

## INTRODUCTION

Note: The first time a word defined in the Glossary appears in the Program Guidelines, it will be in UPPERCASE letters.

### **BACKGROUND**

The Special Needs and Services program, Phase 1, was initiated in 1981 in order to better meet the needs of CHILDREN with DEVELOPMENTAL DISABILITIES in residential facilities. In 1982, the Special Services at Home (SSAH) Program was introduced as Phase II of this initiative to help children with developmental disabilities to live at home with their FAMILIES and to prevent their institutionalization. In 1990, the program expanded to include ADULTS with developmental disabilities and children with PHYSICAL DISABILITIES, living at home with their families.

The program has evolved as one of a range of community supports available in order to meet the government's vision of:

- Strengthening the ability of individuals and families to develop optimal potential;
- Reducing the need for intensive or intrusive social services in future; and
- Reinforcing personal dignity and independence.

SSAH is based on the belief that family members are often PRIMARY CAREGIVERS. It focuses on providing funds to assist families to purchase supports not available elsewhere in the community and has become a model of INDIVIDUALIZED CONSUMER-DIRECTED FUNDING.

The Ministry of Community and Social Services (MCSS) has committed funds for SSAH steadily since 1982. The program faces an ongoing challenge of responding to growing demand while managing within available funds. SSAH is not an entitlement program and regionally-based offices must approve funds equitably within the resources available.

In addition, the ministry has made policy changes over time to create a more flexible and responsive program that better meets the needs of individuals and families.

## SPECIAL SERVICES AT HOME PROGRAM GUIDELINES

---

### PURPOSE OF THESE GUIDELINES

Since the program began in 1982, SSAH has been directed by program guidelines and policy directives. In 1991, as a result of a community and family-based reference group process, the SSAH guidelines were updated. In 1994, based on the development of promising practices for consistent program delivery, the SSAH Management Requirements were implemented. These two documents, a draft program manual and various policy directives, inform and guide the operation of the SSAH program provincially.

To enhance consistent program delivery and decision-making for SSAH, all guidelines and policies have been amalgamated into one document. The Ministry's intent is to provide **one source document** that describes all elements of the SSAH program, including the application process, eligibility and decision-making factors, review processes and accountability mechanisms.

These SSAH Program Guidelines represent an amalgamation of the following documents, manuals and policies:

- Intervention for Deaf/Blind Children, 1986
- Draft Program Manual for SSAH, 1990
- Guidelines for the Special Services at Home Program, 1991
- Employment of Family Members to Deliver Services Under SSAH, 1991
- Draft Nursing Respite Guidelines, 1991
- Update and Operational Policy on Transition Planning for Children with Physical Disabilities, 1992
- SSAH Eligibility of Individuals Who Are at Home On a Part-time Basis, 1993
- Management Requirements for SSAH, 1994
- Transfer of Service Commitment, 1995
- New Management Requirement for the SSAH Review Process, 1995
- Equity in Allocating SSAH funds, 1996
- The SSAH Appeals Process, 1996
- SSAH Self-Administration of Individualized Funding/Employer-Employee Relationship, 1997
- Enhanced Respite for Children who are Medically Fragile and/or Technology Dependent, 1999
- Greater flexibility in how families can use SSAH funding, 2003
- Streamlined application process, 2003
- Standardized Progress Report, 2003
- Revised Definition of Respite, 2003

## **SPECIAL SERVICES AT HOME PROGRAM GUIDELINES**

---

- Expanded eligibility for individuals not living at home (and not living in Ministry-funded residential accommodation), 2005
- Greater flexibility for primary caregivers to use their SSAH funding to compensate some family members to provide respite and/or personal development and growth, 2005
- Autism Spectrum Disorders (ASD) Respite, 2007

This amalgamation does not change or alter the content or intent of the above policy/program changes. Wording has been updated to reflect integrated planning and holistic approaches to decision-making. The names of other community support programs and their eligibility requirements have been updated. The language of this document reflects that of the SSAH Program Guidelines developed in 1991 and is designed to be respectful of individuals with disabilities and their families.

### HOW TO USE THESE GUIDELINES

The format for these guidelines is designed to be easy to use and update. The Guidelines are designed to:

- Be read through for a full understanding of the intent and context of the SSAH program, and
- Be referenced when looking for direction on a specific topic.

The Summary provides an inclusive overview of the SSAH program. The SSAH Program Guidelines address each one of the following areas:

- The **PRINCIPLES** are the value statements that guide staff about how the processes are to be considered.
- The **SUBJECT** sections address the process – assessing needs, planning and delivering.
- The **STANDARDS** describe what will be accomplished – the desired outcomes.
- The **FILE REVIEW INDICATORS** provide examples of the types of things that one can generally expect to find in a review of program files.

### **SERVICE PRINCIPLES**

The Ministry of Community and Social Services supports the following service principles, which inform and guide developmental services programs:

- Integration into communities and participation in community life.
- Independence – supports that encourage greater independence.
- Individualization – supports that meet individual capabilities and enhance choice and self-direction.
- Quality of life – individuals who are valued for who they are and the role they can play in the community.

Decision-making should also reflect:

- The seven decision-making factors outlined in these Guidelines;
- An individualized approach, based on a recognition of the uniqueness of the situation of each applicant.
- An equitable response.