

Eligibility Policy	DATE APPROVED	February 2003
	APPLICABLE TO	Children’s disABILITY Services
BRANCH/DIVISION: Children’s disABILITY Services/ Community Service Delivery	NEXT REVIEW DATE	
RESPONSIBLE AUTHORITY: ADM, Community Service Delivery Department of Families	DATE REVIEWED:	December 2021
POLICY OWNER: Director, CDS	DATE REVISED	June 2021

1.0 POLICY STATEMENT

Children’s disABILITY Services (CDS) supports eligible families raising children with developmental or lifelong physical disabilities, to meet the additional disability related needs they may have.

2.0 BACKGROUND/CONTEXT

CDS is a non-statutory, voluntary and discretionary program that supports eligible families in caring for children with disabilities at home in their communities, where children grow and thrive.

As families may have additional needs related to their children’s disabilities, CDS offers a variety of resources and supports to eligible families, using a flexible individualized family-centred approach that respects families, facilitates self-sufficiency and inclusion, and accommodates regional differences, to support children with disabilities to achieve their fullest potential. CDS also works with other government and community service partners in supporting families and children with disabilities in Manitoba.

Eligibility for the Children’s disABILITY Services program does not confer automatic entitlement to service or support.

3.0 PURPOSE

This policy defines the eligibility criteria for Children’s disABILITY Services.

4.0 DEFINITIONS

RESIDENT OF MANITOBA: For the purposes of this policy, children are deemed a resident of Manitoba if their primary residence is located in a community within the Province of Manitoba, with the exclusion of First Nations communities (see section [5.5 Residents of First Nation Communities](#) for more information on services for residents of First Nation communities).

URIS GROUP A: Children classified as URIS Group A require at least one of the following health care procedures: ventilator care; tracheostomy care; suctioning (tracheal/pharyngeal); nasogastric tube care and/or feeding; complex administration of medication (i.e. via infusion pump, nasogastric tube or injection other than auto-injector); central or peripheral venous line intervention; or other clinical interventions requiring judgements and decision making by a medical or nursing professional.

5.1.3 High Probability of Developmental Delay

Children must be referred prior to the age of two in order to be assessed for CDS under the high probability of developmental delay category.

Eligibility under the high probability of developmental delay category is provisional and thus children are not presumed to remain eligible for CDS indefinitely. Children enrolled under this category must be referred for a developmental or intellectual assessment within two years of their eligibility determination for CDS, in order to be assessed for ongoing eligibility for CDS.

Children enrolled under the high probability of developmental delay category may access CDS supports based on their assessed need and availability of resources.

5.1.4 DEVELOPMENTAL DELAY – REASSESSMENT

A child with a diagnosis of a developmental delay may experience significant progress as they develop. As initial assessment results may not be conclusive or remain accurate over time, a child enrolled in CDS with a diagnosis of development delay is not presumed to remain eligible for CDS indeterminately.

Parents or guardians should be informed at the time of enrollment that reassessment may be required to review ongoing eligibility for CDS should information or circumstances indicate that their child has made significant developmental progress or gains.

5.2.1 EXCLUSIONS TO ELIGIBILITY

A child shall not be determined as eligible for CDS based on any of the following conditions:

- A temporary physical disability
- Cultural or economic factors
- The normal process of additional language acquisition

5.2.2 Children Whose Guardian is Child and Family Services (CFS)

Funding of services for children whose guardian is Child and Family Services (CFS) is the responsibility of the involved CFS agency.

However, children whose guardian is CFS who otherwise meet CDS eligibility may receive the following from CDS:

- Child development services, if age six or younger only
- Disability-related supports as part of a transitional plan to return a child home from a CFS agency

5.2.3 CHILDREN WHO ARE HARD OF HEARING/DEAF OR PARTIALLY SIGHTED/BLIND

Children who are hard of hearing/deaf or partially sighted/blind do not qualify under the category of lifelong physical disability solely on that basis. They must present with one or more of the conditions listed in 5.1.1 (iv) (a) or (b) to be eligible for CDS services. Despite this, CDS may provide transportation assistance to children who are hard of hearing/deaf or partially sighted/blind and reside in regions outside of Winnipeg where specialized disability related professional services are not available.

5.2.4 CHILDREN DIAGNOSED WITH PHENYLKETONURIA (PKU)

Children diagnosed with phenylketonuria (PKU) do not qualify under the category of high probability of developmental delay solely on that basis. See the PKU policy for more details.

5.3 Referral to Children’s disABILITY Services

Referrals to CDS may originate from parents/guardians and/or third parties. For referrals originating from third parties, referral sources should ensure that parents/guardians are informed, and agree with the referral to CDS.

Referrals are made using the [CDS Referral and Intake Application form](#) and must be accompanied with written diagnosis from a qualified professional based on appropriate assessment procedures and/or instruments. Additional information may be requested from referral sources or assessing clinician, if diagnostic information is incomplete or inconclusive to determine eligibility.

5.4 Qualified Professionals for Providing Diagnoses to Determine Eligibility for CDS

Qualified professional refers to a person who is registered or licensed with their professional association and who is able to make diagnoses relevant to their scope of practice. For the purposes of determining eligibility, CDS accepts diagnoses from the designated professionals in accordance to their scope of practice as indicated in the following table:

Eligibility Criteria	Qualified Professional
Global Developmental Delay DQ \leq 75	<ul style="list-style-type: none"> • Developmental Pediatrician
Intellectual Disability FSIQ \leq 75	<ul style="list-style-type: none"> • Registered Psychologist • School Psychologist
Autism Spectrum Disorder (ASD)	<ul style="list-style-type: none"> • Developmental Pediatrician • Registered Psychologist • School Psychologist • Psychiatrist
Lifelong Physical Disability with Significant Limitations in Mobility	<ul style="list-style-type: none"> • Doctor • Nurse Practitioner • Occupational Therapist • Physiotherapist
Down Syndrome (Trisomy 21); Prader-Willi Syndrome; Rett Syndrome; WAGR Syndrome; Angelman Syndrome; Leigh Syndrome; Cri-Du-Chat Syndrome	<ul style="list-style-type: none"> • Geneticist • Health care provider
High Probability of Developmental Delay ¹	<ul style="list-style-type: none"> • Geneticist • Health care provider

¹Children of parents with an intellectual disability do not require an assessment from a qualified professional to be eligible for CDS under the High Probability of Developmental Delay category.

Appendix

RESOURCES FOR CHILDREN DIAGNOSED WITH OTHER CONDITIONS WHO DO NOT MEET CDS ELIGIBILITY

Children diagnosed with any of the following conditions, where there is no intellectual disability or lifelong physical disability with significant functional limitations in mobility, do not meet the eligibility criteria for CDS.

The following reference is intended to be a guide rather than an exhaustive list of available services. Practitioners with expertise in a specific area will be able to provide a comprehensive list of services and supports that may be available to families.

Other Conditions	Children May be Referred to
<ul style="list-style-type: none"> Typically developing children who present with emotional, behavioral, psychiatric disorders or other mental health concerns 	<ul style="list-style-type: none"> Manitoba Adolescent Treatment Centre Regional Health Authorities Mood Disorders Association of Manitoba
<ul style="list-style-type: none"> Children with learning disabilities 	<ul style="list-style-type: none"> Learning Disabilities Association of Manitoba School Divisions
<ul style="list-style-type: none"> Speech and language disorders 	<ul style="list-style-type: none"> Children's Therapy Network of Manitoba* School Divisions Private health insurance
<ul style="list-style-type: none"> Neurological disorders (seizure disorder, brain injury, Fetal Alcohol Syndrome/Effect (FAS/E) – without cognitive or physical disability) 	<ul style="list-style-type: none"> Manitoba Possible* Regional Health Authorities Children's Therapy Initiative* Manitoba FASD Network
Children who are <u>either</u> : <ul style="list-style-type: none"> Sick and becoming well Have a terminal illness Have a medical condition which does not typically result in a lifelong mental or physical disability 	The health care system has the expertise and mandate to provide the required care. The following services may be accessed through the RHAs: <ul style="list-style-type: none"> Home Care Children's Therapy Initiative* Social Work supports
<ul style="list-style-type: none"> Partially Sighted/Blind 	<ul style="list-style-type: none"> Vision Loss Rehabilitation Canada* School Divisions
<ul style="list-style-type: none"> Deaf/Hard of Hearing 	<ul style="list-style-type: none"> Manitoba Possible* Central Speech and Hearing Clinic* School Divisions Children's Therapy Network of Manitoba*

* Indicates receives funding from Children's disABILITY Services.