



Team Name: Regional Home Care Leadership Team Team Lead: Regional Director, Home Care Approved by: Executive Director - East	Reference Number: CLI.5411.SG.004 Program Area: Home Care Policy Section: Service
Issue Date: September 28, 2018 Review Date: Revision Date:	Subject: Home Care Services: Off-Site Service

STANDARD GUIDELINE SUBJECT:

Home Care Services: Off-Site Service

PURPOSE:

To promote and support a Home Care client’s independence, safe care, and well-being in the community. Home Care may deliver essential personal care and nursing services at alternate sites and locations outside the home environment (e.g. workplace, educational facility, community program, alternate home, outdoors near residence, etc.).

To define eligibility criteria for Off-Site services.

DEFINITIONS:

Unable to arrange:

- There are no alternative options available.
- Client is physically and/or mentally unable to arrange for the service (e.g. community bath).
- Client is unable to afford the service.

Unable to Afford – A client does not have enough money to purchase alternate services. Home Care does not conduct a formal means test to identify a client’s available financial resources. To assist in determining the client’s ability to purchase service without a formal means assessment, the Case Coordinator will explore with the client the following in a respectful manner:

- How the purchase of alternate services would impact their ability to:
 - Pay rent, hydro, telephone
 - Purchase medications
 - Cause financial burden

The Case Coordinator will accept the clients accounting of their financial status and ability to pay in good faith. Home Care will not deny services where the client has indicated an inability to pay.

IMPORTANT POINTS TO CONSIDER:

➤ Eligibility Requirements

- The person must be eligible for Home Care (Eligibility for Home Care CLI.5410.PL.004) and assessed as requiring essential personal care and/or nursing services.
 - The environment provides an appropriate and safe workspace for client and staff, ensures client privacy and confidentiality and adheres to infection control guidelines for direct service provision.
 - Client is medically stable.
 - Client is unable to meet own care needs.
 - Client/family/caregiver is unable to arrange or afford services which could be provided through a community resource.
 - Client has no family or caregiver who can assume responsibility for providing and/or arranging for the provision of service.
 - Client/family/caregiver and “off-site” personnel/management are willing to cooperate with a reasonable and safe care plan.
 - Client is not on the Self/Family Managed Care Program (the self/family manager determines the site of service delivery).
- Essential personal care and nursing services may be delivered at alternate sites/locations.
- Essential services are defined as those services that without which clients will experience significant and imminent changes in their health status, including hospitalization.
- Home Care Staff do not accompany and/or provide transportation for clients.
- Service provision at all off site locations must be delivered in an area that is accessible.
- Clients may be discharged from “offsite” service delivery or the case closed for any of the following reasons:
- condition improved
 - condition deteriorated
 - Personal Care Home placement or other living situations where off site services may be included
 - extended hospitalization
 - death
 - moved
 - Home Care is unable to meet the individual’s needs
 - the client or off site location is unwilling or unable to continue with a safe care plan

PROCEDURE:

1. The Case Coordinator is responsible to:
 - Complete a comprehensive assessment.
 - Assess/confirm service options.
2. The Case Coordinator determines if request for off-site service provision is in accordance with eligibility criteria. Where eligibility is met and service need identified, the Case Coordinator completes a Home Care Special Approval Over Service Over Protocol Request Form (CLI.5411.PL.001.FORM.02) and forwards to the Regional Manager, Case Coordination.
3. If request approved the Case Coordinator receives a signed approval form authorizing the special request for documentation purposes. If request not approved the Case Coordinator informs the client /family/caregiver the reason for denial of Off Site Services and explores with client/family/caregiver alternatives to service delivery.
4. The Case Coordinator completes a Working Alone Safety Assessment and reviews with client/family/caregiver:
 - individual care needs
 - service provision/care plan details/requirements
 - special arrangements to meet safe criteria at alternate off site locations e.g. clean, safe and private work space; secure storage space for equipment, supplies and Personal Health Information, scheduling particulars, etc.
6. Case Coordinator identifies the alternate site/location of service provision and relevant information on the Nursing Service Request (NSR)/ Care Plan to ensure supporting documents are available for implementation of Off-Site services.
7. Case Coordinator reviews Off-Site services at minimum annually and as needed based on client assessment.
8. Case Coordinator documents on the Manitoba Health & Healthy Living - Care Plan Information MG-1840 form the services provided

REFERENCES:

Manitoba Health, Seniors and Active Living, *Off Site Services Policy HCS 207.12, July 2009*

Home Care Special Approval Over Service Over Protocol Request Form

[\(CLI.5411.PL.001.FORM.02\)](#)

Eligibility for Home Care [\(CLI.5410.PL.004\)](#)

Manitoba Health & Healthy Living - [Care Plan Information MG-1840 form](#)

Working Alone Safety Assessment (WASA)