

Title: Home Care - Home Ostomy Program

Level: Provincial Service Area: Home Care Applicable to: All healthcare providers, organizations, and facilities across Manitoba involved in delivering health services provided or funded by the government or a health authority.

Approved by: Shared Health Executive Team

**Document Number:** 630.105.109 **Category:** 630 – Provincial Primary, Home/Community & Palliative Care Program **Subcategory:** 630.105 – Home Care

Document Date: 25-Nov-2024 Last Revision Date: 01-Mar-2017

**Notice:** This document has been transitioned from Manitoba Health, Seniors, and Long-Term Care to Shared Health. Shared Health is planning to complete an in-depth review of the material and post an updated version once available.

# 1.0. Purpose

- 1.1. To outline general eligibility criteria for the Home Ostomy program.
- 1.2. To outline the process by which an individual receives ostomy supplies and enterostomal therapy (ET) nursing services.

# 1.3. Background

- 1.3.1 The Home Ostomy Program, established July 1, 1974, is managed, and delivered by the Winnipeg Regional Health Authority (WRHA) on behalf of all regional health authorities (RHAs).
- 1.3.2 The primary impact of the availability of safe, adequate ostomy supplies and ET nursing services is to prevent hospitalization, enable discharge from hospital, prevent long term care placement and to prevent additional stress to clients, caregivers, and staff.
- 2.0. **Scope**

- 2.1. Applies to the Winnipeg Regional Health Authority (WRHA), who is responsible for administering and coordinating the Home Ostomy Program on behalf of all RHAs.
- 2.2. Applies to all Home Ostomy staff within the WRHA and all Home Care staff in RHAs, involved in assessing and delivering Home Care services.

### 3.0. **Definitions**

### 3.1. Defined Terms

- 3.1.1 Access: Ability of clients or groups to obtain services in the most appropriate setting at the right time, based on their personal needs.
- 3.1.2 Caregiver: A person providing care to a client due to a prior relationship, which may include family members or individuals considered "family by choice" (e.g., friends, neighbors).
- 3.1.3 Home Care: The coordinated delivery of a broad range of health and social services to meet the needs of the persons who require assistance or support in order to remain at home or whose functioning without Home Care is likely to deteriorate making it impossible for the person to stay at home in the community.
- 3.1.4 Ostomy: An operation to create an opening from an area inside the body to the outside.
- 3.1.5 Reassessment: A specific activity, as well as an ongoing process involving the systematic re-evaluation of a patient's or client's needs and forms the basis for revising/refining a previously established treatment, care, and/or service plan.
- 3.1.6 Supplies and Equipment: Include but are not limited to the following supplies that support the client's care plan:
  - 3.1.6(a) wound and dressing supplies;
  - 3.1.6(b) incontinence supplies (urinary and bowel);
  - 3.1.6(c) personal care support and mobility aids; and
  - 3.1.6(d) respiratory equipment.

## 3.2. Abbreviations

- 3.2.1 Personal Care Home (PCH): Premises in which personal care services are provided to residents in the premises, but does not include a private residence in which care is provided by an individual to his or her family member.
- 3.2.2 Regional Health Authorities (RHA): Refers to regional health authorities established or continued under the Government of Manitoba, Health System Governance and Accountability Act.
- 3.2.3 Enterostomal Therapy (ET): Specialized nursing care focused on the management and treatment of patients with ostomies, wounds, and continence issues, provided by certified ET nurses.
- 3.2.4 Winnipeg Regional Health Authority (WRHA)

# 3.3. Professional Groupings

- 3.3.1 Home Care Case Coordinators (HCCC): A professional hired by the RHA to complete client assessments to determine eligibility, to develop the Care Plan with the client and/or family/designated other and refer exceptional case decisions to the Home Care Manager.
- 3.3.2 Enterostomal Therapy (ET) Nurse: A nurse who has specialized training in treating patients with ostomies.

## 4.0. **Policy**

4.1. Manitobans registered with the Home Ostomy program will have access to professional ET nursing service and certain types of ostomy supplies that can be provided in clients' private homes or other community living environments.

# 4.2. Eligibility Criteria

- 4.2.1 Client eligibility is established by ET nurses when all of the following criteria are met:
  - 4.2.1(a) Eligibility for home care services;
  - 4.2.1(b) Medical stability;
  - 4.2.1(c) Dependency on ostomy supplies; and
  - 4.2.1(d) The client and caregiver agree to adhere to operational policies of the RHA. These may include but are not limited to:
    - frequency of new supplies;

**Disclaimer:** Please note that printed versions or versions posted on external web pages may not be current, as these documents are regularly reviewed and updated. Always refer to the Shared Health website for the most current version.

- emergency procedures;
- training requirements;
- personal care requirements; and
- sharing of information.
- 4.3. The request for ostomy supplies will be based on urgency and priority of the individual's need, availability of appropriate resources, and original date the ET nurse received the request for service. Clients who have surgery are provided with the necessary products to facilitate discharge. Clients order the supplies monthly thereafter.
- 4.4. Reassessment for continued eligibility to receive ostomy supplies is the responsibility of the ET nurses in collaboration with the client and the caregiver.

## 4.5. Inclusions

- 4.5.1 Clients who are eligible to receive ostomy supplies receive:
  - 4.5.1(a) Improved products as best practices become known and the RHA is able to provide these products;
  - 4.5.1(b) Delivery and transportation of supplies as required;
  - 4.5.1(c) Assistance with the use of supplies if necessary; and
  - 4.5.1(d) Replacement of supplies damaged during normal operation.

## 4.6. Discontinuation of Service

- 4.6.1 Services and supplies may be terminated by the Home Ostomy program for any of the following reasons:
  - 4.6.1(a) condition improved ;
  - 4.6.1(b) condition deteriorated;
  - 4.6.1(c) personal care home placement;
  - 4.6.1(d) extended hospitalization;
  - 4.6.1(e) death;
  - 4.6.1(f) moved out of province;
  - 4.6.1(g) the Home Ostomy program no longer meets the client's needs; or

**Disclaimer:** Please note that printed versions or versions posted on external web pages may not be current, as these documents are regularly reviewed and updated. Always refer to the Shared Health website for the most current version.

4.6.1(h) the client is unwilling to cooperate with treatment plan.

## 4.7. **Responsibilities**

- 4.7.1 The WRHA is responsible for conducting evaluations of the Home Ostomy program.
- 4.7.2 The ET nurses are responsible for the provision of education on ostomy care to health professionals in various settings.
- 4.7.3 ET nurses will authorize ostomy supplies ordered from and supplied by Logistic Services province wide and base these orders on best practices with consideration given to regional resources.

## 5.0. Procedure

5.1. Not Applicable

### 6.0. **Resources**

6.1. Not Applicable

## 7.0. References

## 7.1. Related Policy Documents

- 7.1.1 Government of Manitoba (2017). *HCS 207.1 Role of Family/Informal Support Network*. Home Care Policy Manual.
- 7.1.2 Government of Manitoba (2017). *HCS 207.2 General Eligibility.* Home Care Policy Manual.
- 7.1.3 Government of Manitoba (2017). *HCS 207.3 Service Level Policy*. Home Care Policy Manual.
- 7.1.4 Shared Health (2024). Provincial Clinical Policy, <u>630.105.116</u> <u>Equipment and Supplies</u>.

## 8.0. **Contact(s)**

8.1. Provincial Director Health Services, Primary, Home/Community and Palliative Care Program - Shared Health

For questions about the implementation and application of this controlled document, please contact your immediate manager. Management may consult with the Provincial Clinical Service Lead, Home & Community Care – Shared Health for support.