG.1411.PL.201.FORM.02	Information and Agreement for Persons Associated with Southern Health-Santé Sud
ORG.1510.PL.006	Security Checks for Employment
ORG.1810.PL.002	Southern Health-Santé Sud (2023). Disclosure Process – Critical Incidents
ORG.1810.PL.005	Ethical Decision-Making
Canadian Nurses Association (2018). <i>Evidence-Informed Decision-Making and Nursing Practice</i>	

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Use of pre-printed documents: Users are to refer to the electronic version of this document to ensure the most current document is consulted.

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