

Section	Policy
40	44.120.30.01

**Section Title:** Benefits Administration - Medical Aid  
**Subject:** Support for Daily Living  
**Effective Date:** Decisions made on or after October 1, 2000 to February 28, 2014

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## **POLICY PURPOSE**

This policy co-ordinates the WCB's approach to supporting workers' participation in daily workplace and personal activities after an accident. The purpose is to assist, and to allow, workers to be as independent as possible. This policy recognizes that after an injury, workers can experience additional costs to obtain assistance in performing the day to day tasks of living and may also require additional devices or products.

The policy is organized as follows:

### **I. POLICY AND GUIDELINES**

- A. DEFINITIONS
- B. ELIGIBILITY
- C. PERSONAL CARE ATTENDANTS
- D. INDEPENDENT LIVING
- E. CHILD CARE/OTHER DEPENDANT CARE
- F. HOME MODIFICATIONS
- G. VEHICLE MODIFICATIONS
- H. CLOTHING

### **II. REFERENCES**

### **III. HISTORY**

#### **I. POLICY AND GUIDELINES**

##### **A. Definitions**

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#### **1. Workers**

An injured worker is a person who suffers an injury as a result of a work related accident and whose claim for compensation benefits has been accepted by the WCB.

A severely injured worker is a person who requires temporary or permanent assistance with communication, mobility or self-care as a result of the workplace accident. While the WCB will consider each worker's case to determine whether or not the worker should be considered severely injured under this policy, examples of severely injured workers include those who experience the following:

- Major limb amputations;
- Significant brain injuries;
- Severe multiple fractures;
- Significant ongoing mental health difficulties;
- the final stages of a terminal occupational illness;

- ❑ paraplegia / quadriplegia;
- ❑ severe respiratory condition;
- ❑ significant sight impairment; or
- ❑ wheelchair confinement.

**2. Support for daily living**

The WCB consider support for daily living as the set of products and services that help minimize the impact of an injury. The WCB uses the term "support" to indicate any service or financial benefit provided by the WCB.

**3. Activities for daily living**

The WCB consider activities for daily living as actions, services or products that assist a worker to perform basic personal tasks or to live independently.

**4. Independent Living**

The WCB considers independent living as support for daily maintenance and housekeeping at the worker’s residence.

**5. Indexing**

Payment amounts in this policy are determined by the WCB and will be indexed annually on October 1 by one of three methods:

- ❑ the Consumer Price Index (CPI) as defined under Section 48(1) of *The Workers Compensation Act*;
- ❑ the Industrial Average Wage (IAW) as defined under Section 47(10) of *The Workers Compensation Act*;
- ❑ the increase in the product’s market value as determined by the WCB.

**6. Payment Method**

Payment methods for services and products are described in each subject area of this policy. In general, the WCB may determine one or more of methods for making payments:

- ❑ direct payment by the WCB to the service provider or product supplier;
- ❑ a monthly or annual allowance or advance to the worker;
- ❑ reimbursement of actual expenses paid by the worker.

**B. Eligibility**

**1. Method**

In each case, the WCB examines all the evidence about the worker’s injury in order to determine whether the worker, in the WCB’s opinion, reasonably needs the support, service or product.

**2. Exceptional Cases**

Where unique circumstances arise, the worker may be eligible for additional or alternative support services or products as authorized by a WCB Director in accordance with the financial authority levels established by the WCB.

## C. Personal Care Attendants

### Purpose:

Financial support for personal care attendants may be paid by the WCB where a serious compensable injury or disability creates a need for attendant services. The amount of financial support depends on the reasonable level of care the individual needs. The level of care can be modified according to the worker's changing needs.

### Policy:

- 1. Attendant Services** Attendants provide personal care services to assist injured or severely injured workers in dealing with the following tasks: hygiene, safety and security, grooming, attendant/proctor care, feeding, food preparation, transfer assistance, toilet, medical treatments, provision of medical and non-medical equipment and professional care (e.g., nursing and healthcare aid services).
  - 2. Eligibility** The WCB may pay support for personal care when a worker needs assistance to live at home. Financial support for attendant care will be based on the cost to provide a reasonable level of care required by the worker's injury. The WCB will determine the level of care required on a case-by-case basis.
  - 3. Level of Care** The WCB will assess various factors in determining a reasonable level of care. These factors include, but are not limited to, the following:
    - the number of attendant care hours required;
    - the number of attendants necessary to provide a reasonable level of care;
    - the short and long-term needs of the injured worker;
    - the knowledge and skill level required of the attendant to provide a reasonable level of care.
  - 4. Attendants** Attendants can be professional healthcare providers (e.g. nurses), private healthcare attendants or family members.
- Family Members as Attendants** Family member attendants must be able to provide care at a skill level equivalent to private attendants in order to qualify for financial support. A WCB appointed health care professional will determine whether the family member can provide care at the required skill level.

One or more family members may qualify for financial support.

The combined total hours of family member attendant care must not exceed 56 hours per week. For example, if there are 2 family member attendants, the sum of the number of attendant care hours they provide cannot be greater than 56 hours per week. The WCB will provide financial support for private attendant care if there are any remaining attendant care hours required to meet the assessed level of care determined by the WCB.

Where the number of attendants required by the assessment is more than the family can provide, the WCB will provide private attendant care up to the assessed level of care.

Family members will not be required to demonstrate wage loss in order to qualify.

Support for family member attendants will be paid at a rate determined by the WCB and indexed annually by one of the three methods specified earlier.

**Amounts for Family Member Attendants**

The allowance amount will reflect the following:

- the number of hours of care assessed up to a maximum of 56 hours/week; and
- the hourly rate established by the WCB.

**Respite Care**

A family member who provides attendant care to a severely injured worker may be eligible for respite. During a respite period, the WCB may pay for private attendant care.

**Interruption of Service**

In order to ensure continuity of service by the same attendant, a severely injured worker and, in exceptional circumstances, an injured worker entering a health care facility for a period up to two months may continue to receive financial support for attendant care at the same level as prior to the interruption. The allowance may be paid to cover private attendants or family members who are considered attendants.

For the allowance to continue, a private healthcare provider must provide a written promise that the same attendant will

- continue to provide services to the worker during the worker's stay in the health care facility if it is reasonably possible to provide such services; and
- continue to provide services to the worker following discharge from the health care facility.

**Monitor Level of Care**

The WCB will monitor and evaluate the level of care provided to the worker by private attendants or family members. The WCB will refuse to continue support for a particular attendant's services if, in the WCB's opinion, the level of care is inadequate.

**Allowance Amounts**

The WCB may establish maximum hourly rates it will pay for personal care provided by private attendants and healthcare organizations and may amend the rates from time to time to ensure that the services provided are cost effective and reasonably reflect the market value for such services. This may include negotiating preferred provider service contracts with major suppliers.

**Guidelines:**

**1. Current Amounts**

The WCB will cover the costs of providing attendant care at the level described in the following table:

<b>IF care is provided by a...</b>	<b>THEN hourly fee is</b>
Family member	\$8.31 /hr. eff. Oct 1, 2002 \$8.41 /hr. eff. Oct.1, 2003 \$8.70 /hr. eff. Oct. 1, 2004 \$9.03 /hr. eff. Oct. 1, 2005 \$9.26 /hr. eff. Oct. 1, 2006 \$9.58 /hr. eff. Oct. 1, 2007 \$9.95 /hr. eff. Oct. 1, 2008 \$10.18/hr. eff Oct. 1, 2009 \$10.41/hr. eff Oct. 1, 2010 \$10.72/hr. eff Oct. 1, 2011 \$10.93/hr. eff Oct. 1, 2012 \$11.17/hr. eff Oct. 1, 2013

**2. Payment Method**

The payment method will be a direct payment to the service provider or an allowance to the worker. The WCB may determine to whom the payment should reasonably be made in the particular circumstances.

**3. Training**

Where personal care will be provided by family members, if necessary, the WCB may consider training for family members to obtain the necessary skills to care for the worker (e.g., basic first aid, CPR, transfers, dressing changes, etc).

**4. Respite**

When considering respite for family members who care for severely injured workers, the WCB will do a respite assessment. The WCB will generally follow the provincial home care guidelines. The two options for respite under the provincial guidelines are:

1. For the client to be placed in a personal care home, based on space availability, three to four times per year for one to two weeks at a time.
2. For respite in the home, 16 hours per week is allowed.

**D. Independent Living****Purpose:**

The WCB recognizes that a worker may face an increased safety risk if day-to-day housekeeping or maintenance of the worker's residence (e.g., snow removal, lawn care, general home repair) is not kept up. In many cases, it may be impossible to perform such tasks after the accident. Although family members often assist workers in performing these tasks, it is not always possible for family resources to provide extended periods of additional maintenance or housekeeping services.

**Policy:**

- 1. Type of Services** Includes an allowance for day-to-day maintenance and housekeeping at the worker's residence (e.g., snow removal, lawn care, general home repair, housekeeping, laundry, etc.).
- 2. Severely Injured Workers**

The WCB will provide financial support for independent living to severely injured workers that reflects the reasonable level of need for the worker.

For severely injured workers, the WCB will provide support for independent living for as long as the compensable injury prevents day-to-day maintenance and housekeeping of the worker's residence.
- 3. Injured Workers**

The WCB may provide injured workers support for independent living for a maximum of six months and at a level established by the WCB if the following conditions are met:

  - The worker does not have any family resources to provide the service; and,
  - Medical evidence shows that it is unreasonable for the injured worker to perform day-to-day maintenance or housekeeping tasks.
- 4. Arrangements**

Workers are expected to make their own arrangements to obtain the services that will enhance independent living; however, in the event that private arrangements can not be made, the WCB may contact bonded service providers.

**Guidelines:****1. Current Amounts**

<b>For injured workers:</b>
A maximum of \$204.00 per month effective October 1, 2001
A maximum of \$208.00 per month effective October 1, 2002
A maximum of \$211.00 per month effective October 1, 2003
A maximum of \$218.00 per month effective October 1, 2004
A maximum of \$226.00 per month effective October 1, 2005
A maximum of \$232.00 per month effective October 1, 2006
A maximum of \$240.00 per month effective October 1, 2007
A maximum of \$249.00 per month effective October 1, 2008
A maximum of \$255.00 per month effective October 1, 2009
A maximum of \$261.00 per month effective October 1, 2010
A maximum of \$269.00 per month effective October 1, 2011
A maximum of \$274.00 per month effective October 1, 2012
A maximum of \$280.00 per month effective October 1, 2013

This maximum may not apply to severely injured workers as financial support for daily living is based on the reasonable level of need for the worker.

**2. Payment Method**

The payment method will be a monthly allowance to the worker or a direct payment to the service provider.

<b>E. Child Care/Other Dependant Care</b>
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**Purpose:**

The WCB recognizes a worker's injuries can make it impossible to provide adequate care for children and other dependants. In addition, workers attending medical treatments or participating in rehabilitation initiatives may incur child care/other dependant care expenses greater than pre-accident amounts. Accordingly, the WCB may provide financial support for care services.

**Policy:****Resident Child/Other Dependants**

Care costs may be paid for children or other dependants residing in the worker's home on a full or part time basis.

**When Provided**

The WCB will provide financial support for the cost of care services over and above pre-accident care costs when:

- The worker attends medical treatment; or
- When the worker is incapacitated due to the compensable injury; or
- When a continuing need arises from the compensable injury.

**Example**

For example, if the worker paid for child care or care for other dependants prior to the accident or regularly received care services from someone on a voluntary basis, the WCB would expect those services to continue after the accident and would only provide support for the additional amount of child/other dependant care needed due to the accident.

**Emergency Care**

If the worker or spouse or common-law partner incurs child care/other dependant care expenses as a result of having to be with the worker during the emergency period immediately after the accident, the WCB may pay the care expenses.

In addition, the WCB will not consider child care/other dependant care services that are voluntarily provided during the emergency period immediately after the accident as "regularly received".

**Non-custodial Worker**

If the worker's child/other dependant lives in another home, and the worker regularly provided care services prior to the accident, the WCB may provide financial support for alternate care services after the accident.

The WCB will limit the amount of support to the equivalent weekly hours of child/other dependant care the worker provided before the accident.

**Family Members**

The WCB may consider family members other than parents or legal guardians of the child/other dependant to be care service providers eligible for financial support from the WCB.

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**Care Arrangements** Workers are expected to make their own care arrangements; however, when a worker cannot make arrangements, the WCB may contact bonded service providers.

**Support Amount** The WCB will consider how often and how long care services are needed when deciding the level of support.

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**Guidelines:**

**1. Payment Method** The payment method for child/other dependant care will be reimbursement to the worker or direct payment to the service provider.

**F. Home Modifications****Discussion:**

As a result of an accident, a worker may be unable to access all or portions of his or her residence either temporarily or permanently. In addition, specific modifications to the residence are often required to allow the worker to perform basic tasks. The WCB may provide financial support for modifications to a worker's residence under the conditions outlined in this policy.

**Policy:****General**

Home modifications include renovations to the worker's existing home, rental unit, or, in certain circumstances, relocating the worker to another residence.

## a) Eligibility

The WCB may pay for home modifications to the worker's primary residence depending on the following factors:

- Demonstrated need for the specific modification based on the worker's injury;
- The condition of the residence;
- Length of disability expected;
- Whether the modifications will provide improved access and mobility for the worker;
- Be cost effective or suitable, in the WCB's view, for the worker;
- Approved by the WCB in advance.

## b) Maintenance

The WCB may cover the maintenance cost due to regular usage of any modifications, depending on the type of modification provided.

In certain circumstances, the costs of day-to-day household maintenance may be covered under the Independent Living section of this policy.

## c) Relocation

Temporary relocation may be provided when a worker cannot reasonably access his or her place of residence due to the compensable injury.

## d) Insurance

The WCB will not pay for household insurance.

## e) Construction &amp; Permits

To qualify for support, all modifications must be approved by the WCB in advance.

Workers are expected to arrange for installation or building of modifications with renovation companies or contractors. All modifications must comply with the local building and fire codes. All modifications must have the appropriate building permits.

**Existing Houses**

Home modifications must not exceed 50% of the appraised market value of the existing structure, as determined by a licensed appraiser approved by the WCB.

If the estimate of modifications is more than 50% of the house’s value, the WCB may enter into discussions with the worker to provide a cost-effective alternative to modifying the existing residence. Alternatives could include cost sharing, modifying a new house that is being constructed by the worker, or moving the worker to a different residence.

**New Houses**

The WCB may pay for modifications to a new house being built at the worker’s expense if the WCB is given the opportunity to pre-approve the house purchase.

**Subsequent Modifications**

The WCB may provide support for modifications to a different residence for the worker. Any subsequent modification must comply with the general provisions on home modifications. The WCB may determine the level of support on a declining scale for subsequent modifications to a different residence.

**Rental Modifications**

f) Landlord

Any modifications made to rental accommodations will require written permission of the landlord.

g) Moving Costs

If existing rental accommodations cannot reasonably be modified, the WCB may consider paying the costs of moving and subsidizing new rental accommodations that can accommodate the required modifications.

h) Cost Effective

The decision to pay moving costs and subsidize new rental accommodations must demonstrate that new rental accommodations are the most cost-effective and suitable alternative in the circumstances.

i) Number of Moves

The WCB may restrict the number of times moving costs will be paid.

**Guidelines:**

**1. Payment Method**

The payment method for home modifications will be reimbursement to the worker or direct payment to the contractor or supplier.

**2. Amount for Subsequent Modifications**

The WCB may provide support for subsequent modifications in accordance with the following table:

<b>IF this is the worker’s...</b>	<b>THEN WCB covers modification costs up to...</b>
1 <sup>st</sup> residence	100%

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2 <sup>nd</sup> residence	66%
3 <sup>rd</sup> residence	33%
4 <sup>th</sup> and subsequent residence	0%

## G. Vehicle Modifications

### **Discussion:**

The WCB may provide support for vehicle modifications that improve a worker's ability to travel on roads and highways. In certain cases, extensive modifications to the vehicle may be required to accommodate power wheelchairs. In some cases, it may not be cost effective to modify the worker's existing vehicle due to its age, condition or type of vehicle. Accordingly, the WCB may provide financial support for a replacement vehicle.

### **Policy:**

#### **Definitions**

"Modification" refers to devices or products that help a worker operate a vehicle independently. Examples include spinner knobs, hand controls, dimmer switches, and modified seats.

"Specialized" refers to extensive modifications to a vehicle in order to accommodate electric wheel chairs required by severely injured or quadriplegic persons. Examples include roof extensions, elevator devices, beds, heaters, and emergency communication devices.

Either term can refer to modification of the worker's existing and future vehicles.

"Replacement Vehicle" refers to a new or used vehicle that meets the needs created by the worker's injuries, as opposed to the worker's own vehicle driven prior to the accident.

#### **Eligibility**

If a worker requires a modified vehicle to provide safe transportation, the WCB may pay the costs associated with the vehicle modifications. In order to qualify for payment, all modifications must be approved by the WCB prior to installation.

In certain circumstances, the WCB may pay for a specialized vehicle that meets, but does not exceed, the reasonable needs of a severely injured worker for safe travel.

#### **Confirmation**

The WCB will confirm with the Manitoba Division of Driver & Vehicle Licencing that the worker requires a modified or specialized vehicle in order to operate a motor vehicle or for the worker to safely travel on roads and highways.

#### **Insurance**

The WCB will not pay for the insurance costs on modified, specialized or replacement vehicles.

#### **Maintenance**

The WCB will cover the cost of maintaining any modifications made by the WCB. The WCB will not cover the normal operating and maintenance costs of a vehicle.

#### **Amount**

The vehicle modifications paid for will be based on the worker's particular circumstances and the age and condition of the vehicle.

The amount paid is dependent on whether the person is an injured worker or a severely injured worker, and the duration the modification will be required.

The amount will be determined in accordance with the following provisions:

- a) Injured Workers: Short Term Need **IF** an injured worker requires vehicle modifications for a period normally less than one year then the WCB may pay for cost-effective modifications that assist the worker in driving a vehicle.
- b) Injured Workers: Long Term Need **IF** an injured worker requires vehicle modifications for a period normally greater than one year then the WCB may pay for modifications that assist the worker in driving a vehicle.

Alternatively, for injured workers that require vehicle modifications for a period normally greater than one year, the WCB may make a single or 'one time' contribution towards a replacement vehicle subject to the following conditions:

- The WCB may pay for the cost of a vehicle safety inspection if one is required prior to making the modifications.
- The WCB may pay for the cost of vehicle repairs that must be performed to make the modified vehicle safe for driving.
- The WCB may make a single contribution towards the cost of a replacement vehicle. However, the contribution must not be greater than the estimated cost of repairing the worker's existing vehicle.

- c) Severely Injured Workers

**IF** vehicle modifications are required for:

- a severely injured worker who is incapable of routinely completing a self-transfer from the wheelchair into the vehicle, and
  - the modifications will be a long term or permanent requirement due to the injuries caused by the accident
- then the WCB may pay for the cost of necessary modifications to the severely injured worker's existing vehicle or provide sufficient funds for a specialized vehicle.

In addition, the following conditions may apply:

- A WCB appointed occupational therapist will perform a functional capacity evaluation to determine whether the severely injured worker qualifies under this provision.
- Where the WCB is considering providing sufficient funds for a specialized vehicle, a cost benefit analysis must be conducted to determine whether the purchase of a vehicle is the most economical solution as compared to other transportation options available in the circumstances (ie. cabs, specialized bus).

- The WCB may provide the difference between the cost of a specialized vehicle and the greater of
  - the amount the severely injured worker would have spent on a vehicle had the accident never happened; or,
  - the value of the severely injured worker's vehicle owned prior to the accident; or,
  - the value of a vehicle previously modified by the WCB.

For example, the WCB may pay the difference between the "book value" or "salvage value" of the severely injured worker's vehicle owned before the accident and the specialized vehicle.

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## **Guidelines**

### **1. Payment Method**

The payment method for vehicle modifications will be reimbursement to the worker or direct payment to the contractor or supplier.

**H. Clothing**

**Purpose:**

A clothing allowance may be provided when there is evidence of additional wear to a worker’s clothes from using a mobility device or wearing a prosthetic, orthotic or mobility device as a result the accident.

**Policy:**

<b>1. Eligibility</b>	The WCB may provide financial support to workers for increased clothing costs reasonably expected from additional wear due to abrasion from a prosthetic, orthotic or mobility device.
<b>2. Mobility Devices</b>	Mobility devices must be medically prescribed and may include wheelchairs required for extended periods, fitted braces, and crutches required on a long-term basis.
<b>3. Short-term Allowance</b>	Short-term needs for clothing may be provided on a one-time basis up to the maximums established by the WCB. In cases where a worker requires different sized clothing as a result of wearing a cast (body, leg, and other types), the clothing allowance may be provided on a one-time only basis.
<b>4. Long-term Allowance</b>	Unique medical conditions that warrant long-term special clothing allowance will be considered on a case-by-case basis. Annual clothing allowances will be provided when eligibility for the allowance is established. The allowance will continue each year until the worker no longer uses the prosthesis, orthotic or mobility device.
<b>Amount</b>	The WCB may set allowance levels that represent the approximate costs of wear and tear on an injured worker’s clothing and index the amount annually by the Consumer Price Index (CPI).

**Guidelines**

- 1. Current Amounts**      The amount of the clothing allowance is described in the following table:

<b>IF the additional wear to clothing is for...</b>	<b>THEN allowance amount effective October 1, 2012 is...</b>	<b>THEN allowance amount effective October 1, 2013 is...</b>
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▪ the upper body	\$300 per year	\$308 per year
▪ the lower body	\$599 per year	\$615 per year
▪ both upper and lower body	\$901 per year	\$926 per year
▪ wheelchair users	\$901 per year	\$926 per year

**2. Payment Method** The payment method will be an annual allowance to the worker.

**3. Exceptions** Clothing Allowance is not paid for the use of the following:

- Tight fitting sleeve type braces (with or without metal supports)
- Wrist braces are not normally covered
- Corsets
- Crutches required for less than 6 months as a result of an acute injury

**II. REFERENCES**

*The Workers Compensation Act*, sections 27(2), 27(20) and 37

**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 19/1999.
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 - 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 by Board Order 36/13 on December 19, 2013 effective March 1, 2014. Policy re-issued as 44.120.30.01.
11. In November 2020, the history section was reduced by removing entries related to allowance updates.