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For the purpose of this document, the following definitions have been used:

adult day services are provided through an organized program of personal care, health care and therapeutic social and recreational activities in a group setting that meets client health care needs and/or caregiver needs for respite.

advance care planning is a process where a capable adult documents their beliefs, values, wishes and decisions for their future health care, including end-of-life care, to be used when the adult is no longer capable of communicating on their own behalf. A person may also develop an advance directive and/or appoint a representative as part of the advance care planning process.

after tax income is the client's net income (line 236) less the sum of taxes payable (line 435), Universal Child Care Benefit (line 117) and Registered Disability Savings Plan (line 125) as reported on the client's income tax return and confirmed by the Canada Revenue Agency, in the appropriate taxation year.

allowable charges are charges that are applied as a part of the residency agreement.

approved expenditures are items approved by the health authority as part of the client's funded CSIL care plan.

assessment is an evaluation, conducted by a health authority professional, of an individual's overall health status, goals and capabilities, leading to a decision regarding the priority needs to be addressed, and supporting development of a care plan.

assisted living services are provided in a supportive accommodation environment for clients with physical and functional health challenges who can no longer reside at home but are able to make decisions on their own behalf. Each assisted living unit incorporates all of the following elements:

- a private housing unit with a lockable door;
- hospitality services; and
- personal care services.

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assisted living unit is a private housing unit, registered under the *Community Care and Assisted Living Act*, where the health authority:

- provides or contracts with a service provider to provide the three elements of assisted living services; and
- determines eligibility and access priority for clients moving in and out of the setting.

benefits are the services, programs and supplies provided to clients at no additional cost over and above the client rate pursuant to applicable regulations, this policy manual, or the contract between the service provider and health authority.

campus of care is a situation where more than one level of housing, services and care is provided in a residence or group of buildings (e.g., assisted living services in one building and residential care services in an adjacent building).

care is assistance, professional services or treatment required by clients to meet their health care needs.

care plan is an individualized plan that identifies the diagnoses, goals of care, clinical and functional needs to be addressed and health services required, taking into account the client’s abilities, physical, social and emotional needs, and cultural and spiritual preferences.

care provider is the person or agency hired by the Choice in Supports for Independent Living employer to provide home support services approved in the care plan.

caregivers are the client’s family and friends who provide support, care and other assistance.

chargeable items are services, programs or supplies that are not included as a benefit and are offered by the service provider.

child is a child of any age, of the client, including stepchildren, adoptive children, daughters-in-law and sons-in-law.

client is an individual who meets the eligibility criteria for home and community care services, has been assessed, and has accepted and is receiving services through the health authority. Throughout this manual, when the term “client” is used, it may mean the individual receiving services, or their legal representative.

client rate is the daily or monthly rate charged to a client for home support, assisted living, family care home or residential care services.

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client support group is incorporated as a non-profit society under the B.C. Registrar of Companies, comprised of family and/or friends of a Choice in Support for Independent Living client, to manage the provision of home support services to the client.

Community Care Licensing provides licensing, inspection and monitoring of the health and safety of individuals living in residential care facilities licensed under the *Community Care and Assisted Living Act* and Residential Care Regulation as delegated by the medical health officer.

community nursing services are health care services provided by a licensed nursing professional to clients who require acute, chronic, palliative or rehabilitative support.

community rehabilitation services are health care services provided by a licensed physical therapist or occupational therapist to clients who require acute, chronic, palliative or rehabilitative support.

community resources are non-healthcare supports that may be available in a community to assist individuals with social or emotional needs, physical activity, or personal services such as household maintenance, recreation, shopping and transportation, or advice and assistance with personal, financial or legal matters.

companion service is any non-care social support or activity service provided to clients that is beyond the services a service provider is expected to provide. Companion service is a voluntary arrangement initiated by clients, their families, or individuals acting on behalf of the clients, and is the financial responsibility of the clients.

continuous home health services are services provided on a long-term basis (usually longer than three months) that typically fall into one of the following defined Client Groups (see Canadian Institute for Health Information Home Care Reporting System):

- **Long Term Supportive:** The client who is at significant risk of institutionalization due to unstable, chronic health conditions, and/or living condition(s) and/or personal resources.
- **Maintenance:** The client with stable, chronic health conditions, stable living conditions and personal resources, who needs support in order to remain living at home.

convalescent care is a short-term residential care service provided to clients with defined and stable care needs who require a supervised environment for reactivation or recuperation usually prior to discharge home, most commonly following an acute episode of care.

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CSIL = Choice in Supports for Independent Living

CSIL employer is the client, client support group or representative receiving CSIL funding who is a party to the CSIL agreement to manage the client's home support services and approved funds.

CSIL agreement is a legally binding contract between the health authority and the CSIL employer governing the terms and conditions of the funding.

CSIL funds are funds provided to the CSIL employer to pay for and administer the home support services authorized by the health authority.

CSIL representative is an individual designated as a representative for a CSIL client through a valid representation agreement and is acting as the CSIL employer.

CSIL services are the authorized services and approved expenditures identified in the client's individual care plan and funded by the health authority as an alternative to receiving home support services.

earned income is the sum of the following amounts as reported on lines 101, 104, 135, 137, 139, 141, and 143 of the client's income tax return:

- (a) employment income;
- (b) other employment income;
- (c) net business income;
- (d) net professional income;
- (e) net commission income;
- (f) net farming income; and
- (g) net fishing income.

end of life is a period of disability or disease that is progressively worse until death. End-of-life care, also called hospice care, comfort care, supportive care or palliative care, focuses on comfort, dignity and quality of life.

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family care home services are provided in a single family residence that accommodates a maximum of two clients with specialized care needs that cannot be optimally met in a residential care facility.

family member is anyone who is related to the client by blood, marriage, adoption or custom adoption (e.g., children, grandparents, etc.).

group home services are provided in a non-licensed congregate housing arrangement where clients with disabilities or other unique conditions share personal care resources.

health authority is an organization constituted under the direction of a regional health board, as designated by the Minister of Health Services in 2001, to plan and deliver health services in a geographic area.

health professional is, unless otherwise stated, a registered nurse, registered psychiatric nurse, licensed practical nurse, occupational therapist, physiotherapist or social worker whose profession is regulated under the *Health Professions Act*.

home support services are direct care services provided by unregulated care providers to clients who require personal assistance with activities of daily living, such as mobilization, nutrition, lifts and transfers, bathing, cueing, grooming and toileting, and may include safety maintenance activities as a supplement to personal assistance when appropriate, as well as specific nursing and rehabilitation tasks delegated under Policy 1.C, Delegation of Tasks.

hospitality services are part of assisted living services, and include:

- meal services;
- housekeeping services;
- laundry services;
- social and recreational opportunities; and
- a 24-hour emergency response system.

housing and health services include, but are not limited to, assisted living services, group home services and family care home services.

immediate family member is a parent, child or spouse.

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income benefit includes:

- the Guaranteed Income Supplement (including benefits under International Agreements) under the *Old Age Security Act* (Canada);
- the Widowed Spouse's Allowance or the Spouse's Allowance under the *Old Age Security Act* (Canada);
- support and shelter allowance under the *Employment and Assistance Act* or the *Employment and Assistance for Persons with Disabilities Act*; or
- a War Veteran's Allowance under the *War Veteran's Allowance Act* (Canada).

long-term residential care services are services provided to clients admitted to a residential care facility on a permanent basis.

meal replacement is a commercially formulated product that, by itself, can replace one or more daily meals. It does not include vitamin or mineral preparations.

ministry means the Ministry of Health.

non-eligible spouse is a spouse that does not meet the eligibility criteria for admission to long-term residential care services.

nutrition supplement is a food that supplements a diet inadequate in energy and essential nutrients, and typically takes the form of a drink but may also be a pudding, bar or other form. It does not include vitamin or mineral preparations. Homemade milkshakes or house brand supplements may be used where the care plan or the client's physician do not specifically require a named commercial brand for medical reasons.

parent is a parent of the client, including parents-in-law, step-parents and adoptive parents.

Patient Care Quality Office is the central complaints office within each health authority that receives, investigates and responds to complaints regarding the quality of care that a client received, and derives its authority from the *Patient Care Quality Review Board Act*.

personal care services are direct care services that assist a client who requires assistance with activities of daily living, such as mobilization, nutrition, lifts and transfers, cueing, bathing, grooming and toileting, as well as specific nursing and rehabilitation tasks delegated under Policy 1.C, Delegation of Tasks.

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RAI-MDS HC (Residential Assessment Instrument – Minimum Data Set Home Care) is a reliable, person-centred assessment system for people with chronic and post-acute care needs that informs and guides comprehensive care and service planning in community-based settings. The RAI HC focuses on the person’s functioning and quality of life by assessing needs, strengths and preferences and provides the basis for an outcome-based assessment of the person’s response to care or services.

RAI-MDS 2.0 (Residential Assessment Instrument – Minimum Data Set, version 2.0) is a comprehensive, standardized instrument for evaluating the needs, strengths and preferences of people in residential care settings.

reasonable arrangements are alternatives determined by making an assessment of available resources while using diligence and good faith.

reassessment is a professional follow up or subsequent assessment to establish whether a change in the care plan and/or an alteration of health services is required.

rent for calculation of a damage deposit for assisted living, means the amount the assisted living provider is entitled to receive for the provision of accommodation and hospitality services.

residency agreement is an agreement that defines the expectations, rights and obligations of the client and the assisted living service provider, including the services to be provided, the charge to the client for those services and the conditions under which a client and/or spouse will be required to move out of an assisted living residence.

resident/family council is a group of people who are either clients living in a residential care facility, or are their family members or close friends, who meet regularly to identify opportunities to maintain and enhance the quality of life for clients of the facility, and to engage with staff to contribute a voice in decisions which affect the clients of the facility.

residential care facility is a facility designated by the health authority to provide short-term or long-term residential care services and includes licensed residential care facilities, private hospitals and extended care hospitals.

residential care services provide a secure supervised physical environment, accommodation and care to clients who cannot have their care needs met at home or in an assisted living residence.

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residential hospice palliative care is a short-term residential care service provided to clients who require support with comfort, dignity and quality of life in the final days or weeks of their lives, and is distinct from end-of-life care provided to residential care clients who become palliative.

respite care is a short-term residential care service for the purpose of allowing the client's principle caregiver a period of relief, or to provide the client with an period of supported care to increase independence.

safety maintenance activities are identified through the care plan and focus on reducing, eliminating or monitoring risk or potential risk to a client. As part of the authorized services, these activities may include clean-up, laundry of soiled bedding or clothing, and meal preparation.

service delivery is the provision of designated home and community care services to the client, as authorized by the health authority.

service provider is either a health authority or an approved contractor of a health authority who plans and delivers publicly subsidized home and community care services directly to clients.

short-term residential care services are facility-based services provided on a short-term basis (usually less than three months) and include convalescent care, residential hospice palliative care and respite care.

spouse is a person who is married to or is living in a marriage-like relationship with, a client and, for the purposes of this definition, the marriage or marriage-like relationship may be between persons of the same gender.

subsidized client rate is the client rate that is less than the maximum client rate established for the specific service.

therapeutic diet is any medically prescribed diet that is under the supervision of the client's attending physician (e.g., diabetic and low sodium diets).

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time-limited home health services are services provided on a short-term basis (usually less than three months, except for palliative care services) that typically fall into one of the following defined client groups (see Canadian Institute for Health Information Home Care Reporting System):

- **Acute**: The client who needs immediate or urgent time-limited (within three months) interventions to improve or stabilize a medical or postsurgical condition.
- **End of Life**: The client for whom death is anticipated within six months.
- **Rehabilitation**: The client with a stable health condition that is expected to improve with a time-limited focus on functional rehabilitation.

unregulated care provider is a paid care provider who is not licensed by a regulatory body and who has no regulated scope of practice and includes community health workers, rehabilitation assistants and life skills workers.

urgent means that the client's safety may be at significant risk if health services were not provided, but does not include a medical emergency which requires assessment and/or intervention by a physician or nurse practitioner.

visit is an interaction when care or service is provided to a client or when clinical direction that influences the care of the client is given. A visit can be *face-to-face* or *remote* including, but not limited to, software applications (i.e. tele-monitoring, journaling), email or telephone.