

Section	Policy
40	44.120.30

Section Title: Benefits Administration – *Medical Aid*
Subject: Support for Daily Living
Effective Date: For all decisions on or after March 1, 2014.

A. POLICY PURPOSE

This policy outlines the general criteria for providing injured workers with assistance to engage in the activities required for daily living and summarizes the forms of assistance the WCB may provide.

BACKGROUND

Under *The Workers Compensation Act*, the WCB may provide assistance to an injured worker for a period of time determined by the WCB when the worker "requires assistance to reduce or remove the effect of a handicap" or "requires assistance in the activities of daily living" as a result of a compensable injury.

GENERAL CRITERIA FOR ASSISTANCE

Decisions about whether to provide assistance under this policy, as well as about the type, level and duration of assistance, are made on a case-by-case basis. However, all decisions are guided by a number of general criteria:

- The compensable injury must have reduced the worker's ability to engage in the activities required for daily living, which include but are not limited to:
 - personal hygiene;
 - toilet functions; ○ grooming; ○ dressing; ○ preparing food; ○ eating; ○ housekeeping; ○ child/other dependent care; ○ safely accessing the primary residence and portions of the primary residence; and ○ routine travel outside the home.
- The assistance should compensate in the most cost-effective way possible for additional costs the worker incurs in engaging in the activities required for daily living that he/she engaged in prior to the injury, where those costs arise because of the injury.
- The assistance should not impede progress in other areas of the worker's rehabilitation, including medical recovery, vocational rehabilitation, and return to work.
- The WCB is not required to compensate for costs for which it has not provided prior written approval.
- The type, level and duration of assistance provided is based on regular, standardized evaluations of the injured worker's needs and abilities, and may be adjusted in keeping with the results of these evaluations.

FORMS OF ASSISTANCE

1. Personal Care

Assistance may be provided for personal care attendants to provide:

- assistance with hygiene, grooming, feeding, dressing, and toilet functions;
- preparation of food and routine housekeeping;
- minor health care, such as changing dressings and administering medication;

- help with personal mobility, such as transferring from a bed to a chair or transferring in and out of a vehicle;
- cognitive queuing; or
- guidance and safety outside the home, such as on routine shopping trips or medical appointments.

Assistance may also be provided for the purchase of equipment or appliances that help meet these aims.

2. Independent Living

Assistance may be provided for services that allow an injured worker to live safely and independently in his or her home, including lawn care, snow shoveling, and other tasks that help meet this aim.

3. Child Care/Other Dependant Care

Assistance may be provided for the care of children or other dependants when the worker incurs additional costs in providing this care as a result of the injury.

4. Home Modifications

Assistance may be provided for modifications to allow an injured worker to safely access the primary residence and parts of the residence that he or she needs to access as part of the requirements of daily living.

5. Vehicle Modifications

Assistance may be provided for a modified vehicle to allow an injured worker to safely operate a vehicle as part of the requirements of daily living.

6. Clothing and Footwear

Assistance may be provided for additional costs associated with the purchase of clothing and footwear, including where footwear or other special clothing is required or must be replaced more frequently as a result of the injury.

7. Payment of Public Guardian and Trustee or Committee Fees

The WCB may pay the fees charged to the worker by the Public Guardian and Trustee or Committee for managing the worker's affairs when the following conditions are met:

- The worker lacks the capacity to make financial or personal decisions for himself or herself due to a compensable injury or disease; and
- The Public Guardian and Trustee or Committee is court-appointed to manage the worker's affairs.

Fees that are reasonable and appropriate for the filing of the application and initial inventory, and the passing of accounts may be reimbursed.

8. Exceptional Circumstances

In exceptional circumstances the WCB may provide assistance beyond what is outlined in this policy. This includes but is not limited to situations where a worker has a severe and permanent injury, such as paraplegia / quadriplegia, a significant brain injury, serious mental health difficulties, major limb

amputations, or a similar injury that necessitates special assistance to reduce the effects of the handicap. All such assistance is provided on a case-by-case basis with the approval of the Director or designate.

B. REFERENCES

The Workers Compensation Act, sections 27 and 37

WCB Policy 44.120.10, *Medical Aid*

History:

1. Policy 44.120.30, *Attendants' Allowance*: Policy revised and issued on June 19, 1991, by Board Order 9/91. Allowances increased effective May 1, 1999, by Board Order 19/99.
2. Policy 44.120.160, *Residence Renovation Costs*: Board Order 115/84 rewritten as policy effective August 30, 1984. History added April 5, 1994.
3. Policy 44.120.200, *Clothing Allowance*: Policy established June 21, 1990, by Board Order 16/90, effective September 1, 1990. Allowance increased effective May 1, 1999, by Board Order 20/99.
4. Policy 44.120.30, *Support for Daily Living*: Policy established by Board Order 15/00 effective for all decisions on or after October 1, 2000. Board Order 15/00 rescinded the following policies effective October 1, 2000: 44.120.30, *Attendants Allowance*; 44.120.160, *Resident Renovation Costs*; 44.120.200, *Clothing Allowance*.
5. Policy 44.120.30, *Support for Daily Living* – revised to clarify that annual indexing date for all allowance amounts in the policy is October 1.
6. Policy 44.120.30, *Support for Daily Living* – revised by Board Order 19/02 effective October 1, 2000, to clarify when policy applies to “injured” workers and when it applies to “severely injured” workers; and to substitute maximum hourly rate paid to private healthcare providers with provision to enter into preferred provider agreements with major healthcare providers.
7. In Section 1.A. the word illnesses has been changed to illness and Section D - #03 has been changed to #3.
8. Updated July 1, 2005 – Bill 41 effective July 6, 2001, redefined “spouse” and added a separate definition of “common-law partner”. The change in the policy adds the phrase “or common-law partner” after “spouse”.
9. Minor formatting changes were made to the policy June 27, 2012.
10. Policy 44.120.30, *Support for Daily Living*, revised to clarify parameters, criteria and eligibility effective March 1, 2014 by Board Order No. 36/13 on December 19, 2013.
11. Revised by Board Order No. 04/15 on January 22, 2015, to clarify the application of the effective date.
12. Revised by Board Order 40/19 on November 28, 2019 to clarify that the WCB may reimburse the Public Guardian and Trustee or Committee fee incurred as a result of a compensable injury.
13. In November 2020, the history section was reduced by removing entries related to allowance updates from a previous policy. Minor formatting changes were also made to the policy.
14. In March 2021, the effective date was changed to “For all decisions on or after March 1, 2014” from “This Policy applies to all decisions made on or after March 1, 2014, with respect to entitlement on or after March 1, 2014. Where a decision on entitlement that was made prior to March 1, 2014, is reconsidered on or after that date, entitlement is based on the policy in effect at the time of the initial decision prior to March 1, 2014”. The previous effective date provided clarity regarding which policy should apply to a particular decision. A 5 year history of clothing and footwear allowances was added to section C of the Administrative Guidelines.
15. In December 2022, the policy was updated to reflect the amendment and renumbering of section 27 by *The Workers Compensation Amendment Act* (commonly referred to as Bill 18).
16. Policy was revised by Board Order No. 35/24 on October 3, 2024 to align with revisions to the Act, clarify that support for daily living is a specific type of medical aid, and to remove the

administrative guidelines from the policy. This version was removed from the policy manual and archived.

C. ADMINISTRATIVE GUIDELINES

General Principles

These guidelines address the services and items most commonly provided under the policy. Assistance may be provided for other services and items under the Exceptional Circumstances clause of the policy.

The WCB strives to provide appropriate support to injured workers who require assistance with the activities required for daily living.

These guidelines build upon the general criteria and parameters outlined in the Support for Daily Living policy to provide more specific guidance on decision-making.

To ensure assistance meets workers' needs, the WCB conducts standardized assessments to determine the type, level and duration of assistance to be provided. The WCB also monitors the worker's medical condition and other circumstances on a regular basis to ensure assistance is adjusted as required.

Assistance provided under the Support for Daily Living policy is intended to compensate for additional costs a worker may incur as a result of the compensable injury. Unless authorized under the Exceptional Circumstances clause, needs that arise from other causes, such as aging or non-compensable injuries and illnesses, do not affect the assistance provided under the policy.

A. Personal Care and Independent Living Assistance

Eligibility

Eligibility for assistance under the Personal Care and Independent Living sections of the policy, as well as the type, level and duration of assistance, are based on:

- a. The General Criteria outlined in the policy; and
- b. Needs assessments conducted by the WCB (generally by a Rehabilitation Specialist or Case Manager) with the participation of the worker.

To adjust the assistance as required in response to changes in the injured worker's condition or other circumstances, ongoing needs assessments are conducted on a regular basis (generally every 4 to 6 weeks, or annually once the condition has stabilized)

Parameters of Personal Care Assistance

- Unless otherwise authorized under the Exceptional Circumstances clause of the policy, the activities for which assistance is provided are those identified under the Personal Care Assistance section of the policy.
- Where a worker's injury or other circumstances are such that a personal care home is the most cost-effective way to provide appropriate care, the WCB will provide the worker with an allowance equivalent to the rate of a mid-range personal care home, which the worker may use to pay for care in a personal care home or for care in his/her private residence.

Parameters of Independent Living Assistance

- Unless otherwise authorized under the Exceptional Circumstances clause of the policy, the activities for which assistance is provided are those identified under the Independent Living section of the policy.

Assistance is provided for tasks that support the activities of daily living, which does not include property maintenance and repairs such as painting and renovations.

- Assistance for snow removal is limited to the area that is required for safe access to the primary residence.
- Assistance for grass cutting generally encompasses the whole of the primary residential property (typically a front lawn and/or back yard). However, where the property exceeds the size of the typical residential property, assistance may be limited to an area similar in size to a typical property.

Administering Assistance

The level of Personal Care Assistance and Independent Living Assistance is based on grids developed by the WCB for this purpose, and one of two methods is generally used for administering the assistance:

1. Where assistance is short-term, costs are reimbursed upon submission of receipts, provided the costs are approved by the WCB under the applicable criteria.
2. Where assistance is long-term, an allowance is provided to the worker to pay providers.

B. Child Care/Other Dependant Care

Eligibility

Eligibility for assistance with Child Care/Other Dependant Care as well as the level and duration of assistance are based on:

- a. The general criteria outlined in the policy.
- b. Needs assessments conducted by the WCB (generally by a Rehabilitation Specialist or Case Manager) with the participation of the worker.
- c. Whether there has been an increase in child care/other dependant care costs as a direct result of the compensable injury.

Parameters

The amount of assistance provided is based on the current market rate for the type of care required.

Administering Assistance

One of two methods is generally used for administering the assistance:

Where assistance is short-term, costs are reimbursed upon submission of receipts, provided the costs are approved by the WCB under the applicable criteria.

Where assistance is long-term, an allowance is provided to the worker to pay providers.

C. Clothing and Footwear

Eligibility

Eligibility for assistance with clothing and footwear is based on whether the worker incurs additional clothing and footwear costs as a result of the compensable injury.

Parameters

Assistance will be provided up to a maximum amount established by the WCB, based on standard clothing and footwear costs and the nature of the injury. The maximum clothing and footwear amounts payable are displayed below.

MAXIMUM ANNUAL CLOTHING AND FOOTWEAR ALLOWANCES

	2025	2024	2023	2022	2021
Clothing Allowance	\$	\$	\$	\$	\$
Upper Body	399	394	386	353	343
Wheelchair	802	791	775	708	688
Clothing and Footwear Allowance	\$	\$	\$	\$	\$
Lower Body	399	394	386	353	343

Effective January 1 in each year.

A historical summary of clothing and footwear allowances can be obtained by contacting policy@wcb.mb.ca.

Administering Assistance

Where assistance is required on a one-time or short term basis, such as when a worker requires a different size of clothing in order to wear a cast, the WCB will reimburse the worker upon submission of receipts provided the costs are approved by the WCB under the applicable criteria.

Where assistance is required on a long-term basis, such as when special clothing or footwear is required or needs to be replaced more frequently because the worker wears a prosthetic/orthotic device or uses a mobility device such as crutches or a wheelchair, the WCB will provide an allowance.

D. Home Modifications

Eligibility

Eligibility for home modification assistance is based on:

- The general criteria outlined in the policy.
- Needs assessments conducted by the WCB (generally by a Rehabilitation Specialist) with the participation of the worker.
- A complete home assessment.

Eligibility is generally limited to workers with permanent injuries, though limited assistance may be provided in cases of temporary injuries, such as with the construction of a wheelchair ramp.

Parameters

Modifications are intended to allow the worker to safely access the primary residence and parts of the residence that he or she needs to access as part of the requirements of daily living.

The WCB will consider providing assistance for the following, but such assistance is only provided upon approval of the Director:

- modifications for accessing areas of the home generally considered non-essential for activities of daily living, such as the basement;
- modifications to a secondary residence, such as a cottage; and
- modifying or building a garage.

In determining eligibility for such assistance, the Director will consider a number of factors including the use to which the worker put these areas of the home or secondary residence prior to the injury, the frequency of that use, and the amount of use that the worker can reasonably obtain from these areas or secondary residence if modifications are made.

The WCB will consider providing assistance for modifications to a second or third residence subsequent to the modifications to the workers' residence at the time of the injury if the worker relocates. Such assistance will be on a declining scale and is only provided upon approval of the Director.

In determining eligibility for such assistance, the Director will consider a number of factors including the length of time between the original modification and the request for a subsequent modification and the reason for the worker's move from one residence to another.

Assistance will be provided for reasonable costs using mid-range materials. If the worker wishes to use higher cost materials, he or she may do so and pay the difference between this and the cost of mid-range materials.

Where existing materials that will be affected by the required modifications are near the end of their useful life, the WCB will pay the costs beyond what the worker would have paid to have those materials repaired or replaced.

Where materials in the home wear out more quickly because of a compensable injury, the WCB will pay a portion of the replacement costs, based on average useful life of the materials.

Assistance is not provided for modifications to a residence beyond the third residence occupied by the worker following the injury.

Assistance is not provided for the costs of bringing an existing home up to the standards of the Building Code, the costs of having modifications removed or returning a house to its premodified state, or the costs of surveys, building permits, legal fees, real estate fees, and increased property taxes resulting from modifications made to the home.

Administering Assistance

When the WCB has determined the worker is eligible for home modification assistance and the cost of the assistance is over \$5,000, the worker must provide the WCB with quotations for the project from three contractors.

The WCB will determine the reasonable cost of the modifications based on those three quotations, provided they meet the scope of the modifications medically required by the injured worker, and provide funds to the worker accordingly.

The worker will be responsible for hiring and paying the contractor.

E. Vehicle Modifications

Eligibility

Assistance for vehicle modifications is provided only in cases of permanent injury, and is based on an assessment of whether the worker can safely operate an unmodified vehicle.

Parameters

Where assistance for vehicle modifications is provided, the WCB initially considers whether a vehicle owned by the worker can be appropriately modified.

If the worker's vehicle cannot be appropriately modified because of its condition, make or other factors, the WCB may provide assistance to purchase a vehicle that is appropriate for modification and to have that vehicle modified.

In these cases, the WCB will determine the most cost-effective type of vehicle that can be purchased and appropriately modified. Should the worker choose to purchase a different appropriate vehicle or vehicle enhancements, any additional costs are the responsibility of the worker.

The worker will be required to contribute a reasonable amount towards the purchase price of the new vehicle. Factors considered in determining the amount to be contributed by the worker include the fair market value of the worker's existing vehicle and whether the condition of that vehicle is such that the worker would have purchased a new vehicle regardless of the injury. The WCB will contribute the difference between the amount required to purchase and modify a suitable vehicle and:

- the amount that the WCB determines that the worker could obtain from the sale of his/her existing vehicle; plus
- the amount, as established by the WCB, that the worker would have paid to purchase a vehicle regardless of the injury.

Once the useful life of a modified vehicle has ended (generally the earlier of seven years or 300,000 km), the WCB will provide assistance for modification of a subsequent vehicle.

The WCB will contribute the difference between the amount required to purchase and modify a suitable subsequent vehicle and:

- the amount that the WCB determines that the worker could obtain from the sale of the existing modified vehicle; plus
- the amount the worker would have paid to purchase a vehicle regardless of the injury.

Administering Assistance

Once the amount of the assistance is determined, the WCB will provide the worker with funds for the purchase.

The worker is responsible for regular vehicle maintenance and repairs. Maintenance and repair of modification equipment is generally the responsibility of the WCB, unless required because of willful damage or neglect.

F. Payment of Public Guardian and Trustee or Committee Fees

If a worker is incapable of making financial or personal decisions due to the effects of a

compensable injury or disease, that worker needs someone else with legal authority to make decisions for them. The court may appoint the Public Guardian and Trustee or a Committee to make decisions for this worker. The WCB reimburses the worker or pays the fees for filing the application and initial inventory, and the passing of accounts.

G. *Exceptional Circumstances*

Assistance beyond what is outlined in this policy may include support for specialty equipment or devices that facilitate the worker's adaptation to the permanent effects of the workplace injury.

This includes assistance for hobbies and recreation.

All such assistance must be pre-approved by the Director.

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