



## **CLBC WAITLIST POLICY**

### **INTENT:**

CLBC's Waitlist Policy outlines what individuals and families can expect from CLBC when they have received approval in principle for a funded individualized support plan but there is no current capacity to cover new or additional service costs. The intent of the policy is to address the needs of individuals eligible for service in an open and consistent manner within the financial capacity of CLBC.

The policy clarifies how individuals can ensure that their requests for funding are treated equitably and within what time frames they can expect to receive service. (The Practice Guidelines and Procedures that follow the policy outline the considerations used to determine priority on waitlists. They also establish a system for gathering information that can be used to project future requirements in support of CLBC's ongoing efforts to deliver quality services to individuals and families.)

### **POLICY**

The Waitlist Policy applies to eligible individuals whose requests for funded supports or services to meet their current needs have been approved in principle but where CLBC has insufficient funds to meet the requests. Individuals who may require services or supports more than two years in the future will be included in CLBC planning through the use of a Planning Registry.

The Waitlist Policy and Guidelines are to be followed for all waitlist decisions for children and adults including new funding, increased funding or access to funded 'spaces'.

Each Quality Services Office (QSO) maintains a waitlist for its geographic area and establishes a process to review requests and assign priority for services.

Individuals requesting support will be placed on the waitlist in order of priority based on assessed criteria: length of time waiting followed by specific individual requirements.

For all newly eligible children and adults as well as individuals currently on a regional waitlist, the date that service is requested is the date they are placed on a waitlist. (Families must be advised that services they might



receive in future would be subject to a plan being developed and approval of the funded supports in that plan. This allows for a comprehensive plan to be developed in priority order while ensuring that the families request has been documented.)

Over time, the goal is for each person on a waitlist to have a full plan.

*NOTE - The key factors for establishing priority among individuals are the length of time an individual or family has been waiting for services or supports, and confirmation that these supports are required either immediately or within the next two years. For purposes of planning, youth aged 17 -19, including Children in Care can be included on a Waitlist for adult supports and services.*

- An Individual Support Plan or similar planning format is the primary document used by Quality Service Offices to assign funding allocations. It includes a description of an individual's requirements, personal situation, and type of service requested, e.g., community inclusion activities, residential support, professional supports, or home or family supports. It can also provide an opportunity for an individual or family to describe what resources and capacity they have to manage if all or some elements of their plans are not immediately funded.
- Individuals may be waitlisted by different service areas as well, for example, day activities and respite. In determining allocations, Analysts will identify what supports are a priority for an individual and ensure that there is sufficient flexibility in the process to address the most current requirements. For example, if an individual originally requested respite services but over time that requirement has changed to day activities, this will not affect status on the waitlist.
- When individuals move from one community to another, they will not lose their status on a waitlist. However, the plan may need to be adjusted to reflect resources and opportunities available in the new community and the levels of funding may differ from regions to region

*NOTE - Individuals without families or a network of support may also require access to waitlisted services. In these circumstances it is expected that a community service provider or Facilitator could assist an individual in completing the necessary documentation such as results of psychological testing, medical or school reports, etc.*



### Respite Services:

- Families whose children are found eligible for the *Autism or At Home Programs* will not require plans to access either autism funding or At Home respite. Planning can be provided on request from the family to explore other generic support options and if additional CLBC supports are requested. These plan requests will be given equal consideration with other requests.
- Families who have requested and are already waitlisted for direct funding respite or agency respite programs whether for children with special needs or adults with developmental disabilities will not require a plan to access respite funding. Planning can be provided on request from an individual or family to explore other generic support options and if additional CLBC services are requested. These plan requests will be given equal consideration with other requests.

### Emergency Requests:

- Urgent or emergency situations will be managed OUTSIDE the waitlisting process based on the following criteria:
  1. Imminent and significant risk of serious physical harm to self or others, abuse or neglect;
  2. Death, illness, incapacity or loss of sole caregiver;
  3. Statutory or legal requirement, e.g., Court Orders, requirements of the Office of the Public Guardian and Trustee; actions taken as a 'designated agency'.

Specific funding to support an individual or family through a critical period may be approved on an exceptional basis but long-term commitment to levels of support will be reviewed as part of overall resource allocation and waitlist management. This ensures that the principles of fairness and responsiveness are maintained. Emergency funding is not intended to replace or undermine planning or efforts to ensure equity and consistency in resource allocation but only to address unavoidable crises.



## **ACCOUNTABILITIES**

- Facilitators will advise Quality Service Analysts of new requests for service to be entered on the waitlist.
- Quality Service Analysts will ensure that a request is documented and confirmed directly with an individual or family or with the Facilitator who may be able to assist them with alternative, interim plans.
- Facilitators will provide individuals and families with an overview of CLBC and explain how priorities for funded supports and service are established and what they can expect from CLBC in this process.
- Quality Service Managers or Analysts may contact an individual, family or Facilitator if they require additional information to make an informed decision.
- Individuals and families will be notified in writing of the status of their requests including those still under consideration within 30 days. Final confirmation of what requests have been funded and which have been waitlisted should follow as soon after as possible.
- Individuals and families may ask for a review of their status any time their needs or situation change.
- Confidentiality of individuals and families will be maintained but if Facilitators or Quality Service Analysts identify opportunities where families could plan together they may request consent from families to coordinate these activities.
- An annual Waitlist Summary Report will be completed outlining the process to date, information on how long people are waiting (minimum, maximum, average time), number of reviews, emerging trends and any recommendations for changes to policy and practice.

## **SPECIFIC CONSIDERATIONS**

Individuals or families may be asked to consider a number of factors or an interim plan that might affect their ability to manage if resources are not immediately available. (These are detailed in the Practice Guidelines) In some circumstances, if funds are available, this could include the option of minimal, targeted funding to sustain existing arrangements.



## **PLANNING REGISTRY**

- The registry is used to record requests from individuals who expect to require support from CLBC 25 to 60 months in advance of their readiness to receive services.
- The planning registry information assists CLBC with long term planning and resource allocation.

The registry includes information about the service requested, individual support needs; readiness date and category of support requested.



## **PRACTICE GUIDELINES: WAITLIST MANAGEMENT**

Using waitlists effectively is an essential element of CLBC's planning and funding process, supporting both person-centred practice and the development and maintenance of a responsive, coordinated system for resource allocation. The following guidelines identify factors Quality Service Analysts take into account when determining waitlist status.

### **Key Elements of Waitlisting Process**

- All funding requests related to an approved plan must be dated and documented in PARIS on an individual's electronic record and on the Quality Service Office's Comprehensive Waitlist file.
- Requests for service or support *within the next 24 months* will be considered 'active'; services being requested for the future *beyond 24 months* will be considered 'projected need' and documented on the Planning Registry
- The amount of time an individual or family has been waiting for approved funded supports will be the determining factor when resources become available to address outstanding requests for funded supports.
- CLBC does not use a 'ranking' system for requests with the exception of time-waiting but there are other considerations that should be taken into account when reviewing the requirements of all individuals or families who have been waiting for services for the same length of time. These relate to both disability-related needs of an individual and the capacity of an individual or family to access alternative resources or manage with current ones. These can be 'weighted' to the extent that a combination of factors should indicate differing levels of potential opportunity or risk for an individual or family.
- Professional judgment and input from others familiar with either the individual and/or available resources are important aspects of decision-making regarding waitlist management.



### Considerations:

The overarching factor when determining allocation of resources for individuals on a waitlist is time –waiting. However, there may be situations when individuals with similar requirements will have been waiting for the same period of time as others on the waitlist. In these circumstances, the following considerations should guide decision-making.

### **INDIVIDUAL DISABILITY-RELATED NEEDS and FAMILY REQUIREMENTS**

- Is an individual at risk due to behavioral issues?
- Is an individual at risk due to declining mental health or substance abuse?
- Is the physical condition or health of an individual or their caregiver deteriorating?
- Does an individual have complex medical needs requiring specialized supports, medications, therapies, etc.?
- Has an individual's access to funded or generic supports and services recently been reduced?
- Does an individual's current living situation seriously limit his or her ability to participate in community activities?
- Is an individual's current living situation unsustainable over the immediate to long-term?
- Is an individual at risk of losing skills or independence, e.g. graduating from high school and/or living at home with no alternative daily activity?
- Is there a significant opportunity to increase current skills and enhance independence?
- Is there potential for abuse or neglect?
- Is an individual living in a safe and healthy environment?
- Is an individual ready and able to accept the services or supports originally identified in his or her plan?



## **INDIVIDUAL and FAMILY STRENGTHS and CAPACITIES**

- What capacity does the family have to continue supporting an individual without full/partial implementation of the original plan?
- Are there stressors in the family or caregiving environment that increase the need for alternative supports? These may include but are not limited to:
  1. requirements of the family member with a developmental disability;
  2. significant support requirements of other individuals in the home;
  3. aging parents or other caregivers;
  4. limited time or capacity to meet the requirements of the family member with a developmental disability;
  5. unstable or volatile family dynamics;
  6. other problems that might affect a family's capacity to manage without support such as illness, death or loss of job?
- Does an individual or family have a responsive network of support outside the immediate family?
- Would some support now reduce the likelihood of a crisis and/or the need for more involved services in the near future?
- Does an individual use generic and natural supports in the community?
- Are there effective generic community services involved or available to an individual such as support groups, recreation and social clubs or, churches?
- Are there particular areas of an individual's or family's life that are effectively meeting some of an individual's needs and could be built upon or enhanced, e.g., respite from a relative?
- Are there opportunities for cost-sharing or partnership with other agencies, areas of government?
- Is there potential for an alternative plan?
- Is there potential for several individuals and families (with their consent) to pool some resources towards meeting common elements of their respective plans?
- Is an individual or family ready and able to use proposed supports and services?

The considerations listed above are not exhaustive and each individual's situation is unique. Taken as a whole, however, they provide key information upon which Quality Service Analysts can make informed decisions on the most



effective and fair allocation of resources to individuals on waitlists. By assessing these additional factors in the context of time waiting, Quality Service Analysts working together in a region can ensure that the same lens is used for all individuals and families requesting funded supports.

The process also provides an opportunity to identify individuals who have been waiting for services for a shorter period of time but who might benefit from a targeted sharing of supports with individuals who have been assigned higher priority based on time-waiting.

## **PROCEDURES: WAITLIST MANAGEMENT**

### **Initial Referral to Quality Service Analyst**

1. A Quality Service Analyst will advise the individual or family of the status of a funding request in their plan within 30 days. Final confirmation of what supports or services have been approved and which waitlisted if not available within this time period should follow as soon as possible.
2. If funds are not available to meet any or all elements of the plan, the individual will be advised that they have been placed on a waitlist and the effective date.
3. The Analyst will make a note regarding their decision in PARIS based on the information provided in the Individual Support Plan and the date of approval and date for referral for funded supports or services.
4. The Analyst will also document the following information on the 'drop-down' Waitlist screen for each individual:
  - Types of supports and services being requested by defined categories
  - Geographic location in which supports would need to be located
  - Key elements of disability –related needs
  - Relevant information related to the 'Considerations' outlined in the Practice Guidelines (checklist and narrative sections to be used)
  - Key information on significant contacts and involved professionals.
  - Interim plan, if applicable
  - BF function to determine whether new options may be available



5. Individual Waitlist data will automatically be 'rolled up' into an overall waitlist data base for each Quality Service office. Waitlists can also be broken into specific categories of services or supports such as residential, professional support, ,day activities including individual, group and employment support, community inclusion, direct family support, home support, etc.

### Review Process

1. Analysts in each region will meet every six months to review waitlists and update and share relevant information.
2. Where appropriate and agreed to by an individual or family, other professionals such as physicians, nurses, psychologists or mental health staff may participate in the review process to provide clarifying information.
3. Analysts will use the review process to identify potential opportunities to meet the support needs of individuals. These opportunities may be related to time – waiting; changing plans of individuals; increased funding or capacity; new resource or community options; potential for innovative use of existing network.
4. If there are new opportunities or options that individuals or families might wish to consider, an Analyst will contact them. If requested, a Facilitator can assist with an individual or family with alternative planning or discussion with service providers. They could also help the individual explore increased use of family resources, informal opportunities for support and generic community resources.
5. Individuals and families will be notified of the outcome of the bi-annual reviews.
6. Community Planning and Development managers will manage the development of plans balancing the requirements of those on the waitlist who may soon have access to supports, individuals participating in the Residential Options Review who require specific plans and individuals for whom immediate funding is not available but who could benefit from access to generic supports and community access.



### Urgent or Emergency Allocations

- Urgent or emergency allocations of resources will only be made on the basis of the criteria stipulated in the 'Waitlist Policy'.
- A Quality Service Manager must approve each urgent or emergency request.
- Individuals and families will be advised in writing that this allocation is being approved on an exceptional basis to ensure the immediate health, safety and well-being of an individual. Funding will be reviewed after the immediate urgent or emergency situation has stabilized to confirm longer-term planning and disability-related needs, alternative mechanisms for support and the capacity for continued funding.
- Individuals will also be advised that a Facilitator may be contacting them to revise their original plan, if required.
- Allocations made under these criteria will be flagged on an individual's file under Waitlist Information and will be BF'd for review using the standard waitlist practice guidelines and decision-making process.

### **PLANNING REGISTRY**

1. When an individual or family identifies a support or service that will be required more than 24 months in the future, their information will be entered on the Planning Registry. The QSA will open an individual file in PARIS but the full plan may not be completed as circumstances can change substantially in 24 months. The intent is to have an initial plan as complete as possible so that revisions can be made quite easily. This is, of course, dependent on available staff time.
2. Individuals on the Planning Registry will be moved to 'Active Status' on the regional waitlist 24 months prior to the identified supports being required.
3. When an individual or family is placed on the 'Active' waitlist, the Analyst will either contact them directly to request a completed or updated plan if planning has occurred independently of CLBC or advise the individual or family that a Facilitator can assist them.
4. Information on the Planning Registry will be a critical element of CLBC's financial and resource planning so individuals' and families' requirements should be documented to the extent possible at the time of referral.