



Rural Palliative Care In-Home Funding Program

Information for Clients and Families

About the program

The Rural Palliative Care In-Home Funding (RPIHF) Program provides special, limited funding that can be accessed by rural palliative clients and families when they require additional support to remain at home at end-of-life.

This funding covers the cost of direct care in the home including personal care, respite care, or nursing care. These funds can be accessed when there is an assessed unmet need, home care services have been maximized, other sources of service and funding have been exhausted, and the additional care will safely keep the client at home longer.

This program is unique. The client and family have the flexibility to choose their own care providers, and direct and schedule the care they require.

The client and family are responsible for recruiting and hiring the care providers, and orienting them to the care needed.

The client and family designates someone they trust to be the person responsible for submitting the caregiver invoices to Alberta Health Services (AHS) receiving payment and paying the care providers. This person becomes the payee of the program.

Who qualifies for the program?

A rural client who is at end-of-life that:

- resides in Alberta and has applied for Alberta Healthcare,
- wishes to stay at home,
- has been assessed and AHS Home Care services have been maximized/exhausted,
- can stay at home safely with additional direct care,
- has exhausted all sources of service and funding (including home care, private insurance and compassionate benefits).

Who can be hired as a care provider?

This funding covers the cost of direct care in the home including personal care assistance, respite for family caregivers, or nursing care.

Care can be provided by formal care providers such as healthcare aides, licenced practical nurses, or registered nurses who are self-employed or work for an agency.

It may also be provided by informal caregivers, such as neighbours or friends, who may be able to support/meet the client's needs.



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How are payments managed?

The client and family will designate an individual to manage payments. This person then becomes the payee.

The Payee:

- Receives signed invoices from the care providers, totals the hours worked, and submits invoices to AHS,
- Receives funds from AHS and pays the care provider in a timely fashion, including after the client's death,
- Is someone trustworthy and able to fulfill the responsibilities of being the payee,
- Provides AHS with their banking information if they choose electronic fund transfer,
- Obtains receipt of proof of payment and keeps invoices and receipts for auditing purposes.

How does it work?

The client/ family:

1. Are agreeable to accept responsibilities of the AHS Rural Palliative Care In-Home Funding Agreement and sign the document.
2. Collaborate with home care case manager and/or the palliative care team or designate to make a care plan.
3. Choose a payee who will submit the care provider's invoices to AHS and pay the care providers with the funding received.
4. Recruit the care provider, give them the care provider package, and enter into a contract with them.
5. Notify the home care case manager and/or palliative care team or designate that a care provider has been contracted.
6. Orient the care provider to the client's care needs and monitor the client's care.
7. Sign the care provider invoices confirming the number of hours of care provided.

How to access the program?

To gain access to this program, contact your home care case manager and/or palliative care team.