

December 6, 1990  
M-5, Part IV

Chapter 1

M-5, Part IV  
December 6, 1990  
Chapter 1

CONTENTS

CHAPTER 1. INTRODUCTION

PARAGRAPH  
PAGE

1.01	
Definition .....	1-1
1.02	
Types of Domiciliary Care.....	1-1

1-1

1-1

Appendix A

CHAPTER 1. INTRODUCTION

1.01 DEFINITION

a. **Domiciliary care is authorized by 38 CFR 17.47, 17.48, 17.49.** The provisions of each citation must be fully addressed in determining eligibility for domiciliary care.

b. **Domiciliary Care Program.** A residential rehabilitation program that provides short-term rehabilitative and long-term health maintenance care for veterans who require minimal medical care. The domiciliary care program also provides health care and related services to eligible homeless veterans. Domiciliary patients are normally ambulatory and do not require the level of clinical intervention or observation routinely provided to nursing home patients. It provides a full range of rehabilitation services for patients who do not require bedside nursing care. It provides a semi-structured, therapeutic environment, while providing optimal opportunities for community interaction both inside and outside the institution.

c. **Minimal Medical Care.** The level of care which offers a degree of clinical intervention and therapeutic structure that is greater than community residential care but less than nursing home or hospital based psychiatric care. VA domiciliary care has often been described as the least intensive level of VA inpatient care.

d. **Rehabilitation.** Physical, psychosocial, vocational, and behavioral interventions or activities required to bring the patient to optimal levels of functional independence and health while seeking to provide an optimal quality of life. (See app. A.)

1.02 TYPES OF DOMICILIARY CARE

a. **Biopsychosocial Rehabilitation.** Those clinical interventions and services required to effect, to the extent possible, remediation of medical,

December 6, 1990  
M-5, Part IV

Appendix A

M-5, Part IV  
December 6, 1990  
Appendix A

psychosocial and vocational impairments essential to the restoration of the patient to an optimal level of functional independence and health.

b. **Long-term Health Maintenance Care.** Those clinical interventions and services required to prevent or delay, to the extent possible, those degradations in functional status and/or health that would, if unchecked, be expected to result from the progression of chronic disease.