

Home Assist Secure Allocations Policy

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Page 1 of 5

1.1 Objective:

This Policy aims to ensure Ipswich City Council Home Assist services are allocated based on an eligible client's safety, health and security needs.

1.2 Regulatory Authorities:

- Service Funding Agreement between The State of Queensland through the Department of Communities, Child Safety & Disability Services and Ipswich City Council – Queensland Community Care Program
- Service Funding Agreement between The State of Queensland through the Department of Housing & Public Works and Ipswich City Council - Home Assist Secure (HAS) Program
- Service Funding Agreement between the Federal Department of Health and Ipswich City Council - Commonwealth Home Support Programme
- My Aged Care
- Commonwealth Home Support Programme Manual
- Community Care Manual
- Home Assist Secure Program Guidelines
- Common Care Standards
- Queensland *Housing Regulation 2003 S27*
- *Local Government Act 2009*
- Local Government Regulation 2012
- Advance Ipswich
- Ipswich City Council Corporate Plan 2012-2017

1.3 Scope:

This Policy will apply to Ipswich City Council Home Assist and the services provided under the Home Assist Secure Program, the Commonwealth Home Support Programme and the Queensland Community Care Program.

1.4 Policy Statement:

This policy outlines how Ipswich City Council Home Assist will ensure that decisions concerning the allocation of Home Assist services to eligible clients are based on their safety, health and security needs, and how Council will prioritise the offers of services to those eligible clients.

Home Assist services include services provided under the Home Assist Secure Program, the Commonwealth Home Support Programme and the Community Care Program.

Service Allocation - Major Home Modification Service:

All clients referred for a major modification service will undertake a priority needs assessment by a qualified Occupational Therapist. Priority for allocation of services will be determined by taking into account the following:

- The Occupational Therapist's functional assessment and modification report
- The current environment of the client / carer (prior to the modification)
- The relative useful life of the modification by the client / carer
- The client's access to short term alternatives including other support services
- Availability of major modifications funding

Based on the above criteria, priority ratings will be categorised as follows and services allocated in the following priority order:

Urgent:

- The environment is unsafe: client/carers is at significant risk of injury and/or client has been hospitalised recently (up to twelve (12) months) owing to falls or other safety risks with task.
- The client/carers may injure themselves if the modification is not undertaken and this could result in hospitalisation and need for ongoing services.
- The environment cannot be modified in minor ways ie other intervention strategies such as minor modifications, equipment and/or additional support services (ie grab rails and bath board, rehabilitation, re-education or alternative accommodation) would not be possible or appropriate; or alternative intervention has been trialled and is no longer safe to use or adequate.
- The client will remain in the residence for at least the next two (2) years such that: Major modification is considered to meet the long term care needs of client and/or alleviate long term workplace conditions of carer.
- Other aspects of client's home environment layout and supports are appropriate to manage client and known condition/s for long term and sustain client at current residence; and
- The client is medically stable.

High:

- Client/carers is just managing the current situation and is not at a significant risk of injury within the next three (3) months.
- The Occupational Therapist has determined the client to be a high falls risk with the task being assessed, including the client's recent history of falls/minor injury with the assessed task: or
- Carer/other has been attempting to provide care in sub-standard workplace conditions.
- There is evidence of the carer/client not being able to cope owing to chronic stress of long-term burden of care responsibilities.
- Client's personal hygiene is being compromised owing to poor access,
- Other intervention strategies have been exhausted: ie minor modification and equipment (ie grab rails, bath board, rehabilitation, re-education or alternative accommodation) have been trialled but client's needs are still not being satisfactorily met.
- Client's condition has shown deterioration in the last twelve (12) months such that previous/current management by a carer and/or other means (equipment, minor modifications,

etc) is not likely to be sufficient for carer safety or client ability in the short term future.

- The client will remain in the residence for at least the next two (2) years such that: Major modification is considered to meet the long term care needs of client and/or alleviate long term workplace conditions of carer.

Medium:

- Client/carers assessed as being safe and able to manage in the current environment, but major modification could potentially reduce carer input or reduce level of community services received.
- Major modification will reduce carer input on task significantly eg from hands-on assistance to supervision only.
- Major modification would prevent community services from commencing to assist client.
- Minor modifications currently in use but will not alleviate increasing long term care burden.
- Client/carers are able to manage in the current environment with the addition of minor modifications, equipment, rehabilitation or re-training but could potentially be more independent with major modifications.
- Major modification will improve client Assisted Daily Living rating with task significantly greater than minor modifications or equipment/other eg major mod will allow client's task performance to improve from set up -> independent OR assistance -> set up or supervision only.
- Minor modifications currently in use but not able to meet client's long term needs as condition likely to deteriorate and/or co-morbidities likely to develop.
- Major modification will allow clients independence to be maintained for a significantly longer duration.
- The client will remain in the residence for at least the next two (2) years.

Low:

- Client/carers are managing within the current environment and a major modification would not bring about any significant change for the client/carers or in the level of service received.
- Alternative intervention strategies such as minor modifications, equipment or services not yet trialled.
- Major modification may improve quality of life or ease of access but not impact on client's independence rating or change carer input.

Non-Delivery of Services:

Major modification services may not be provided to clients in the following circumstances:

- Client/carers is assessed as not requiring a major modification for health or functional needs.
- Client does not intend to remain in the residence for at least the next two (2) years.
- The home was chosen with awareness that it did not meet health or functional needs and would require major modifications.
- The modifications are not authorised by the registered property owner.
- Client is not prepared to contribute financially toward the modification costs.

Wait List Management (Major Home Modifications):

A waitlist will be established to record those persons eligible for services but, owing to financial or


operational constraints, cannot be delivered immediately. Eligible persons on the waitlist will be prioritised according to their priority assessment. This waitlist will be used to allocate services as capacity becomes available. If the service is declined by the client, the next client with the highest priority rating will be selected.

The waitlist is reviewed and updated each time a client is added. Where a client's circumstances change while on the waitlist, they may request to have a reassessment undertaken. If the reassessment changes the client's priority rating, the waitlist will be updated accordingly. A reassessment will also be undertaken for all clients who have been on the waitlist for a period longer than twelve (12) months.

Clients on the wait list will be notified of their progress towards receiving a service (by verbal or written communication) on at least a six monthly basis.

Service Allocation - Maintenance & Minor Modifications

Decisions concerning allocation of services are based on the Eligible Person's health, safety and security needs. The process for prioritising Eligible Persons requests for service is based on the priority ratings in Attachment A "Service Delivery Priority and Delivery Time Frames List".

Details	Attachments
Attachment A – (Service Delivery Priority and Delivery Time Frames)	 Attachment A

All requests for information and referral will be resolved within ten (10) working days, a response will be provided by verbal or written communication.

Offer of Assistance:

At the time of the initial request for assistance, the client will be informed verbally of the priority rating for the request and the expected timeframe for service delivery by an officer of the Home Assist Program Support Unit (under direction of the Home Assist Coordinator or Social Development Manager).

Where an officer is unable to determine the priority of a request or allocation of service, the request will be deferred to the Home Assist Coordinator or Social Development Manager for a decision. All decisions regarding the priority of a request or allocation of service will be made in a timely and efficient manner.

1.5 Roles and Responsibilities:

Authority to allocate services is the delegated responsibility of the Home Assist Coordinator and/or Social Development Manager.

All Home Assist employees are responsible for understanding and implementing this policy. Feedback to continuously improve the policy is to be directed to the Social Development Manager and Home Assist Coordinator who are responsible for the maintenance of this policy.

1.6 Policy Author:

The Social Development Manager and Home Assist Coordinator are responsible for reviewing this policy.

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