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## Intent

To describe health authorities' responsibilities in planning and delivering publicly subsidized group home and family care home services.

## Policy

Health authorities must plan and deliver publicly subsidized group home and family care home services to clients as part of their established care plans, including, but not limited to:

- group home services; or
- family care home services.

Health authorities must:

- establish local service delivery models that will provide clients with access to group home and family care home services within their community, or within an accessible distance to their community;
- authorize and manage timely access to group home and family care home services by:
  - informing clients and their caregivers of the available group home and family care home services options;
  - establishing a care plan with clients and their caregivers to assist clients to remain safely at home until they can access group home and family care home services where required; and
  - informing clients and caregivers of the health authority's process for managing the waitlist for these services and the process for moving into the new group home and family care home services;
- ensure clients identified as having the greatest need and urgency receive priority access to the relevant service(s);
- ensure that clients are aware of their responsibilities including:
  - assuming maximum personal responsibility for their own health and well-being;
  - participating in decisions about their own care (see Policy 2.D, Assessment);
  - payment of the assessed client rate and any additional charges;
- establish a process for resolving disputes between service providers and health authorities.

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## Definitions

***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 long-term care home.

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

***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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## Intent

To describe health authorities' responsibilities in determining the appropriate group home services and managing timely access to publicly subsidized group home services to meet the client's needs.

## Policy

Health authorities are responsible for determining the appropriate group home services to meet the client's needs and prioritizing access to services.

Health authorities must establish group home services to provide eligible clients with care and support to maximize their independence, and to support their responsibility in areas such as household management, vocational pursuits, and social relationships.

Health authorities are responsible for funding the personal care services for group home clients based on each client's assessed care needs. Health authorities must ensure that the group home service provider agrees to assume the care responsibilities necessary for clients.

## Service Needs Determination

Health authorities can approve group home services for a client who:

- has been assessed as requiring group home services (see Policy 2.D, Assessment);
- is appropriately matched with the residence;
- is compatible with existing clients; and
- is able to make independent decisions, either individually or in cooperation with other clients.

Clients are not required to pay a client rate for group home services but are responsible for all living costs such as shelter, food, and utilities.

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## Intent

To describe health authorities' responsibilities in determining the appropriate publicly subsidized family care home services and managing timely access to publicly subsidized family care home services in a timely manner to meet the client's needs.

## Policy

Health authorities are responsible for determining the appropriate family care home services to meet the client's needs and prioritizing access to services.

Family care home services include:

- a home like atmosphere;
- meals, laundry, and other housekeeping services;
- supervision; and
- any required assistance with the activities of daily living.

Family care home service is considered a long-term care service for the purpose of assessing a client rate (see Policy 7.B, Income-Based Client Rates).

## Service Needs Determination

Health authorities can approve family care home services for a client who:

- has been assessed as requiring family care home services (see Policy 2.D, Assessment);
- is appropriately matched with the residence;
- is compatible with existing clients; and
- has agreed to pay the assessed client rate for long-term care services (see Policy 7.B.2, Client Rates for Specific Services).

## Recruitment and Screening

Health authorities are responsible for:

- recruiting, screening and approving family care home service providers;
- ensuring that family care home services reflect the specific needs of the client, through an appropriate client-service provider match; and
- providing information for providers, clients, and families regarding family care home services.

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## Family Care Home Services Requirements

The health authority must ensure that all family care homes meet acceptable standards for:

- fire safety by complying with regulations including smoke alarms, fire extinguishers and a fire evacuation plan;
- safe and secure outdoor environment to ensure the safety of clients who wander;
- general safety regarding floor surfaces, lighting, and stairs;
- general cleanliness;
- appropriate living space to safely accommodate clients, including those with mechanical assistance devices;
- basic nutrition/food preparation and safety including special/therapeutic diets if required;
- access to safe bathing and toilet facilities;
- a furnished single room that must include a window for each client, preferably on the main floor with easy access for emergency evacuation;
- appropriate room furnishings including bed and furniture for personal belongings and where feasible, the option of allowing the client to have his or her own furniture if this does not constitute a hazard;
- appropriate insurance including personal liability, fire and automobile insurance; and
- the local municipal requirements.

## Relationship of Client and Service Provider

The client being placed in a family care home cannot be related by blood, marriage or adoption to the service provider except as allowed under Policy 4.C.4, Payment to Family Members.

## Safekeeping and Financial Affairs

Health authorities must ensure service providers establish reasonable accounting and security measures to receive and control funds for the personal comfort of the client, and make adequate provision for the custody and safekeeping of client's personal funds and belongings for everyday use of the client, where the client is unable to do so on their own behalf.

The service provider must maintain simple accounts that clearly show additions, withdrawals, and balances for each client. The records must be kept up to date at all times, and supported by receipts. All transactions undertaken on behalf of a client are to be drawn from the client's personal funds and accounted for in this manner.

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### **Respite for Family Care Home Service Provider**

Health authorities must ensure that family care home service providers establish a plan for respite of the service provider, and are funded to purchase respite services so they may obtain relief from their duties.

### **Client at Risk**

Health authorities must assess the situation and determine whether to remove a client from the family care home where it is determined that a client may be at risk, or is no longer appropriately housed with a family care home service provider.

### **Unsatisfactory Service**

Health authorities must have a process for dealing with a service provider who is not providing satisfactory services up to and including termination the contract.