

Moving to a new home in continuing care

An information and decision-making
guide for patients and families





Your information

Name: _____

Name of alternate contact person or decision-maker: _____

Assessed level of care:

Case manager information

Case manager's name: _____

Contact number: _____

Alternate contact: _____

Other important contacts

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Transitioning to a new home in continuing care: What to expect

The journey in continuing care

Moving to a new home in continuing care is a major life event. Your health care needs as well as what you need socially, emotionally, psychologically, culturally and spiritually will influence where you choose to move. Your experience is unique, and we are committed to working with you and your family (including close friends, alternate decision-makers, and informal caregivers) to help meet your needs.

This guide provides information on what to expect during a move to a designated living option, and will help support your decision-making. We have included worksheets and checklists to help you keep track of important information as you look for a new home. There is a Definitions page at the back of the book to help you understand some of the terms that are used in this guide or by your care team.

Discussing the need for a move

Before moving into your new home in continuing care, it is a good idea to discuss your needs with your family. These discussions can be difficult, but having them will help you know what is most important to you when your care team asks. If you have questions please review this guide, speak to a case manager, or visit the Alberta Health Services (AHS) Continuing Care website at ahs.ca/continuingcare.

Who is your care team?

Your care team includes you, your family, and various healthcare team members. Depending on your location, the members of your healthcare team may vary, and members may take on different roles. Your healthcare team may include physicians, nurse practitioners, nurses, case managers, and other healthcare providers.

Identifying your care needs

Assessment by a case manager

A continuing care case manager will meet with you and your family and complete an assessment to determine your health care needs. The assessment collects information about your physical function, mental health, social abilities, and financial situation. You can learn more about this assessment on the AHS Continuing Care website at ahs.ca and search “living options assessment.”

Most often, assessments for continuing care occur in your home. Occasionally, if it is determined by the healthcare team that it is appropriate, assessments are completed in a hospital setting.

You will be actively involved in the assessment and you will have the opportunity to tell your case manager anything you think is important, as well as ask questions you may have.

After your assessment is complete

Your case manager will discuss with you the level of care best suited to your assessed need. We call this your designated living option level. If you have questions about your assessed level of care, please talk to your case manager.

All designated living options provide you with:

- privacy and independence with the comfort of knowing your health and personal care supports are onsite when you need them
- accommodation, meals, housekeeping, linen and recreational services
- 24 hour onsite (scheduled and unscheduled) personal care support according to your plan of care

Please go to pages 3–6 for descriptions of the different designated living option levels.



Designated living option levels

Designated Supportive Living 3 (DSL3)

DSL3 is for individuals who:

- are medically and physically stable but could be experiencing increased health care needs that cannot be fully predicted and met through scheduled home care
- are living with a physical disability, mental health diagnoses, or mild dementia with no known risk of wandering, and who are not a risk to themselves or others
- are able to move independently or with the assistance of one other person
- are able to use a call system to get help

Who provides care in DSL3?

- Healthcare aides are onsite 24 hours a day to provide support, personal care, and regularly scheduled medication assistance.
- Depending on the needs of the individual, scheduled professional care (nursing, rehabilitation therapy, etc.) will be coordinated by a case manager.
- Medical care is provided by either the individual's community physician or available by a site designated physician who visits the site regularly.
- Your family, loved ones, and other informal caregivers are important members of the care team and are welcome to participate in your care.





Designated Supportive Living 4 (DSL4)

DSL4 is for individuals who:

- have more complex medical needs, including chronic disease management, that are predictable and safely managed with onsite licensed practical nurses (LPNs)
- may require chronic disease management
- may require the following types of assistance with daily activities:
 - complete meal assistance including tube feeds
 - mechanical lift transfers
 - two person transfers
 - medication assistance or administration

Who provides care in DSL4?

- Healthcare aides are onsite 24 hours a day to provide support and personal care.
- Professional nursing care is available onsite by an LPN 24 hours a day.
- Depending on the needs of the individual, scheduled professional care (registered nurse [RN], rehabilitation therapy, etc.) will be coordinated by a case manager.
- Medical care is provided by either the individual's community physician or available by a site designated physician who visits the site regularly.
- Your family, loved ones, and other informal caregivers are important members of the care team and are welcome to participate in your care.

Designated Supportive Living 4D (DSL4D)

DSL4D is for individuals who may:

- have moderate to advanced dementia
- have an increased risk of wandering and unpredictable behaviours, but who are not a safety risk to themselves or others
- have more complex medical needs, including chronic disease management, that are predictable and safely managed with onsite LPNs
- require assistance, cueing, supervision, and/or monitoring to complete their daily activities (including complete meal assistance, transfers, and medication assistance or administration)

Who provides care in DSL4/4D?

- Healthcare aides are onsite 24 hours a day to provide support and personal care.
- Professional nursing care is available onsite by an LPN 24 hours a day.
- Depending on the needs of the individual, scheduled professional care (RN, rehabilitation therapy, etc.) will be coordinated by a case manager.
- Medical care is provided by either the individual's community physician or available by a site designated physician who visits the site regularly.
- Your family, loved ones, and other informal caregivers are important members of the care team and are welcome to participate in your care.



Long Term Care (LTC)

LTC is for individuals who may:

- have highly complex and unpredictable health needs whose care cannot be safely provided in their own home or in designated supportive living
- experience serious changes in health care needs requiring unscheduled RN assessments and interventions
- have a need for complex medication management and other treatments delivered by an RN
- have health conditions requiring the continued presence of an RN and the availability of rehabilitation or dietary professionals
- portray unpredictable behaviour, including increased safety risks to themselves or others
- have complex palliative care needs

Who provides care in LTC?

- RNs supervise your care and professional nursing services may be provided by LPNs. There is 24 hour onsite (unscheduled and scheduled) personal care and support provided by healthcare aides.
- Other healthcare professionals (occupational therapist, pharmacist, recreational therapist, etc.) are available depending on your assessed needs.
- Medical care is available by a site designated physician who visits the site regularly.
- Your family, loved ones, and other informal caregivers are important members of the care team and are welcome to participate in your care.

Choosing a new home

Once you know the designated living option level that fits your care needs, the next step is to choose where you want to live. You and your family should talk with your case manager about your preferences. Refer to page 17 as a guide for questions to consider when making your choice of sites.

What to expect:

You will be asked to choose at least one **most preferred site** as well as other **preferred sites**. Some sites have longer waitlists than others, so it is important you are prepared with more than one choice. The more choices you are able to provide, the more likely you are able to move to a site you prefer.

- You can choose to live anywhere within the province that has a designated living option site that provides your assessed care needs. If you plan to relocate outside your current city or town, your information and assessment details will be shared with the case management team in your new location. The case management team in your new chosen location will contact you to discuss your specific preferences before selecting preferred sites.
- After your assessment is complete and you have discussed your designated living option level with your case manager, you need to notify your case manager of your preferred designated living option site(s) within:
 - seventy two (72) hours if you are waiting in the hospital
 - seven (7) days if you are waiting in the community

Note: If a site that meets your needs becomes available while you are still considering your site choices, you may receive an offer before you have made your choices.

A **most preferred site** means one or more designated living option site(s) you would prefer to live at over all other designated living option sites.

A **preferred site** means one or more designated living option site(s) you specify in order of preference. At least one of these sites should be specified as your most preferred.

To learn about the sites:

- Ask a case manager which sites can meet your specific needs and preferences before you visit sites. The case manager may be able to provide you with written information about sites in your area.
- Visit the AHS website at ahs.ca and search “find healthcare” to use the facility locator to view sites that may be of interest to you.
- Contact sites to arrange a virtual or in-person tour.

When reviewing your options, contact sites to find out what you need to bring from home and the cost of services they offer.

Please refer to pages 18–21 for a list of potential supplies and costs.



Costs and financial resources

Costs of moving to or between designated living option sites are not covered by Alberta Health (AH) or AHS. Please make arrangements with your family and loved ones to help you move to your designated living option once it becomes available. If you require an ambulance to take you to a designated living option site, you may receive an ambulance bill. In some circumstances the cost of an ambulance may be covered by Alberta Blue Cross or another private insurance.

Continuing care accommodation charges

Residents of designated supportive living and long term care are required to pay an accommodation charge to cover the cost of accommodation-related services such as meals, housekeeping, linen and towel change, and building amenities. Alberta Health sets the maximum accommodation charge. The accommodation charge rate can be found at health.alberta.ca by searching “accommodation charges.”

If you are waiting in a hospital to move to a designated living option, you will begin to pay the continuing care accommodation charge once your name has been added to the waitlist(s).

If you are worried you cannot afford to move to a designated living option, please discuss this with your case manager. Your case manager can refer you to a social worker who will help you to review your finances and determine if any financial assistance is available for you. For additional information about financial resources, please refer to page 23.

Your accommodation fees do not cover all of your costs. The checklists on pages 18–21 will help you to determine the costs and personal supplies you will need for your move.





What to expect while waiting for a designated living option

Once you notify the case manager of your site choices, your name will be added to the waitlist for those sites. Your name will stay on the site waitlist until you:

- have moved to one of your most preferred sites
- have asked to be removed from the waitlist
- no longer require a designated living option

What to expect:

- A case manager will stay in contact with you while you are waiting. You should contact the case manager if you have any changes to your needs or site choices.

What should I do while I wait?

- You should take this time to ask questions, go over your finances, and find someone to help you with the move.
- If you haven't already, arrange to visit your preferred and most preferred sites, if you can.
- Consider reviewing (or preparing) your Personal Directive (PD) and Enduring Power of Attorney (EPA). Visit the [Office of the Public Guardian](#) website or talk to a case manager for more information.
- Make a list of all furniture and personal items you will need.

What you need to know about the waitlist:

- If a site you've chosen does not have a waitlist, you can expect to move quickly.
- Clients who have been assessed as "Immediate in the Community" will be considered first for any available beds for a variety of reasons (i.e., their safety is at risk).
- If your preferred and most preferred sites have a waitlist, the length of time waiting will vary. Depending on the number of people waiting for a specific site, the expected wait could be weeks, months, or over a year before you receive an offer for that specific site.
- The waitlist for all sites is prioritized by the urgency of needs, transfer status, and waitlist date. All of these factors, as well as specifics about the available room (e.g., no lifts, shared room, couple suite, etc.), are considered when determining who is most appropriate for the available room.
- The number of people on the waitlist for a site can change daily and throughout the day for various reasons such as transfers, or individuals asking to be removed from the waitlist. Because of the constant changes to the waitlist, it is very difficult to give you an exact location or number on the waitlist.
- The length of time you may be waiting for a specific site is determined by the:
 - number of people on the waitlist
 - size of the facility and how frequently a room becomes available at the facility



When a living option becomes available

You will receive a site offer when there is a room available for you. You should be ready to make a decision by this time and be prepared to move quickly.

What to expect:

- You will be given up to 48 hours to accept a site offer.
- After you accept the site offer, a move-in date will be scheduled.
- If you are offered a shared room, and you would prefer a private room, this can be requested after moving in. Many sites with shared rooms have site-specific waitlists for private rooms.
- If you choose not to accept an offer for your most preferred site, your need to be on the waitlist will be reviewed, and your case manager will work with you to review alternate options.

Immediate in the community

If you have been assessed to move immediately from the community (designated on the waitlist as Immediate in the Community), you should be prepared to accept a site offer quickly. Your healthcare team will be in close contact with you throughout this process.

You will be offered an available room at any site of your designated living option level. If the offer is not for your preferred site, your name will be prioritized as a transfer for your most preferred and preferred site(s) after you move. Every effort will be made to ensure you remain on the waitlist for all of your remaining chosen preferred and most preferred sites. If you do not accept a site offer, your need to have Immediate in the Community status will be reviewed and other alternatives will be explored.

When you are moving from the community:

- If you are offered a most preferred site, your name will be removed from the waitlist after you move.
- If your most preferred site(s) does not have a room available for you, you may be asked to move to a **temporary designated living option**. This temporary option may or may not be one of your preferred sites. Every effort will be made to consider the things you identified as being most important when your preferred sites were decided on.
- If you do not want to move to a different site temporarily, you may ask your case manager about a **temporary community option**. This option is negotiated with the AHS case manager and may include a private living option, purchased care and/or extensive family contribution.
- If you move to a temporary designated living option or accept a temporary community option, your name will be prioritized as a transfer for your most preferred and preferred site(s). Every effort will be made to ensure you remain on the waitlist for all of your remaining chosen preferred and most preferred sites.

A **temporary designated living option (temporary site)** means a designated living option that is not the patient/alternate decision-maker's most preferred designated living option choice.

A **temporary community option** means a specific strategy intended to temporarily provide care while you wait in the community for your most preferred designated living option to become available.



When you are moving from a hospital:

- If you are offered a most preferred site, your name will be removed from the waitlist after you move.
- If your most preferred site(s) does not have a room available for you, you may be asked to move to a **temporary designated living option**. This temporary option may or may not be one of your preferred sites. Every effort will be made to consider the things you identified as being most important when your preferred sites were decided on.
- If a **temporary community option** is safe and available for you, a case manager will discuss this option. This option is negotiated with the AHS case manager and may include private living option, purchased care and/or extensive family contribution.
- If you move to a temporary designated living option or accept a temporary community option, your name will be prioritized as a transfer for your most preferred and preferred site(s). Every effort will be made to ensure you remain on the waitlist for all of your remaining chosen preferred and most preferred sites.
- If your first site offer is not accepted, the reasons should be discussed with a case manager and one more alternate site will then be offered.
- In the situation where all options are exhausted, and no acceptable solution has been reached, the hospital will work with you and your care team to arrange a transfer to the most appropriate alternate site temporarily.

A **temporary designated living option (temporary site)** means a designated living option that is not the patient/alternate decision-maker's most preferred designated living option choice.

A **temporary community option** means a specific strategy intended to temporarily provide care while you wait in the community for your most preferred designated living option to become available.

Moving in

Once you have accepted your site offer, the next step is to prepare for your move.

Most sites will ask you and your family to have a meeting (called an admission conference) with them before, or soon after you move in. You can expect to talk about your care plan and to sign and review documents needed for your move. You should ask to have your family and any legal decision-makers with you at this meeting.

Your site should provide you with a resident handbook and lease agreement with detailed information about your new home.

You are welcome and encouraged to bring small, special items from home to make your space your own.

What to expect after you move in

Your healthcare team will work with you and your family to design a care plan that reflects your care needs and preferences. The care staff, such as healthcare aides, will provide care assistance where needed while supporting your independence.

There are recreation staff who will offer multiple activities such as exercise classes, games, arts and crafts, and outings. There are many shared spaces throughout your new home, such as dining rooms, activity rooms, and lounge rooms. Your care team, including the recreation staff, can assist you in choosing activities that suit your preferences.

Your family and friends are encouraged to visit you. Your healthcare team will want to know when you plan to leave the site for personal activities. Most sites also have areas you can use for private functions with your family and friends.

The care staff will do their best to plan your medical care around your activities.

Resident and family council meetings are scheduled regularly to provide an opportunity for residents and family to give input on decisions that affect their lives in the facility.

Questions or concerns while you are waiting

You have the right to bring forward questions or concerns at any time. It is important to know who the key contact person is, so if a concern does come up, there is someone to turn to for assistance. This contact person will most likely be a case manager, transition coordinator, or placement coordinator. You can use the space on the inside front cover to write their name down.

Who you can talk to:

- If you have questions or concerns, you should first talk to your case manager.
- If the case manager is not able to solve a concern, or if the concern is about your case manager, you can ask to talk to the transition or area manager.
- If the concern is complex, AHS Patient Relations may become involved and will work with you to resolve your concern.

If you have a concern that is not being resolved or if you have feedback you want to provide, contact AHS Patient Relations by:

- telephone: 1-855-550-2555
- fax: 1-877-871-4340
- mail: Alberta Health Services Patient Relations Department
Suite 300, North Tower
10030 – 107 Street NW
Edmonton, AB
T5J 3E4
- online feedback form: albertahealthservices.ca/273.asp

Making decisions about your new home in continuing care

This information can help you make decisions about:

- preferred living option sites, chosen from those meeting your assessed care needs
- accepting an alternate option temporarily if your most preferred site is not yet available

Consider what is most important in a designated living option. Take some time to think about your personal needs and preferences. We will try to accommodate what is most important, whenever possible.

Is it important to live in a certain community?

Is there a spouse, partner, or support person you want to remain close to, or live with?

Are there any special considerations (e.g., cultural, language, or religious preferences)?

Do there need to be specific services offered on site? What are they?

Preparing for your move to designated supportive living

Below is a list of items you should consider having ready for your move into Designated Supportive Living (SL3/4/4D). Please keep in mind each site is unique so please confirm with the site you are moving to which items are required and permitted.

Personal care items	Clothing
<input type="checkbox"/> Incontinence supplies (i.e. Attends™)	<input type="checkbox"/> Daytime and nighttime clothes
<input type="checkbox"/> Dental care items	<input type="checkbox"/> Seasonal outerwear
<input type="checkbox"/> Personal toiletries (soap, deodorant, lotion, shampoo, etc.)	<input type="checkbox"/> Footwear
<input type="checkbox"/> Shaving equipment	<input type="checkbox"/> Other:
<input type="checkbox"/> Tissues (i.e. Kleenex™)	
<input type="checkbox"/> Toilet paper	
<input type="checkbox"/> Garbage bags	
<input type="checkbox"/> Other:	
Furniture	Personal items
<input type="checkbox"/> Single bed or hospital bed	<input type="checkbox"/> Pictures/ornaments
<input type="checkbox"/> Mattress	<input type="checkbox"/> Television
<input type="checkbox"/> Small night stand	<input type="checkbox"/> Clock
<input type="checkbox"/> Chest of drawers	<input type="checkbox"/> Radio
<input type="checkbox"/> Garbage can	<input type="checkbox"/> Books, magazines, etc.
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Bedding and linens	Mobility equipment, if necessary
<input type="checkbox"/> Blanket/quilt	<input type="checkbox"/> Walker
<input type="checkbox"/> Sheets	<input type="checkbox"/> Crutches or canes
<input type="checkbox"/> Mattress cover	<input type="checkbox"/> Wheelchair/scooter
<input type="checkbox"/> Pillows	<input type="checkbox"/> Other:
<input type="checkbox"/> Towels, face cloths, etc.	
<input type="checkbox"/> Laundry basket (labelled with the resident's name)	
<input type="checkbox"/> Other:	
Specialized equipment, such as:	
	<input type="checkbox"/> Oxygen concentrator
	<input type="checkbox"/> Oxygen supplies
	<input type="checkbox"/> CPAP/BiPAP machine
	<input type="checkbox"/> Water for humidifier or concentrator
	<input type="checkbox"/> Other:
Special care supplies	
	<input type="checkbox"/> Colostomy supplies
	<input type="checkbox"/> Wound care supplies
	<input type="checkbox"/> Catheters and equipment
	<input type="checkbox"/> Diabetic supplies (test strips, glucometer)
	<input type="checkbox"/> Other:

Questions you may want to ask while on a site tour:

- What is the facility's policy regarding electric scooters and wheelchairs?
- Does the bed need to be new or can I bring what I have at home?
- Is there a hairdresser on site?
- Does the site have transportation for outings and appointments?
- Are the suites equipped with mini-fridges? What are the rules around bringing in small appliances (e.g., coffee maker, bar fridge, microwave)?
- Ask for a weekly menu and a monthly recreation calendar.
- Ask to see a copy of the resident handbook and lease agreement (some sites will only provide this upon admission).

Designated supportive living estimated costs

Please check the AHS facility locator at ahs.ca for additional information about specific sites and costs. Below is a checklist of expenses to expect when you move to designated supportive living. Availability of services and costs vary by site so please check with the site you are moving to.

Accommodation charge (includes: rent, utilities, meals, snacks, light housekeeping, and linen & towel laundry)	For current rates visit the Alberta Health website at health.alberta.ca and search "accommodation charges."
Damage deposit	
Tenant insurance	
Telephone	
Basic cable/Wi-Fi package	
Personal laundry service	
Emergency pendant	
Identification bracelet (if required)	
Suite key replacement	
Parking	
Recreation outings/special events	
Transfer belt (as required)	
Transfer sling (as required)	
Medications *see note about pharmacy below*	

Personal services such as advanced foot care, hairdressing, dental care, and/or vision care may be accessed in the community or within the facility. The resident is responsible for this cost and payment is generally made directly to the service provider.

Pharmacy

Medications are usually dispensed by a contracted pharmacy. Please speak to the site you are moving to about your pharmacy options. The pharmacy provider will bill your benefit carrier (such as Blue Cross) if you have benefits. The resident is responsible for the co-payment; the pharmacy will invoice the resident accordingly.

Transportation

The resident or family is responsible for transportation to all appointments, medical, dental, etc.

Other information

- Provide a void cheque/banking information.
- Provide the facility with your Goals of Care Designation (Green Sleeve).
- Provide the facility with a copy of your Personal Directive (PD).
- Provide the facility with copy of your Enduring Power of Attorney/Trustee.

Preparing for your move to long term care

Below is a list of items you should consider having ready for your move into long term care. Please keep in mind each site is unique so please confirm with the site you are moving to which items are required and permitted.

Personal care items	Personal items
<input type="checkbox"/> Dental care Items	<input type="checkbox"/> Pictures/ornaments
<input type="checkbox"/> Personal toiletries (soap, deodorant, lotion, shampoo, etc.)	<input type="checkbox"/> Television
<input type="checkbox"/> Shaving equipment	<input type="checkbox"/> Clock
<input type="checkbox"/> Lotion	<input type="checkbox"/> Radio
<input type="checkbox"/> Tissues (i.e. Kleenex™)	<input type="checkbox"/> Books, magazines, etc.
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Furniture	Mobility equipment (if necessary)
<input type="checkbox"/> Small night stand	<input type="checkbox"/> Walker
<input type="checkbox"/> Other:	<input type="checkbox"/> Crutches or canes
	<input type="checkbox"/> Wheelchair/scooter
	<input type="checkbox"/> Other:
Bedding and linens	Specialized equipment such as:
<input type="checkbox"/> Blanket/quilt	<input type="checkbox"/> CPAP/BiPAP machine
<input type="checkbox"/> Laundry basket	<input type="checkbox"/> Other:
<input type="checkbox"/> Other:	
Clothing	
<input type="checkbox"/> Daytime and nighttime clothes	
<input type="checkbox"/> Seasonal outerwear	
<input type="checkbox"/> Footwear	
<input type="checkbox"/> Other:	

Questions you may want to ask while on a site tour:

- What is the facility's policy regarding electric scooters and wheelchairs?
- Is there a hairdresser on site?
- Does the site have transportation for outings and appointments?
- Can I bring small appliances (e.g., coffee maker, bar fridge, microwave)?
- Ask for a weekly menu and a monthly recreation calendar.
- Ask to see a copy of the resident handbook and lease agreement (some sites will only provide this upon admission).

Long term care estimated costs

Please check the AHS facility locator at ahs.ca for additional information about specific sites and costs. Below is a checklist of expenses to expect when you move to long term care. Availability of services and costs vary by site so please check with the site you are moving to.

Accommodation charge (includes: rent, utilities, meals, snacks, light housekeeping, and linen & towel laundry)	For current rates visit the Alberta Health website at health.alberta.ca and search "accommodation charges."
Damage deposit	
Tenant insurance	
Telephone	
Basic cable/Wi-Fi package	
Personal laundry service	
Emergency pendant	
Identification bracelet (if required)	
Suite key replacement	
Parking	
Recreation outings/special events	

Personal services such as advanced foot care, hairdressing, dental care, and/or vision care may be accessed in the community or within the facility. The resident is responsible for this cost and payment is generally made directly to the service provider.

Other information

- Provide a void cheque/banking information.
- Provide the facility with your Goals of Care Designation (Green Sleeve).
- Provide the facility with a copy of your Personal Directive (PD).
- Provide the facility with a copy of your Enduring Power of Attorney/Trustee.

Additional resources

Alberta Health

health.alberta.ca/services/continuing-care.html

Continuing Care Accommodation Charges

Alberta Health Services – Continuing Care website

ahs.ca/cc/Page15328.aspx

- *Accessing a Designated Living Option in Continuing Care policy*
- *Designated Living Option. Access and waitlist management in Continuing Care procedure*
- *Alternate Level of Care Accommodation Charges policy*
Facility Locator

Canadian Institute for Health Information – Your Health System

yourhealthsystem.cihi.ca

Office of the Public Guardian/Public Trustee

humanservices.alberta.ca/guardianship-trusteeship.html

Protection for Persons in Care

health.alberta.ca/services/protection-persons-care.html

Veterans Affairs Canada

veterans.gc.ca/eng

Financial resources

Alberta Seniors Benefit
seniors.gov.ab.ca

Alberta Works (Income Support)
alberta.ca/income-housing-job-loss-supports.aspx

Assured Income for the Severely Handicapped
alberta.ca/aish.aspx

Financial Planning (Alberta Health Services)
ahs.ca/cc/Page15481.aspx

Senior's Financial Assistance Programs (Alberta Health)
alberta.ca/seniors-financial-assistance.aspx

Service Canada (OAS, GIS, CPP)
canada.ca/en/services/benefits/publicpensions.html

Definitions

Care plan means a comprehensive, coordinated plan of care which is developed, shared and managed collaboratively across the continuum of service. It is based on patient assessment and documents the patient's needs and goals, the interventions to meet these needs, and outcome measures.

Case manager means the health professional that will help navigate the continuing care system. A case manager has the primary responsibility to work with clients to assess care needs and assist with service options. They may also be called a transitions coordinator.

Community/community living means for the purpose of this guidebook only, a permanent living arrangement where an individual resides alone or with others in a setting that can vary from independent living in a private residence to a variety of communal settings where health and personal support services may, or may not, be provided. These settings may include:

- private homes, apartments
- congregate living settings that provide housing and hospitality services (e.g., lodges, group homes, etc.)
- Designated Supportive Living levels 3, 4 and 4D
- Long Term Care

Continuing care means a range of services that support the health and well-being of individuals living in their own home, a supportive living or long term care setting. Continuing care clients are defined by their need for care, not by their age or diagnosis or the length of time they may require service.

Designated living option means publicly-funded residential accommodation that provides health and support services appropriate to meet the patient's assessed unmet needs. The level of care is accessed through a standardized assessment and single point of entry process and consists of Designated Supportive Living Level 3 (DSL3), Designated Supportive Living Level 4 (DSL4) and Designated Supportive Living Level 4 Dementia (DSL4D) and Long term Care (LTC).

Immediate in the community means, for the purpose of this guide only, patients waiting in the community whose needs cannot be safely managed in their current environment for more than 48 hours. Immediate admission to an appropriate designated living option is required due to a crisis arising from a change in condition or circumstances.

Most preferred designated living option means the patient has specified one or more designated living option sites as where they would prefer to live over all other designated living options.

Preferred designated living option means one or more designated living option site(s) that the patient identifies in order of preference. At least one of these sites should be identified as their most preferred designated living option.

Site means a specific residential continuing care building and services.

Temporary community option means a specific strategy intended to temporarily provide care while the patient waits in the community for their most preferred designated living option to become available. This option is negotiated with the case manager and may include a private living option, purchased care and/or extensive family contribution.

Temporary designated living option (temporary site) means a designated living option that is not the patient/alternate decision-maker's most preferred designated living option choice. Admission to a temporary designated living option is reported as temporary, and the patient remains on the waitlist for transfer to their most preferred site.

Transfer status refers to whether an individual has moved to a temporary designated living option or not. When a patient moves into a site that is not their most preferred site, they will be prioritized on their most preferred site waitlist as a transfer. The waitlist for a site may have multiple people who are a transfer.

Waiting in the community means for the purposes of the *Access to a Designated Living Option in Continuing Care* policy suite only, patients who are waiting in a community residence for access to a designated living option whose assessed unmet needs can no longer be met in their current living setting. These individuals must be ready to accept a designated living option when offered.

Waitlist means a prioritized list of patients waiting for admission to a continuing care designated living option who have been assessed and approved for a designated living option.

Notes

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