

Personal Care Assistance Assessment Report Guide



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Personal Care Assistance Assessment Report Guide

Introduction

The Personal Care Assistance (PCA) assessment tool will be used by ICBC to determine a customer's PCA benefit entitlement. It is very important that the assessment be reviewed with and explained to the customer.

ICBC will request a completed PCA Assessment Report and scoring sheet from a service provider. ICBC recovery specialists will continue to engage occupational therapists (OTs) to conduct initial PCA assessments and re-assessments.

The completed report and scoring sheet may be submitted as a standalone report or as an addendum with the Occupational Therapy Initial Report or the Occupational Therapy Progress Report, as per the request from ICBC.

As the timing of the submission of the assessment and the determination of entitlement is often critical, assessments will be submitted to ICBC via HCPIR, in accordance with section 10 — *Remuneration and Invoicing* of the Occupational Therapy Performance Standards. The OT will retain the original assessment in their own file.

General Principles — Rules/Regulations

1. The requirement for Personal Care Assistance must arise as a direct result of injuries which were sustained in a motor vehicle accident as defined by Part 10 of the Insurance Vehicle Act.

Only impairments directly related to the crash can be compensated under the PCA benefit. If, for example, the customer had a pre-existing health condition, this should be taken into consideration during the PCA assessment.

It is of the utmost importance that the recovery specialist and the OT are aware of any pre-existing condition that may affect the customer, and that information about any such condition is communicated between them.

It is imperative that the OT determine whether services were in place prior to the crash, for what reason, and to what extent. Only additional or extraordinary services needed after the crash would be compensated under Enhanced Accident Benefits.

If a new and unrelated health condition develops after the crash, the PCA assessment must consider only those needs that are related to the crash.

Where the crash has exacerbated a pre-existing condition, ICBC would compensate customers for any increase in services that are necessary.

There are often difficulties in making assessments in these situations. Occupational therapists should consult with the recovery specialist as they deem necessary.

2. The customer must be the only beneficiary of PCA services.

Compensation for PCA is provided only for the customer's personal needs, and not for those of family members. The PCA assessment should therefore only reflect the direct care needs of the customer. For example, if a customer is capable of preparing a meal for one, but not a big family meal, they are not eligible for funding even if they were responsible for preparing family meals prior to the crash.

Where the customer was a caregiver to a child or other family member, they may be eligible for a caregiver weekly indemnity or reimbursement of expenses for the care of the other person in addition to their entitlement to PCA. This should be discussed with the recovery specialist.

3. The customer must have been capable of performing the activity for which PCA is being claimed prior to the crash, and be eligible for funding based upon their age.

Only assistance that is required with respect to those essential activities of self care or daily living that the customer was normally capable of performing prior to the crash will be compensated.

Special eligibility rules apply to customers who are under 16 years of age. These are set out in developmental scale as set out in Table 2 section 31 of the Enhanced Accident Benefits Regulation.

4. Services for which compensation is claimed are not already covered or provided by other social and/or health services agencies.

Coverage for PCA is provided only to the extent that the care expense is not covered under any other source including insurance wherever issued and in effect or provided under another enactment.

Customers that needed and were receiving home-care prior to the crash will **only be eligible for funding for any increase in services** (extraordinary costs) that are necessary as a direct result of the crash.

5. Compensation is provided only for activities listed in the scoring sheet.

The PCA assessment tool contains a complete listing of the activities that are eligible for funding. **Activities that are not listed in the tool are not compensated.**

PCA can be provided either physically or verbally to the customer. The assessment tool provides for both assistance and supervision to customers who otherwise could not perform the activity safely for physical or cognitive reasons. Such assistance or supervision qualifies for PCA funding. Occupational therapists should indicate where customers have limitations due to excessive pain or fatigue.

6. Only actual and proven expenses are compensated.

The PCA benefit is an expense reimbursement coverage. The amount calculated using the assessment tool is the maximum reimbursement that the customer can receive per month. The actual amount of reimbursement is based on expenses incurred. Reimbursement or payment will only be provided once acceptable invoices or receipts have been submitted and approved.

7. Coverage is subject to a minimum score ("deductible").

The customer must achieve a total time score of 9 or greater on the scoring sheet (see Table 1 section 31 of the Enhanced Accident Benefits Regulation) in order to be eligible for funding.

General Overview

Occupational therapists will normally visit the customer, preferably in their home, to complete these assessments. Assessment of components and activities that take place outside of the home should be assessed using clinical judgement. Direct testing of these activities is not required at the discretion of the OT.

The information thus gathered will then be forwarded to the recovery specialist who will notify the customer of their entitlement.

Prior to putting any services or assistive devices in place, the OT should obtain the approval of the recovery specialist. Where there are safety concerns (risk of falls or of injury due to the consequences of poor decision-making), some services may need to be put into place on an emergency basis. If such is the case, the recovery specialist should be notified immediately.

Re-Assessments

In general, re-assessments will be completed at intervals in accordance with the type and severity of the customer's injury, or as directed by the recovery specialist. These will continue until the customer no longer requires PCA or no longer qualifies for reimbursement, or when there are significant changes in their condition that may affect their entitlement. Occupational therapists should recommend when a re-assessment should be conducted based on the customer's injury type and any other factors that may affect a customer's recovery or continued entitlement to PCA.

PCA Assessment Tool

The assessment tool has two main parts: the assessment report and the scoring sheet. The assessment report is completed first and the results are used to complete the scoring sheet.

Scoring Sheet

The scoring sheet will be completed by the OT and provided to ICBC. The scoring results are used to inform benefit determinations and funding and as such, the accurate and timely completion is essential. The OT will use the results of the assessment report to complete the scoring sheet. Activities marked as Independent or N/A in the assessment report will have a corresponding score of zero in the scoring sheet.

Assessment Report

The assessment report is the heart of the assessment tool. It is divided into two main sections.

SECTION 1 lists essential activities of home and community management, mobility, self-care, and personal hygiene (including bowel and bladder care). Each activity, and its components, are described and defined.

SECTION 2 details any special requirements for supervision of the customer, **above and beyond any requirements for assistance with personal care or activities of daily living**. Such supervision may be required by customers who, for medical or cognitive reasons, cannot be left safely alone.

When completing the assessment report, the OT must assess the customer's functional abilities as they relate to each activity or component. Comments included in the assessment report should be precise and detailed enough to provide a clear indication of the level of assistance required with each activity or component.

Inconsistencies between the customer's known diagnosis, their subjective complaints, and their objective presentation should be identified and commented upon, whether observed directly or indirectly. For example, if a customer claims to be unable to lift a skillet, but is observed to pick up their large tomcat without difficulty, this should be noted.

Developmental Scale

The developmental scale is used to assess the PCA needs of children less than 16 years of age. It is an adjunct to the assessment report.

Recommendations for assistive devices

If an assistive device is required to increase the independence of the customer, it can be recommended for implementation. Occupational therapists will be expected to observe the processes outlined in the Occupational Therapist Service Level Agreement and the Occupational Therapy pages on [ICBC's Health Services Partners Page](#).

When assistive devices are required, this should be clearly indicated and activities should be scored assuming that all assistive devices will be in place.

For the purposes of calculating entitlement, it is assumed that any recommended assistive devices will be implemented. The customer's entitlement to major items such as home modifications or alterations of a vehicle, will be evaluated under a separate assessment for the expenditure.

Independent or Not Applicable

The customer can safely complete all of the activity, or the relevant components of the activity, with modifications or adaptive aids if necessary, but without physical or verbal assistance.

If the customer can perform the activity or component of the activity safely, correctly and efficiently without pain or physical or verbal assistance, check the Independent box for that component. No comments are required when the Independent box is checked.

If the activity is not applicable to the customer, circle the appropriate number in the “Not Applicable” row. The numbers listed have the following meaning:

1. No need to do this activity or the customer derives no benefit from the activity (Comment why there is no need to do this activity or why the customer derives no benefit from the activity)
2. Customer did not normally perform this activity before the crash
3. Activity not normally expected of a customer this age
4. Need met by another agency/institution
5. Needed assistance before the crash and no increase in need due to the crash
6. Need unrelated to the crash that appeared after the crash
7. Other reason (specify in the **Other** section at the end of the activity)

Partially Dependent

The customer can safely complete parts of the activity, or of the relevant components of the activity, with modifications or adaptive aids if necessary. Physical or verbal assistance by another person is required to complete the full activity. The customer may require supervision, set-up or minimal, to moderate assistance for part of the activity. Where applicable, please score under these headings:

Class 1 — The customer requires physical or verbal assistance with up to 25% of the activity.

Class 2 — The customer requires physical or verbal assistance with more than 25% and up to 50% of the activity.

Class 3 — The customer requires physical or verbal assistance with more than 50% and up to 75% of the activity.

Class 4 — Completely Dependent — The customer requires physical or verbal assistance with more than 75% of the activity.

Comment on each activity in the assessment report, following the instructions given below. Each of the activities included in Section 1 of the assessment report has been divided into various components. For example, the first activity, “Meal preparation: breakfast”, consists of five components, the first being “Access to/use of food/tools needed for meal preparation”.

Comments

Comments should describe the assistance required with an activity or a component of the activity. Please include in the Comments box relevant observations on the following factors when describing the assistance required:

- did the customer need assistance with the activity or any of its components before the crash and now needs increased assistance because of the crash?
- does the customer require environmental modifications/adaptive aids to perform the activity or any component of the activity?
- does the customer require physical or verbal assistance with parts of the activity or any component of the activity?
- is the customer completely dependent on physical or verbal assistance with the entire activity?
- does the customer experience pain when doing the activity or any component of the activity?

Assessment Report Details

Section 1 Level 1 Activities — Home and community management

Meal preparation: breakfast — includes preparing breakfast safely for self and related components such as accessing food, table set-up and clean-up, bringing food to table, washing dishes, wiping counters.

Meal preparation: lunch — includes preparing lunch safely for self and related components such as accessing food, table set-up and clean-up, bringing food to table, washing dishes, wiping counters.

Meal preparation: dinner — includes preparing dinner safely for self and related components such as accessing food, table set-up and clean-up, bringing food to table, washing dishes, wiping counters. Indicate if customer's main meal is a meal other than dinner.

Light housekeeping — includes performing light housekeeping duties such as sweeping, dusting and general tidying of the home (e.g. picking up clothing).

Heavy housekeeping — includes performing major housecleaning activities such as vacuuming, washing floors, garbage disposal, cleaning appliances and bathrooms and making beds. This also includes annual cleaning such as windows, walls, ceilings, curtains, and carpets.

Laundry — includes access to and use of the laundry area and performing related duties such as carrying a basket of clothes, taking laundry out of the appliance, ironing and folding clean clothes.

Yard work — includes outdoor home maintenance activities such as raking leaves, mowing the lawn, snow removal, wood chopping (only if wood is the main source of heat) and cleaning eavestroughs. This is only to reflect essential needs and not activities of an aesthetic nature. Examples of activities that are not included are painting and pool maintenance.

Shopping for personal needs — includes purchasing necessary supplies for the home and for personal use such as groceries, clothing, hardware, equipment, etc., and getting to and around a store, getting items off shelves, use of cart or other.

Using private or public transportation other than transfers — includes operating a motor vehicle or being able to hire/pay for taxi, rideshare, Uber, etc., or being able to understand public transportation schedules, pay correct fare, etc.

Undertake community outings — includes accessing public services and neighbourhood facilities (e.g. banks, stores, community centres), planning and carrying out shopping trips, attending medical appointments and other appointments associated with personal care.

Managing personal finances, personal medication, or both — includes accessing funds and completing transactions at a financial institution or by other means and managing finances independently.

Section 1 Level 2 Activities — Mobility and self-care

Transferring to and from bed — includes the ability to get into and out of the bed.

Adjusting and maintain position in bed — includes the ability to adjust body position, turn self (180 degrees) or raise self in bed (from lying to sitting prone, supine, side-lying).

Transfers: vehicle — includes the ability to get into and position oneself in a vehicle, do up seatbelt, store mobility aid and transfer out of vehicle.

Transfers: Two-person or lift — includes use of a lift, ceiling track lift or two persons to perform dependent transfer.

Home access — includes accessing all household equipment (such as TV, phone, radio/alarm, computer and thermostat). It also includes transferring to and from different surfaces such as from a wheelchair to chair or couch.

Stair use — includes ascending and descending indoor stairs in the customer's home. Please include the number of stairs the customer can ascend/descend independently.

Outdoor home access — includes ascending and descending outdoor stairs or a ramp into the home.

Eating/drinking — includes the use of utensils (modified, adaptive or regular) to bring food or drink to the mouth once the meal is presented. Can also include eating/drinking by special equipment such as nasogastric tube or gastrostomy. Set-up is not included in this task, but is accounted for in meal preparation.

Grooming/hygiene — includes oral care, hair grooming (not hair washing), washing hands and face, shaving, nail care and/or applying make-up and the use of tools associated with each of these components.

Dressing/undressing — includes set-up of clothes, lower and upper body dressing and doing up fasteners, buttons, zippers, bras, hosiery and shoes.

Orthosis/prosthesis — includes assistance in donning or doffing any orthotic or prosthetic device, including the application of any ointment or support garment required for the use of the prosthetic or orthotic device. Examples include slings, splints, braces and tensor bandages. The application of consumable medical supplies such as wound dressings and/or sanitary garments is not included.

Bathing/showering — includes bathing (washing, rinsing and drying) the body and hair either in the tub, shower or sponge/bed bath. It also includes tub or shower transfer. Refer to Activity #12 Transfers: Two Person or Lift for customers who require that type of assistance.

Toileting — includes the customer's ability to transfer on/off the toilet, maintain genital/perineal hygiene (access and use toilet paper), change sanitary garments and perform clothing adjustments. It also includes the use of a urinal or bedpan. Toileting does not necessarily have to occur in the bathroom. It could be done using a bedside commode. Emptying of a commode, bedpan, colostomy bag, or a urinal is also to be considered toileting.

Section 1 Level 3 Activities — Bowel and bladder care

Diaper, catheter, disimpaction — includes use of diapers, ability to catheterize and disimpact.

Section 2 for customers who need supervision

Section 2 of the assessment report is only to be used for customers who need supervision in addition to assistance that is provided for in Section 1.

Please provide a rationale for the need for supervision and record the number of additional hours of supervision beyond those already allocated for the activities set out in Section 1.

Supervision — applies when the customer requires basic or skilled supervision for behavioural or medical issues that are not covered in Section 1, such as supervision in the home during the day or during sleeping hours. The customer cannot be left alone. Please record and explain hours per day needed for supervisory care.

Child care for the customer's child is not eligible for coverage as a personal care activity and should be discussed separately with the recovery specialist.

Developmental Scale

Special eligibility rules apply to customers who are under 16 years of age. These are set out in the developmental scale of the assessment tool.

The developmental scale is used to assess the PCA needs of children under 16 years of age. It is an adjunct to the assessment report.

The developmental scale applies to clients who are under 16 years of age. In such cases, the developmental scale is used to weight the scores allowed on the scoring sheet for the applicable activities in the assessment report.

The purpose of the developmental scale is to determine eligibility for funding for children under 16 years of age for activities listed in the assessment report under Section 1 — Personal Care Activities. The ages listed in the column "Age of Child (years)" identify the minimum age at which the child becomes eligible for funding for an activity.

Occupational therapists should identify the column under which the child's age falls for each activity and review the guidelines for scoring PCA set out below the chart. If the child has a condition unrelated to the accident that affects his or her ability to perform the activities, the OT should adjust the scale to account for any developmental delays or disabilities. Adjustments should also be made based on the level at which the child was performing prior to the crash and when the child would likely have been able to perform an activity had the crash not occurred.

SECTION 1 — Personal Care Activities

Please comment on the child’s ability to perform the activities for which he or she may be eligible to receive funding.

Note

- if the child is younger than the age in the column, he or she is not eligible for funding for the activity and #3 in the “Not applicable” row should be circled.
- if the child was not performing the activity prior to the crash, he or she is not eligible for funding for the activity and #2 in the “Not applicable” row should be circled.

Supervision for Children

Supervision for children is only available if the child requires **extra** supervision beyond what is normal for his or her age and pre-crash medical condition. Overnight supervision is only available if it is medically required.

For example:

- a pre-school child would normally attend day care, but cannot due to his or her injuries. The parent or guardian must hire a specialized caregiver so that the parent or guardian is able to attend work. The expense of that specialized caregiver is eligible for coverage.
- a parent or guardian has another child to take to after-school activities, and would normally bring the injured child along but cannot due to the child’s injuries. The expense of the extra supervision required while the parent is attending to the needs of the other child is eligible for coverage.

