



Private Seniors Living Residences – FAQs (Frequently Asked Questions)

1. My family member has a skin tear or pressure sore. Who looks after this?

The Self/Family Manager Care (SFMC) Manager contacts the Case Coordinator to discuss options. If appropriate, the Case Coordinator may send a Home Care Nurse to do an assessment.

2. My family member is frequently falling. What do I do, and what happens next?

The SFMC Manager contacts the Case Coordinator to discuss the situation. If appropriate, the Case Coordinator puts in a referral to rehabilitation services for an assessment.

Once the assessment is complete, Rehabilitation Services shares the assessment result with the Case Coordinator. The Case Coordinator will update the client's care plan accordingly, based on the assessment.

If the referral was sent by another party (e.g. physician, family member), and the Case Coordinator is unaware of the referral to rehabilitation services, the SFMC Manager is responsible for communicating the change in status/care needs, by sending a copy of the report to the Case Coordinator.

3. The Home Care Nurse has seen my family member, and has completed an assessment. The Nurse recommends a change in my family member's care (e.g. Family member needs a barrier cream). How does this change get communicated to the staff that are caring for my family member?

The Home Care Nurse will communicate any changes required based on their assessment with your family member's Case Coordinator, who will contact the SFMC Manager to discuss these changes. The SFMC Manager is responsible to communicate any changes to hired staff administering care.

- 4. My family member was assessed and needs a Home Care Nurse to come visit. The Case Coordinator has arranged for a nurse to come on Wednesdays, but said my family member needs to have their bath prior to the nurse visit. My family member usually has their bath on Thursdays. What do I do?**

The staff caring for your family member are hired by you, the SFMC Manager. The SFMC Manager advises their staff of the need to have the bath moved to Wednesdays before the scheduled nursing visit.

- 5. My family member needs more supplies and/or needs equipment. (E.g. transfer pole; incontinence products; wheelchair).**

The SFMC Manager contacts the Case Coordinator to let them know what is required. The Case Coordinator discusses available options with the SFMC Manager.

- 6. My family member is receiving palliative care and requires subcutaneous medication to be drawn up and given to them. What do I do?**

The SFMC Manager decides who will be doing these tasks (e.g. family/friends or hired staff). The SFMC Manager contacts the Case Coordinator to discuss who will be drawing up and administering the medication. In some situations, Home Care Nurse or Palliative Care Nurse may assist with drawing up the medications.

If required, the Case Coordinator can arrange for training for the SFMC Manager. The SFMC Manager is required to train anyone who will be drawing up the medications and providing it to their family member. The SFMC manager may arrange for their privately hired staff or family/friends to attend the training session organized by the Case Coordinator.

- 7. My family member is scheduled for a visit from the Home Care Nurse but I have been contacted and told that the Nurse cannot see them today. What do I do?**

All Home Care clients are required to have a backup plan in case the Home Care Staff are unable to attend. In this situation, you would use the backup plan that you have in place. The SFMC Manager is responsible for providing or arranging for the care when the Home Care Nurse is unavailable.

8. My family member has had a change in condition and requires more/less care than before. What do I do next?

Your family member's care is based on the assessment which was completed by the Case Coordinator, and the care that you are currently receiving funding for is on the 'Schedule B' Care Plan document.

If your family member requires more/less care than they did before, the SFMC Manager contacts the Case Coordinator to discuss care changes, and the need for a reassessment, if appropriate. The Case Coordinator will schedule a reassessment visit to update the Schedule B Care Plan document. Reassessment visits will occur based on the Case Coordinator's availability and schedule.

9. My family member was in the hospital and is now ready for discharge. My family member requires more care than they did before. What do I do now?

Anytime your family member is admitted to the hospital, the SFMC Manager should let the Case Coordinator know. The Case Coordinator is then aware that the client's care needs may need to be reassessed or reviewed before discharge, and will update the Schedule B Care Plan accordingly.

If your family member is being discharged before the Schedule B Care Plan is updated, the family is responsible for providing or arranging for any additional care that is different than what was previously provided on the Schedule B Care Plan. This includes paying for staff or care required, until the Schedule B Care Plan can be updated. Retroactive payments are not provided.

10. What is the difference between Supportive Housing and a Private Seniors Living Residences?

The Supportive Housing program is a government funded model that allows individuals requiring 24-hour support and supervision to be supported in the community. To be considered for a Supportive Housing program, the Case Coordinator completes an application with the family/client, and the application goes through an acceptance process, also known as 'paneling.' This is the same process that is used to access a Personal Care Home (PCH) bed. The date the application is approved for Supportive Housing is used as your approval date for PCH, should you require PCH in the future.

The six (6) Supportive Housing locations in Southern Health-Santé Sud are: Cedarwood Supportive Housing in Steinbach, Villa Youville in Ste. Anne, Greendale Estates in Grunthal, Niverville Credit Union Manor in Niverville, Chalet Malouin in St. Malo, and Gardens Apartments in Altona. The cost to live in these homes varies.

A Private Seniors Living Residence is not government funded. Private Seniors Living Residences offer individuals an environment where they can age in place, and may offer a variety of services as part of the tenancy package. Individuals can choose to live in a Private Seniors Living Residence and find out more information by contacting the operators of these types of homes. Individuals may be eligible for Self-Family Managed Care dollars through the Home Care Program, and may choose to use SFMC dollars to hire staff in a Private Seniors Living Residence to provide care.

Some housing complexes have both Supportive Housing and private spaces available. Factors to consider when deciding whether to access a Supportive Housing bed or a private space include:

- Cost – What are the financial implications of choosing one type of space over the other? You cannot use Self Family Managed Care dollars in Supportive Housing. A discussion with the operators of these types of housing options can answer your questions about costs.
- Care Coverage – Who is providing the care in the home? A discussion with your Home Care Case Coordinator will help describe what this looks like for your particular situation.
- Future planning – Supportive Housing provides you with a panel acceptance date that can be used if you need a Personal Care Home in the future. This panel date may mean a shorter wait for a Personal Care Home.

11. What information is required for the audit?

All clients who choose SFMC are required to submit information to Southern Health-Santé Sud regularly for the purposes of a financial audit. Information required includes bank statements, a copy of the Cheque Register & Receipts Journal, and a copy of invoices showing hourly rates and hours of care provided. You will receive an email or letter at the time of audit letting you know what is required and where to send it.

The purpose of the audit is to ensure that the funding provided is being used to provide the care outlined in the care plan. SFMC funds cannot be used to cover services in the tenancy package or nursing services.