Homemaking (ISC Social Development Program)

For Assisted Living in-home care (Homemaking), services should apply to care in the client's home and community environment (e.g. housekeeping), but not care of the client directly (e.g. nursing care);

Depending on community needs and funding availability; the amounts should always be reasonable in the circumstances in which the services are provided. Hourly rates **may** include incidental costs (e.g. transportation and supplies). In all cases, expenditures must be supported by documentation and information as listed in section 5.4.7 of this chapter; and Assisted Living Program funding (including service delivery funding) cannot be used for capital expenditures (i.e. for the construction of care facilities).

The in-home care component provides funding support for non-medical support services. These services **may** include:

- Individual meal programs, meal planning and/or preparation;
- Dependent on available funding some day programs;
- attendant services (this could include services such as accompanying a client to an appointment or while shopping, but does not include care of the client directly, e.g. bathing, dressing);
- **short-term respite care** as defined by the reference province or territory; (Relief for family and/or caregivers so that they can continue to provide care)
- group care;
- laundry;
- ironing;
- mending;
- carrying water;
- · chopping and/or carrying wood;
- home management which may include making beds, dusting, washing dishes, sweeping, wiping counter tops, vacuuming, taking out the garbage, scrubbing a bathroom or floor, washing walls or shampooing carpets;
- **minor** home maintenance (for example, fixing a door knob or attaching a railing along stairs); and
- Non-medical transportation.

ISC does not require Homemakers to have any type of formal education, Bands may require only a minimum, First Aid, Food Safe, and WHMIS training and/or Driver's License.

Home and Community Care (FNHA)

Home and Community Care is a coordinated system of services that enables First Nations people of all ages with disabilities, chronic or acute illnesses to receive needed care in their homes and communities.

Care is provided primarily through contribution agreements with First Nation communities and aims to equal services offered to other Canadians in similar geographical areas. Care is delivered primarily by home care registered nurses and **trained**, **certified personal care workers**. Service delivery is based on assessed need and follows a case management process.

Essential services include:

- Client assessment
- · Home care nursing
- · Case management
- Home support (personal care and home management)
- In-home respite for acute care needs
- Linkages and referral to other health and social services i.e. Homemaking, Psychosocial etc.
- Provision of and access to specialized medical equipment and supplies
- Record keeping and data collection

Additional services may be provided, depending on community needs and funding availability. Support services include, but are not limited to: rehabilitation and other therapies; adult day care; meal programs; inhome mental health; in-home palliative care; and specialized health promotion, wellness and fitness.

Home Support Services

Home support includes services such as: bathing; grooming; dressing; transferring; and care of bedbound clients. Home management assistance may include general household cleaning, meal preparation, laundry and shopping. FNIHCC home support services are intended to enhance, not duplicate, ISC's Assisted Living services (Homemaking).

Provision or Access to In-Home Respite Care

This service is intended to provide safe care for clients and short-term relief for family and caregivers so that they can continue to provide care, thereby delaying or preventing the need for institutional care.

Access to Medical Equipment and Supplies

This involves the provision of and access to medical equipment, supplies and pharmaceuticals to meet client needs in home and community care.