

Adult Day Health Care

Adult Day Health Care is a program Veterans can go to during the day for social activities, peer support, companionship, and recreation. Adult Day Health Care is for Veterans who need skilled services, case management, and assistance with activities of daily living (e.g., bathing and getting dressed) or instrumental activities of daily. Adult Day Health Care can provide respite care for a family caregiver and can also help Veterans and their caregiver gain skills to manage the Veteran's care at home.

VHA Handbook 1141.03

17. PARTICIPATION OF VETERANS

Indications for participation of Veterans in the ADHC Program are:

- a. The Veteran is eligible for VA care as set forth in paragraph 2.
- b. It is determined that the Veteran will likely benefit from ADHC on the basis of an interdisciplinary assessment, identifying one or more of the following conditions:
 - (1) Three or more ADL dependencies, or
 - (2) Significant cognitive impairment, or
 - (3) Two ADL dependencies and two or more of the following conditions:
 - (a) Dependency in three or more Instrumental Activities of Daily Living (IADL).
 - (b) Recent discharge from a nursing home, or planned nursing home discharge contingent on receipt of home and community-based care services.
 - (c) Seventy-five years old, or older.
 - (d) High use of medical services defined as three or more hospitalizations in the past year; or twelve or more visits to outpatient clinics and emergency evaluation units in the past year.
 - (e) Clinical depression.
 - (f) Living alone in the community.
- c. It is recognized that every contingency cannot be foreseen. When a Veteran who does not strictly meet the preceding criteria and nevertheless is determined by the clinical care team to need ADHC services, the services may be ordered, but the reason for the variance from these standards must be documented in the Veteran's electronic health record.
- d. If the sole purpose of the ADHC visits is to provide respite care, then eligibility requirements for respite care must be met (see 38 U.S.C. 1720B and VHA Handbook 1140.02).

18. CARE MANAGEMENT

The ADHC Program provides care management to enrolled Veterans through the assignment of one of the core ADHC team members. Caregivers and family members may participate in the treatment planning with the Veteran's consent when the Veteran possesses adequate decision-making capacity, or with the Veteran's surrogate decision-maker's consent when the Veteran does not have adequate decision-making capacity. The designated Care Manager in ADHC must ensure:

- a. An interdisciplinary assessment of each Veteran.
- b. A periodic review of the Veteran's status at least every 90 days.
- c. The development of a Veteran treatment plan which is to include:
 - (1) Implementation of the treatment plan;
 - (2) Coordination and monitoring of services;
 - (3) Communication of treatment plan to Veteran, the Veteran's caregiver, and the Veteran's health care providers;
 - (4) Active participation in the treatment plan and goals, including Veteran and the Veteran's family preferences and discharge planning;
 - (5) Advocacy;
 - (6) Discharge planning; and
 - (7) Follow-up.
- d. Participation in the coordination and monitoring of services within and outside of ADHC.

19. CAREGIVER SUPPORT

ADHC considers the Veteran and the caregiver as the unit of care, and recognizes the burden of care can be great with social, psychological, physical and economic costs. Every ADHC Program is encouraged to develop caregiver support services which offer support, education, information, and referral within the boundaries of VA policy and legislative authority.

20. PROCESS OF CARE

a. Referral Process

- (1) ADHC services are to be readily accessible.
- (2) Veterans may be referred to ADHC from any setting, including inpatient, outpatient, nursing homes, and domiciliary and local community sources for consultation. Referrals for ADHC must be submitted through the appropriate VA referral process using the VA Form 10-0415, VA Geriatrics and Extended Care Referral.
- (3) Following the referral and prior to enrollment, each Veteran's medical record must be reviewed. An interview is conducted with the Veteran and caregiver. The Veteran or caregiver will be informed of the possibility of co-payment charges for services (see VA Form 10-10EC, Application for Extended Care Services).
- (4) If the Veteran clearly does not meet the ADHC admission criteria, ADHC will make recommendations regarding an alternate plan to manage the Veteran's care needs.

b. **Orientation to the Program.** The Veteran and the Veteran's family or caregiver is given an orientation to ADHC to include a full explanation of the program, its objectives, capabilities, and limitations.

c. **Assessment.** After admission to ADHC, each interdisciplinary team member assesses the Veteran. The goal of this initial team assessment is to identify those impairments and problems that interfere with the individual's ability to achieve the highest level of functioning and to maintain living in the least restrictive environment that is safe for the Veteran.

32. TRANSPORTATION

The success of ADHC Programs is largely dependent on their ability to secure safe and adequate transportation for Veterans.

a. ADHC's primary role is in facilitating Veterans' maximum use of community transportation systems, identifying systems, aiding in the application process, etc. Such systems may include:

- (1) Area "Agency on Aging" supported transportation;
- (2) Caregivers;
- (3) Regional transit;
- (4) Local handicapped transportation resources;
- (5) Veteran Service Organization vehicles; and
- (6) Volunteer transportation systems, etc.

b. When there is a lack of adequate community transportation systems, coordination of local Disabled American Veteran (DAV) transportation services may be sought.

c. Escorts are provided, as needed, to assist Veterans to and from the vehicle at the ADHC site or other VA facility, as clinically indicated. In arranging transportation, consideration must be given to safety, specific needs of each Veteran, and limiting the amount of time that the Veteran is in transit. Transit should not exceed 1 hour, except for rare instances. **NOTE:** *Special attention should be given for safe travel for Veterans with dementia.*

d. The VA Beneficiary Travel program is generally administered by the facility Business Office. This program provides certain eligible Veterans with mileage reimbursement, or special mode transportation (ambulance, wheelchair van, etc.) based on medical needs. Outside of VA specific Beneficiary Travel program authority, facilities may consider options such as Voluntary Services who may be of assistance in the coordination of local DAV transportation services or referral to the local site's Social Work Services for community transportation assistance.