



**United Way**

Better at Home is funded by the Government of British Columbia.



United Way helping seniors  
remain independent.



**NICCSS**

920 East Hastings St  
Vancouver, BC, V6A 3T1  
Phone 604-569-2787 Fax 604-569-3779  
www.niccss.ca

## **Vancouver Inner City Better At Home** **Request For Services**

**Client Information:** (Please use clear handwriting or print)

|                                    |            |   |
|------------------------------------|------------|---|
| First Name: _____ Last Name: _____ |            | Male <input type="checkbox"/> Female <input type="checkbox"/><br>Other <input type="checkbox"/> |
| Address: _____                     |            |   |
| Email Address: _____               |            | Postal Code: _____  |
| Date of Birth: _____               | Tel: _____ | Language: _____<br>Ethnicity: _____   |
| Emergency Contact Name: _____      |            | Relationship: _____   |
| Emergency Contact Tel: _____       |            | Email: _____  |
| Building Manager _____             |            | Tel: _____  |

**Referral Staff's Information:**

|              |       |
|--------------|-------|
| Name         | _____ |
| Organization | _____ |
| Phone        | _____ |
| Fax          | _____ |
| E-mail       | _____ |

### **Assessment of Client's Capabilities**

| Activity                  | Need Assistance? |    | Extra comments: |
|---------------------------|------------------|----|-----------------|
|                           | Yes              | No |                 |
| Making drink/snack/meal   |                  |    |                 |
| Getting in/out of bed     |                  |    |                 |
| Changing bed sheets       |                  |    |                 |
| Using lavatory            |                  |    |                 |
| Dressing                  |                  |    |                 |
| Washing self/bathing      |                  |    |                 |
| Cleaning teeth/dentures   |                  |    |                 |
| Feeding self              |                  |    |                 |
| Going upstairs/downstairs |                  |    |                 |
| Mobility indoors/outdoors |                  |    |                 |

**Medical Concerns & Additional Comments:**



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## **Vancouver Inner City Better At Home** **Request For Services**

|  |  |
|--|--|
| <b>Services Requested:</b>   | <input type="checkbox"/> House Keeping <input type="checkbox"/> Friendly Visit<br><input type="checkbox"/> Assisted Shopping * <input type="checkbox"/> Accompaniment  |
| <b>Services Currently Receiving:</b>   | <input type="checkbox"/> SAFER<br><input type="checkbox"/> Veteran's Independence Program<br><input type="checkbox"/> VCH Hoarding Action Response Team<br><input type="checkbox"/> VCH bath service<br><input type="checkbox"/> VCH home support service<br><b>Others:</b>  |
| <b>Household Information</b>   | General Condition: Pets: Yes/No Smoking: Yes/No Bedbugs: Yes/No<br><br>Living Arrangement:<br><input type="checkbox"/> Alone <input type="checkbox"/> Spouse <input type="checkbox"/> Family/Friend <input type="checkbox"/> Roommate <input type="checkbox"/> Assisted living<br><input type="checkbox"/> Other<br><br>Accommodation Type:<br><input type="checkbox"/> House <input type="checkbox"/> Suite in house <input type="checkbox"/> Patio home/Town house<br><input type="checkbox"/> Apartment/Condo <input type="checkbox"/> Assisted living facility<br><input type="checkbox"/> Other |
| <b>Family Information</b>  | Any relative living in Lower Mainland?<br><input type="checkbox"/> Yes, Who? _____ Tel: _____<br>How often per month? <input type="checkbox"/> Less than 1 <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-4 <input type="checkbox"/> 5+<br><input type="checkbox"/> None  |
| <b>Income</b>  | <input type="checkbox"/> Notice of Assessment<br>Gross Income:   |
| <b>Expenses</b>  | Rent or Mortgage:<br>Monthly Utilities:<br>Other Household Costs:<br>Medical Expenses:   |
| <b>How do you know our service?</b><br><input type="checkbox"/> Advertisement <input type="checkbox"/> Friend/Family <input type="checkbox"/> Doctor/Nurse <input type="checkbox"/> CHW/Nurse (HA)<br><input type="checkbox"/> NICCSS <input type="checkbox"/> Community Organization <input type="checkbox"/> Other _____ |  |



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## **Sliding Scale of Fees (as April 2024)**

### **Participants aged 65-74**

| <b>Fee Categories</b> | <b>Single Person Income</b>                  | <b>Household Income</b>                      | <b>Percentage of Subsidy</b>        | <b>Cost</b>                                |
|-----------------------|--|--|-------------------------------------|--|
| <b>A</b>              | <input type="checkbox"/> Below \$21,400      | <input type="checkbox"/> Below \$32,550      | <input type="checkbox"/> 100%       | <input type="checkbox"/> Free /By donation |
| <b>B</b>              | <input type="checkbox"/> \$21,401 - \$30,200 | <input type="checkbox"/> \$32,551 - \$45,700 | <input type="checkbox"/> 70%        | <input type="checkbox"/> \$7.50 /hr.       |
| <b>C</b>              | <input type="checkbox"/> \$30,201 - \$35,400 | <input type="checkbox"/> \$45,701 - \$62,800 | <input type="checkbox"/> 50%        | <input type="checkbox"/> \$12.50 /hr.      |
| <b>D</b>              | <input type="checkbox"/> \$35,401 - \$45,699 | <input type="checkbox"/> \$62,801 - \$96,699 | <input type="checkbox"/> 30%        | <input type="checkbox"/> \$17.50 /hr.      |
| <b>E</b>              | <input type="checkbox"/> Over \$45,700       | <input type="checkbox"/> Over \$96,900       | <input type="checkbox"/> No subsidy | <input type="checkbox"/> \$25.00 /hr       |

### **Participants aged 75+**

| <b>Fee Categories</b> | <b>Single Person Income</b>                  | <b>Household Income</b>                      | <b>Percentage of Subsidy</b>        | <b>Cost</b>                                |
|-----------------------|--|--|-------------------------------------|--|
| <b>A</b>              | <input type="checkbox"/> Below \$22,250      | <input type="checkbox"/> Below \$34,250      | <input type="checkbox"/> 100%       | <input type="checkbox"/> Free /By donation |
| <b>B</b>              | <input type="checkbox"/> \$22,251 - \$31,050 | <input type="checkbox"/> \$34,251 - \$47,400 | <input type="checkbox"/> 70%        | <input type="checkbox"/> \$7.50 /hr.       |
| <b>C</b>              | <input type="checkbox"/> \$31,051 - \$35,950 | <input type="checkbox"/> \$47,401 - \$63,900 | <input type="checkbox"/> 50%        | <input type="checkbox"/> \$12.50 /hr.      |
| <b>D</b>              | <input type="checkbox"/> \$35,951 - \$45,699 | <input type="checkbox"/> \$63,901 - \$96,899 | <input type="checkbox"/> 30%        | <input type="checkbox"/> \$17.50 /hr.      |
| <b>E</b>              | <input type="checkbox"/> Over \$45,700       | <input type="checkbox"/> Over \$96,900       | <input type="checkbox"/> No subsidy | <input type="checkbox"/> \$25.00 /hr.      |