Your Guide to
Home Care Services in Manitoba
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In Manitoba, home care provides community-based support and services to eligible individuals, regardless of age, who require health services or assistance with activities of daily living. Home care works with individuals and provides assistance to help them stay in their homes for as long as is safely possible.

A professional assessment of your individual needs, existing supports and community resources will determine your eligibility for home care and the type and amount of services you may receive.

Regional home care staff are responsible for ensuring the provision of reliable and safe assessed service in the home, education setting or workplace.

To be eligible for home care services an individual must:

- be a Manitoba resident, registered with Manitoba Health, Seniors and Active Living (the department);
- require health services or assistance with activities of daily living;
- require service to stay in their home for as long as possible; and
- require more assistance than that available from existing supports and community resources.
Assessment

Residents of Manitoba may contact, or refer an individual to, their regional health authority office to request an assessment of eligibility to receive home care services.

Assessments are done by case co-ordinators who are health care professionals. The case co-ordinator assigned to you will meet with you and your family to discuss your care needs and how best to meet these needs.

This assessment will determine:

- whether you are eligible for the program;
- how to help you and your family organize the help available to you;
- how to access community resources available to you;
- what services you may require from home care;
- when assessed services are required in an educational setting or in the workplace;

OR

- whether your need for care is best met in another care setting.

Care Planning and Co-ordination

Before you receive home care services, a case co-ordinator will assess your situation with you and your family or your designated representative. Together, you will decide on your care plan. Your care plan will take into consideration how your existing supports can help you and identify community resources available to you.

This mutually agreed upon care plan, of which you will receive a copy, will be signed by you and the case co-ordinator to ensure that you receive services according to the home care plan.

Self/Family Managed Care

In Self/Family Managed Care, funds are provided to a Self or Family Manager to arrange non-professional services privately in lieu of services they would otherwise receive from community home care. These services remain based on the assessment by a case co-ordinator. A Manager is responsible for recruiting, hiring, scheduling and managing staff. The Manager is also responsible for calculating employment deductions and ensuring Worker’s Compensation coverage. Some of these tasks can be transferred to an agency and/or payroll company should the Manager choose to do so. If you or your family are interested in managing your care plan and/or arranging your own services, ask your case co-ordinator for more information.
Services

Some of the services you may require are:

**Personal Care Assistance**

Direct service workers may help you with mobility, such as walking, transferring to and from a wheelchair, and with your personal care, such as bathing, dressing and toileting.

**Home Support**

Direct service workers may come to your home to help you with activities such as meals, light housekeeping and laundry.

**Health Care**

Nurses may provide health teaching, counseling and nursing care. Physiotherapists may teach you special exercises, and occupational therapists may assist you with planning your activities of daily living.

**In-home Relief/Respite Care in the Home**

A direct service worker may be arranged to provide short periods of in-home relief for your caregiver.

**Respite Care in alternate settings**

Respite care may be arranged to provide longer periods of relief for your caregiver. During this time, you may be admitted to an alternate care setting. There is a fee for this service.

**Supplies and Equipment**

Some supplies and equipment needed for your care may be available through your case co-ordinator.

**Adult Day programs**

These day programs enable you to meet other people and enjoy recreational activities away from your home. There is a fee for this service.

**Volunteer Services**

Volunteers may be available to help you with other activities that support your care plan.

**Community Housing with Support Options**

As care needs change, additional options are available to help seniors “age in place” in their communities. These options may include supportive housing, group living facilities and specialized supports.
Personal Care Home Placement

A personal care home may be the appropriate care setting when:

- you can no longer remain safely at home even with home care services; and
- the services you need can be provided more effectively, safely and economically in a personal care home.

Application Process

The application form for personal care home admission is provided by your case co-ordinator and is signed by you. The form includes medical, nursing and other information about you. Once completed, the application is reviewed to decide whether you are eligible for admission to a personal care home.

If you and your family have any questions or concerns about your application or about the decision regarding your eligibility for personal care home admission, please contact your case co-ordinator.

You and your family may wish to visit several homes before deciding which one(s) you would choose. You may be asked to identify more than one personal care home that would be acceptable to you.

Placement Process

There may be a waiting period before you are admitted to the personal care home. During this time, home care services may be provided to you as necessary.

If you require admission immediately or are in hospital awaiting placement, you may be asked to accept placement in a different care facility until you can be admitted to the personal care home of your choice.

Appeal Process

Placement panel decisions may be appealed to the Manitoba Health Appeal Board (MHAB). Pursuant to Section 10(2) of The Health Services Insurance Act, an appeal is commenced by a notice of appeal, setting out the grounds for appeal, which must be mailed or delivered to the board not more than 30 days after the date on which you receive notice of this decision, or within such further time as the board permits. If you wish to pursue this option, a notice of appeal should be forwarded to the Manitoba Health Appeal Board.

manitoba.ca/health/appealboard
Roles and Responsibilities

You, your case co-ordinator, resource co-ordinator and your direct service workers function as a co-operative team. Each is responsible for understanding the role they play in the development and delivery of your care plan.

Clients and families who participate in their health care planning and understand the service benefit most from the program.

Home care providers in Manitoba have a responsibility to:

- Work with you to develop an individualized care plan specific to your needs
- Arrange services as specified in your care plan
- Provide flexible service, responsive to your needs and supportive to your family caregiver
- Communicate promptly with you regarding schedule changes and replacement services
- Treat you with courtesy and respect
- Arrange for safe care

You have a responsibility to:

- Participate in the development of your care plan
- Inform your case co-ordinator when you will not be available to receive the scheduled services
- Inform your case co-ordinator of changes in your health or home situation that affect your care plan and services
- Participate in planning for replacement services as required, including a backup plan
- Treat staff with courtesy and respect
- Provide a safe working environment for workers
Questions and Concerns

If you have any questions or concerns about your assessment, care plan or services, talk to your case co-ordinator or the supervisor in your regional health authority and discuss your concerns.

If you disagree with the final decision regarding your eligibility for home care, type or level of service, you may contact the Manitoba Health Appeal Board.

It is important that you be satisfied with your home care services.

For more information

Visit our website at www.gov.mb.ca/health/homecare to find out more about home care services in Manitoba, or contact your regional health authority office:

**Interlake-Eastern Regional Health Authority**
Toll-free: 1-855-347-8500
Website: www.ierha.ca

**Northern Regional Health Authority**
Phone: 204-687-4870
Website: www.nrha.ca

**Prairie Mountain Health**
Phone: 204-483-5000 or Toll-free: 1-888-682-2253
Website: www.prairiemountainhealth.ca

**Southern Health-Santé Sud**
Phone: 204-428-2720
Toll-free: 1-800-742-6509
Website: www.southernhealth.ca

**Winnipeg Regional Health Authority**
Phone: 204-926-7000
Website: www.wrha.mb.ca
Home Care Appeal Process

The MHAB is a body that is independent of the department and hears appeals from individuals referred for, or receiving home care services.

When can I appeal a decision?

Individuals may appeal to the MHAB if they disagree with a decision that has been made as to their eligibility, type of service or level of service.

Who can file an appeal?

Manitobans who are currently receiving home care services or who have applied for home care, family members, friends, primary caregivers or other providers may file an appeal when they have the home care user’s written consent.

How do I file my appeal?

The MHAB encourages you to contact your regional health authority home care office first to discuss your concerns. The MHAB Administrator will also provide assistance to you in trying to resolve your concerns with the regional health authority home care office. The Administrator can be reached through the MHAB office.

If you are unable to resolve your concerns with the regional health authority home care office, you may file an appeal directly with the MHAB.

Steps to filing an appeal:

Contact the MHAB office to request an appeal form, or obtain one from the MHAB website at www.gov.mb.ca/health/appealboard.

1. Fill out this form and return it to the MHAB office. If you have any questions about how to fill out the form, please call the MHAB office at 945-5408 (in Winnipeg) or toll free at 1-866-744-3257.

2. You may have a designate submit the form on your behalf.
How does the appeal process work?

Appeals are reviewed and processed on a timely basis. When your appeal form is received and has been reviewed, you will be sent a Notice of Hearing form.

This notice will tell you the date and location of your hearing. Appeal hearings are informal and confidential.

The MHAB may choose not to proceed to a hearing if it is determined that a resolution may be achieved.

Who attends the appeal hearing?

You have several options:

- You may attend the hearing in person, by telephone or, where possible, video conference.
- You may be represented by legal counsel.
- You may attend with or send a support person or designate to represent you if you cannot attend the hearing in person or by telephone.

The hearing will also be attended by:

- a minimum of three MHAB members,
- appropriate regional health authority home care staff,
- the administrator to the MHAB, and
- other representatives as requested by the board.

How will I know the result of the hearing?

When a decision is reached on your appeal, you and the regional health authority home care office will receive notice of the decision in the mail. The decision of the MHAB is final.

For more information, please contact:

Manitoba Health Appeal Board
Room 102 - 500 Portage Ave.
Winnipeg MB R3C 3X1
Phone: 204-945-5408
Toll Free: 1-866-744-3257
Fax: 204-948-2024
E-mail: appeals@gov.mb.ca