

## IHSS Program Services

The In-Home Supportive Services (IHSS) program provides paid assistance to income-eligible aged, blind, and/or disabled individuals so that they can remain safely in their own homes, and offers the following services:

**DOMESTIC SERVICES:** General household chores to maintain the cleanliness of the home

**Related Services:**

- **Meal Preparation:** Preparing foods, cooking, and serving meals
- **Meal Clean-up:** Cleaning up the cooking area and washing, drying, and putting away cookware
- **Routine Laundry:** Washing, drying, folding, and putting away clothes and linens
- **Shopping for Food:** Making a grocery list, traveling to/from the store, shopping, loading, and storing food purchased
- **Other Shopping/Errands:** Includes shopping for other necessary items and performing small and necessary errands (e.g. picking up a prescription)

**NON-MEDICAL PERSONAL CARE SERVICES:**

- **Respiration/Assistance:** Assisting recipient with non-medical breathing related services, such as self-administration of oxygen and cleaning breathing machines
- **Bowel and/or Bladder Care:** Assistance using the toilet (including getting on/off); bedpan/bedside commode or urinal; emptying and cleaning ostomy bag, enema and/or catheter receptacles; applying diapers, disposable undergarments, and disposable barrier pads; wiping and cleaning recipient; and washing/drying recipient's hands
- **Feeding:** Assisting the recipient to eat meals, cleaning his/her face and hands before/after meals
- **Routine Bed Bath:** Giving a recipient who is confined to bed a routine sponge bath
- **Dressing:** Assisting the recipient to put on and take off his/her clothes as needed throughout the day
- **Menstrual Care:** Assistance with the external placement of sanitary napkins and barrier pads
- **Ambulation and Getting In/Out of Vehicles:** Assisting the recipient with walking or moving about the home, including to/from the bathroom and to/from and into/out of the car for transporting to medical appointments and/or alternative resources

- **Transfer (Moving In/Out of Bed and/or On/Off Seats):** Assisting recipient from standing, sitting, or prone position to another position and/or from one piece of furniture or equipment to another
- **Bathing, Oral Hygiene, and/or Grooming:** Assisting the recipient with bathing or showering, brushing teeth, flossing, and cleaning dentures; shampooing, drying, and combing/brushing hair; shaving; and applying lotion, powder, deodorant
- **Rubbing Skin and Repositioning:** Rubbing skin to promote circulation and/or prevent skin breakdown, turning in bed and other types of repositioning, and range of motion exercises
- **Care of/Assistance with Prosthesis and Help Setting Up Medications:** Taking off/putting on and maintaining prosthetic devices, including vision/hearing aids, reminding the recipient to take prescribed and/or over-the-counter medications, and setting up Medi-sets

### **TRANSPORTATION SERVICES:**

Transporting recipient to and from appointments with physicians, dentists, and other health practitioners; or sites necessary for fitting health-related appliances/devices and special clothing, when transportation for these purposes is not provided under Medi-Cal.

### **SPECIAL CIRCUMSTANCES:**

- **Heavy Cleaning:** Thorough cleaning of the home to remove hazardous debris or dirt. Authorized one time only and only under certain circumstances.
- **Yard Hazard Abatement:** Light work in the yard to remove high grass or weeds and rubbish when these materials pose a fire hazard (authorized one time only); or remove ice, snow, or other hazardous substances from entrances and essential walkways when these materials make access to the home hazardous
- **Protective Supervision:** Observing the behavior of a non-self-directing, confused, mentally impaired, or mentally ill recipient, and assisting as appropriate to guard recipient against injury, hazard, or accident. Certain limitations apply.
- **Teaching and Demonstration Services:** Teaching and demonstrating those services provided by IHSS providers so the recipient can perform services which are currently performed by IHSS providers by himself/herself. Certain limitations apply.
- **Paramedical Services:** Services meeting the following conditions: activities which recipients would normally perform themselves if they did not have functional limitations; due to recipient's physical or mental condition, are necessary to maintain the recipient's health; and activities such as administration of medications, puncturing the skin, or inserting a medical device into a body orifice; activities requiring sterile procedures; or requiring a judgment based on training given by a licensed health care professional. Special limitations apply.



For more information, contact your local county IHSS office.

**INSERT COUNTY CONTACT  
INFORMATION HERE**