Adult Care Program

General Information		
Lead Department	Indian & Northern Affairs Canada (INAC)	
Partners	First Nations, Health Canada, Provinces	
Effective Date	1982	
Expiry Date	Ongoing	
Web Site(s)	http://www.ainc-inac.gc.ca/ps/acp_e.html	
Purpose	To provide a policy framework and funding for services designed to assist people with functional limitations (e.g., age, health, disability) to maintain their independence, maximize their level of functioning and live under conditions of health and safety. There are 3 program components:	
	in-home care (comprised primarily of homemaking services),	
	foster care or on-reserve institutional care, and	
	off-reserve institutional care (reimbursement of specified expenditures for First Nation residents).	
Roles and Contributions	Provinces provide the jurisdictional framework and the provincial norms for adult care which are used for guidelines in the provision of care by First Nations.	
	INAC provides the policy framework, program parameters and funding.	
	First Nations deliver and administer adult care programs.	
	INAC, Health Canada and the Assembly of First Nations (AFN) work in partnership, through a Joint Working Group, to assess the policies and programs and, if necessary, recommend changes.	
	Health Canada provides complementary programming through the First Nations and Inuit Home and Continuing Care program.	
Resources		
Funding	\$78M (01-02) Part III, Plans and Priorities.	
	Funding for in-home care is formula based (based on comparable provincial per-capita in 1994/95 and adjusted annually for population growth).	
	Funding for institutional care is based on reimbursement of actuals.	
	There has been a moratorium on the construction of new on-reserve institutional facilities since 1988.	
Tracking and Reporting	First Nation expenditure reports (for reimbursement of actuals).	
	First Nation audits submitted to Indian and Northern Affairs Canada.	
	Estimates, Part III: Plans and Priorities.	
	Departmental Performance Report.	

Measurement and Reporting		
Outcomes / Outputs	Access to services enabling First Nation adults incapacitated by age, chronic illness or disability to maintain or enhance their functional independence; preferably in their own home or community.	
	Seek to ensure that amount and type of service is appropriate to the physical, social and cultural needs of these individuals and their families; and that the services are comparable to those available to non-Indian people living in similar circumstances.	
Indicators	First Nations report: the number of individuals receiving care, length of care, and type of placement re institutional care.	
	INAC reports levels of funding at regional and national levels.	
	First Nations have noted the need to develop social indicators that are significant and appropriate to their communities and also provide an overall context interpret the performance of their governments. To facilitate this exploration, INAC is supporting the Governance Statistical Initiative to identify the statistical requirements of First Nation governments and to consider sustainable means of developing this data.	
Comparable Indicators	The above indicators can be compared inter-regionally and to similar provincial data.	
Evaluation/ Third Party Assessments	The Joint Working Group, which consists of members from INAC, Health Canada and the AFN is assessing the needs of First Nations regarding Adult Care.	
Shared Information and Best Practices	The Joint Working Group is researching provincial and territorial polices and practices regarding continuing care.	
Public Reporting	Departmental Performance Report.	
	Basic Departmental Data report, available on the department website, provides summary information on number of individuals receiving service and funding provided.	
	In accordance with funding agreements, FN financial and activity reports, program evaluations, management assessments, and other standards, policies or procedures are made available to community members.	
Involving Canadians		
Provisions for Citizens to Participate in Developing Social Priorities and Reviewing Outcomes	INAC works in partnership with First Nations, Health Canada and other government departments to deliver Adult Care programs on reserve. All partners review and report on outcomes to their own constituents.	
Feedback Mechanisms to the Public	Estimates, Part III: Plans and Priorities and Departmental Performance Report.	

	Departmental website.	
	Departmental Performance Report.	
Service Commitments		
Public Availability of Eligibility Criteria	The funding agreement requires that First Nations make the eligibility criteria available to First Nation members.	
Existence and Availability of Service Commitments	In accordance with funding agreements, First Nation financial and activity reports, program evaluations, management assessments, and other standards, policies or procedures are available to community members.	
	First Nations also adopt a range of community specific provisions for making public service commitments and performance.	
Measurement and Public Reporting	First Nations have access to data on the INAC website	
	Most First Nations have not yet developed their own criteria or performance measures for adult care.	
Appeals and Complaints		
Existence, Availability and Communication of Mechanisms	Funding Agreements require FNs to have in place a formally defined, publicly available appeals process for administrative decisions.	
	Self-Government Agreements must include provisions for appeals and dispute resolution.	
	Members of the public may also make allegations of any perceived inappropriate operations directly to INAC.	
Tracking and Public Reporting	Allegations to INAC are tracked internally.	
Mobility		
Existence of Measures	Federal Adult Care funding is intended to provide services to registered First Nation persons normally resident on reserve. There are three components to this program: In home Care (Homemaker services); foster care in a family setting; and institutional care in Type I and II institutions. With the exception of some FNs in the Atlantic and Quebec Regions, and the Manitoba region, protocol agreements are in place through which FNs provide In-home services to First Nation members and other residents on reserve.	
	Continuing work includes monitoring of these programs, including the maintenance of provisions in protocol agreements for consistent service delivery.	
	Efforts are currently underway between INAC, Health Canada and First Nations to develop a comprehensive policy on Adult Care which will address the issues of responsibility for the full range of social and medical services to the elderly and disabled on reserve.	