Home Support Program

Self-Managed Care Provider

Handbook

Home Support Program

The home support program helps people to live independently in their homes for as long as possible. The program can help with personal care and homemaking for short or long periods of time and offers respite and behavioural support.

Service providers such as home support workers, informal caregivers, behavioural aides, occupational therapists, physiotherapists, social workers, and nurses all add to the success of the home support program.

This handbook will help self-managed care providers to better understand their roles and duties.

Confidentiality

Every person has a right to privacy about their personal health information. As a self-managed care provider, you must keep all personal client records confidential. Written client records must be kept secure and only seen by an authorized party.

Client information can only be shared if the client or the substitute decision maker gives written consent. As a self-managed care provider you should talk to the client about how their personal information is protected. The only time you may disclose personal client information is if you are required by law because of concern for the safety and protection of that client.

For details on confidentiality, visit
the **Personal Health Information Act**
assembly.nl.ca/Legislation/sr/statutes/p07-01.htm

Access to Information and Protection of Privacy Act
assembly.nl.ca/Legislation/sr/statutes/a01-2.htm

and the **Adult Protection Act** www.cssd.gov.nl.ca/apa

Support Plan

Every person who receives home support services will have a support plan that notes goals and how home support will help. As a self-managed care provider you are part of the client's support team. You will be given all of the information you need in order to provide home support.

Role of Client

When a person receives home support from a self-managed care provider, that person or substitute decision maker is the employer. The employer will recruit, hire, train, schedule, supervise, and monitor performance of employees as per labour standards.

To learn more about an employer's responsibilities visit:

Newfoundland and Labrador Human Rights Commission
www.thinkhumanrights.ca
Toll free **1.800.563.5808**

Labour Standards
www. aesl.gov.nl.ca/faq/labourstandards.html
Toll free **1.877.563.1063**

Canada Revenue Agency
www. cra-arc.gc.ca/bsnsss/menu-eng.html
Toll free **1.800.267.6999**

Occupational Health and Safety
www.servicenl.gov.nl.ca/ohs
Toll free **1.800.563.5471**

The employer must provide a monthly progress report on the home support service to the regional health authority case manager. The regional health authority case manager must be contacted right away if there are any changes in a client's support needs which impact the support plan and the home support services. This includes hospitalization, changes to where the client lives, or if the informal caregiver support increases or decreases.

Role of Self-Managed Care Provider

As a self-managed care provider your main role is to carry out the support activities. These activities will be outlined in the service provider plan and a copy given to you. The goal is to help the client to actively take part in their own care and support as much as they can.

The self-managed care provider duties may include, but are not limited to:

Personal care

- bathing;
- oral care;
- hair and scalp care;
- skin and nail care;
- dressing;
- washing genital and anal area;
- toileting; and
- positioning and transferring, e.g., helping a client move from bed to chair or chair to toilet.

Homemaking services

- light house work, laundry; and
- making meals and feeding.

Support for community living (Behavioural Support)

- personal development, such as understanding relationship boundaries;
- social relationships;
- social inclusion;
- emotional well-being; and
- physical well-being.

Respite

- caregiver support;
  - including medical appointments or church activities that support their caregiving role.

You will write progress reports on the home support service. These progress reports will be reviewed by the regional health authority case manager to ensure the home support is helping the person to meet their goals.

At the end of each shift and for each pay period, you will use a timesheet to record the number of home support hours worked. The timesheet will be given to you by the employer or bookkeeper.

Each timesheet will be reviewed and signed by the employer at the end of each pay period. The employer or bookkeeper will provide the timesheets to the Client Pay Division within the regional health authority.

Service Provider Plan

The client will work with you and a regional health authority case manager to write a service provider plan which will outline the home support you will provide.

The service provider plan will include:

- contact information for the client;
- substitute decision maker (if required);
- primary support person;
- emergency contact;
- contingency plan (if required);
- safety concerns;
- allergies;
- list of any assistive equipment or technology, i.e., two wheeled walker, single point cane, or hearing aid;
- a summary of the clinical assessment;
- approved support plan;
- goals and objectives of the service; and
- a schedule of activities.

If changes to the service provider plan are needed during the time you are providing home support, you will be consulted and given a copy of the new plan. For the service provider plan template visit: **www.health.gov.nl.ca/health/publications/home_support_manual.pdf.**

Service Provider Progress Report

You must document your work with a client. The service provider progress report is an important part of the client's health record. This report will help communication between members of the support team, ensure services are being carried out as planned, and show any changes needed in the client's support plan. The client will give you the progress report forms to complete and return. The client will send the completed forms to the regional health authority case manager.

For a copy of the service provider progress report visit:
www.health.gov.nl.ca/health/publications/home_support_manual.pdf.

The report includes the following:

Client name: write clearly and spell correctly.

Birth date: write clearly using year, month and day format.

Service provider: check the box which applies.

Types of service provided: check the boxes which apply to the type of services you provide to the client.

Submitted to: submit the report to the client who will forward it to the regional health authority case manager.

Reporting period: refers to the period of client activity covered in the report, e.g., if the report was from June 1 to June 30, 20XX you write June 1-30, 20XX.

Provide a summary of tasks completed with client: list the tasks/activities that you do with or for the client. Offer details on the tasks/activities to assist client(s) with activities of daily living and household management. This may include tasks given to you by a registered nurse in which you have shown ability i.e., giving insulin.

Are the client's needs being met?
Answer using the service provider plan. Review the goals and objectives for the client and check yes if you feel that the client has met the objectives.

Please explain how this is demonstrated by commenting on the progress of meeting the objectives outlined in the service provider plan.
Describe the client's progress, e.g. client can do self-care with little help or client can remain at home; being left alone for longer periods of time.

Were there any concerns or issues during the reporting period?
Note any issues that took place during the reporting period, e.g., client fell and was hospitalized or client was not able to do any self-care.

Name and signature: print your full name and sign.

Role: state your role, e.g., providing home support to client.

Date: date the report was completed (year, month and day).

You may be asked for additional information from other service providers such as a behavioural aide.

Documentation

Documentation should be exact and relevant.

10 key points to consider

1. Only record facts: what was done, seen and heard. Do not record your opinion, e.g., client said she was feeling sad and I saw her crying many times during the day versus client seemed sad.
2. Always correctly spell the client's name and make sure the birth date is correct.
3. Print your name and sign all documents. Never sign any document written by someone else.
4. Record events exactly as they took place - never leave blank spaces.
5. Documents are a legal part of the client file and your records can be used in court.
6. Always document in a timely manner while you can more easily recall details. If you record something that is outside of the reporting period, state this on the document.
7. Printing is easier to read than writing.
8. Do not use abbreviations or shorten sentences.
9. Only document relevant information.
10. Always protect the information you document. Never share information unless the client consents. Keep all records safe and secure. Never make copies unless needed.

Documentation Do's

Record using ink
Date documents year/month/day
Print clearly and concisely
Record only facts and what you see
Keep your documents safe to ensure confidentiality
Fix errors by drawing one line through the error and initial above. Write the correction beside or underneath the error
Record information in a timely manner
Sign your name to your documents
Draw a line through any spaces left blank in a document
Write out the full word or sentence

Documentation Don'ts

Use a pencil to record
Give partial dates e.g. May 2017
Print in partial sentences or in a messy way
Record your opinion or use slang
Share anything you have documented with anyone outside the circle of care (the people involved in client care on a need to know basis)
Use white out or scribble over errors
Wait too long to record information
Sign your name to someone else's document
Leave blank spaces in your document
Use abbreviations or shorten sentences which may affect understanding

Adult Protection Act

It is the law in Newfoundland and Labrador to protect adults who do not understand or appreciate the risk of abuse and neglect. The **Adult Protection Act** is intended to protect an adult who may be at risk of abuse or neglect.

Abuse is the deliberate mistreatment of an adult, who lacks the capacity to protect himself or herself, that causes or is reasonably likely, within a short period of time, to cause the adult serious physical, psychological or emotional harm, or substantial damage to or loss of assets, and includes intimidation, humiliation and sexual assault.

Neglect is failure to provide care, assistance, guidance or attention to an adult who lacks capacity that causes, or is reasonably likely within a short period of time, to cause the adult serious physical, psychological or emotional harm, or substantial damage to or loss of assets.

The regional health authority in your area should be contacted if there is concern of an adult being abused or neglected. They will evaluate and if necessary investigate to determine if an adult is in need of protective intervention. If you are concerned an adult may be abused or neglected, call toll free **1.855.376.4957** or contact your regional health authority or local police.

For details on the **Adult Protection Act** visit **www.gov.nl.ca/cssd**

You can also contact the RNC or RCMP to make a report: **www.rnc.gov.nl.ca** or **www.rcmp-grc.gc.ca**

www.gov.nl.ca/health

Newfoundland Labrador