Provincial Clinical Policy	

Title: Home Care - Adult Day Programs

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

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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 Adult Day Programs (ADPs).

1.2. Background

1.2.1 ADPs were implemented in April, 1979 as a component of home care services and are administered by regional health authorities (RHA).

1.2.2 ADPs have traditionally been located close to or in health care facilities to facilitate sharing of resources.

1.2.3 ADPs were introduced to provide home care clients, who were unable to access other community programs, opportunities for socialization and recreation. ADPs have since been expanded to include programming for young disabled individuals, the cognitively impaired, and those clients in need of higher levels of care.

2.0. Scope

2.1. Applies to all regional health authorities (RHA) in Manitoba, responsible for administering and coordinating Home Care and ADP services.

2.2. Applies to all staff within an RHA, involved in assessing and delivering Home Care and ADP services.

3.0. Definitions

3.1. Defined Terms

3.1.1 Adult Day Program Sponsor: An organization that provides/manages an adult day program to meet an identified community need within the established procedures and guidelines developed by the RHA and Manitoba Health. The partnership between an external sponsor and the RHA is outlined in a service purchase agreement with the RHA.

3.1.2 Caregiver: A person who is providing care because of a prior relationship with a client. A caregiver may be a biological family member or "family by choice" (e.g. friends, partners, neighbours).

3.1.3 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.

3.1.4 Residential Care: A community care alternative wherein accommodation, care, and supervision are provided to one or more adults who have a developmental disability/disorder or require care because of frailty or cognitive impairment related to aging. A residential care facility is licensed or issued a letter of approval under the regulations made under The Social Services Administration Act.

3.1.5 Supportive Housing: Housing with care alternative that provides personal support services and homemaking in permanent community based congregate residential settings. The target population is primarily frail and/or cognitively impaired elderly persons who can no longer manage in their own home with available resources (family and home care resources) but are not yet ready for personal care home (PCH) placement. Individuals require services for meals, laundry and light housekeeping (provided by the sponsor through a service package). Individual care requirements justify the need for the availability of 24-hour on-site support and supervision and assistance with personal support services i.e., bathing, dressing, and grooming.

These individuals would not require 24-hour professional care but may require episodic professional care (provided through the RHA). Individuals who require 24-hour support and supervision as well as 24-hour professional care would be more appropriate for other options, i.e., PCH. As the program supports a social model, individuals living within this environment should be able to reside in a congregate setting.

3.2. Abbreviations

3.2.1 Adult Day Program (ADP): A program which provide social and recreational opportunities to Home Care clients to maximize their independence in the community and provide relief to caregivers.

3.2.2 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.

3.2.3 Regional Health Authorities (RHA): Refers to regional health authorities established or continued under the Government of Manitoba, Health System Governance and Accountability Act.

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.

4.0. Policy

4.1. Adult Day Programs (ADP) provide social and recreational opportunities for home care clients to maximize their independence in the community while providing relief to caregivers.

4.2. Eligibility Criteria

4.2.1 Eligibility of client for an ADP is established when a Home Care Case Coordinator (HCCC) or designated professional RHA staff determines that 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) client/caregiver is willing/able to cooperate with a safe care plan; and

4.2.1(d) client/caregiver signs the approved application form and agrees to adhere to operational policies as set out by the RHA which may include but are not limited to:

- transportation arrangements;
- frequency of attendance;
- medical emergency procedures;
- fee and outing payments;
- personal care; and
- sharing of information.

4.3. Provision of ADP services is based on priority of the client's need, availability of resources, and the original date of the request for an ADP placement.

4.4. Since continuation of community involvement supports the aging in place philosophy, clients residing in residential care and supportive housing may be considered eligible for ADP participation at the discretion of the RHA.

4.5. **Inclusions**

4.5.1 Clients who attend ADPs receive:

4.5.1(a) Case management by HCCC or designated professional RHA staff;

4.5.1(b) Transportation to and from the ADP;

4.5.1(c) Mid-day meals, refreshments and snacks as determined by the RHA and the ADP sponsor; and

4.5.1(d) Recreational activities that meet their needs and abilities.

4.6. **Discharge Criteria**

4.6.1 A client may be discharged from an ADP for any of the following reasons:

4.6.1(a) Client's condition improves or deteriorates (program no longer appropriate);

4.6.1(b) Personal care home placement or admission to hospital for an extended period occurs;

4.6.1(c) Client is deceased;

4.6.1(d) Clients moves from the geographic area served by the ADP;

4.6.1(e) There is refusal to pay the participant fee;

4.6.1(f) The ADP is unable to meet the client's needs; or

4.6.1(g) The client/caregiver/family is unwilling to cooperate with a safe care plan.

4.7. Responsibilities

4.7.1 Each RHA is responsible for monitoring and evaluation of the regional ADPs.

4.7.2 The RHA, in collaboration with ADP sponsors, are responsible for maintaining waiting lists. Reassessment for continued eligibility for any ADP is the responsibility of the RHA.

4.7.3 Manitoba Health reviews and communicates the annual participant fee to each RHA, which subsequently informs the relevant parties within the region.

5.0. Procedure

5.1. Not Applicable

6.0. Resources

6.1. Not Applicable

7.0. References

7.1. Government of Manitoba (2022). *The District Health and Social Services Act*, C.C.S.M. c. H26.

7.2. Related Policy Documents

7.2.1 Government of Manitoba (2017). *HCS 207.2 General Eligibility*. Home Care Policy Manual.

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.