



Attendant Care Program Package Guidelines

Version 2.0

Attendant Care and Physical Disability Unit
NSW Department of Ageing, Disability and Home Care
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1 INTRODUCTION

The Attendant Care Program (ACP) was established in 1986/87 by the Commonwealth Government. The Program was later transferred to the States under the 1991 Commonwealth State Disability Agreement (CSDA), now known as the National Disability Agreement (NDA). Since 1995 the NSW State Government has progressively increased the number of places available through the Program. The ACP is administered in NSW by the Department of Ageing, Disability and Home Care (DADHC).

The ACP is a recurrently funded Program and supports individualised packages of personal assistance under different funding initiatives.

These revised Guidelines support enhanced eligibility, participation and eligibility.

2 WHO DO THESE GUIDELINES APPLY TO?

These Guidelines apply to ACP service providers, clients, advocates and carers. The Guidelines are also of relevance to DADHC staff working in Regions, Community Access, Accommodation and Grants administration areas.

3 SERVICE FUNDING

An ACP Package is funding that has been approved and allocated for assisting an approved individual to complete their activities of daily living (ADL) and instrumental activities of daily living (IADL). The funds approved are based on a needs assessment which identifies the person's disability support goals and needs. The funds may be used to purchase a range of supports with a focus on personal care.

3.1 Service Funding Levels

An ACP Package will be approved for a number of support hours (or equivalent) within three benchmark levels of funding, depending on the assessed level and nature of need of the person:

- Level 1: This package level is set at an equivalent of between 15-35 hours of personal assistance per week in funding. The approved services include one service hour per week for emergencies. Levels under 15 hours per week may be approved in certain circumstances e.g. for a person eligible for ACP with a rapidly degenerative condition.

- Level 2: This level of enhanced package is set at an equivalent of up to 50 hours of personal assistance hours per week in funding. This level of funding may be approved for eligible clients who have additional needs such as two staff required for safe transfers, which require additional funding. The approved services include one service hour per week for emergencies.
- Level 3: This level of enhanced package is set at an equivalent of up to 70 hours of personal assistance hours per week in funding. This level of funding will only be approved in exceptional circumstances for time limited periods and includes a capacity for additional care to meet episodic or other needs. The approved services include one hour per week for unplanned events and emergencies.

An ACP Package will be used to complement existing informal and/or generic community services. Funding will not duplicate any existing services that are available through other funding sources. Funding may replace some existing DADHC funded supports where it can be shown that a packaged approach will achieve better outcomes for the person. If the package is funded to meet assessed needs the same service type may not be accessed from other DADHC funded services.

Clients, advocates, carers or service providers may apply for approval of a limited amount of one-off non-recurrent funding. The aim of one-off funding is to assist newly approved clients to get established with essential items, remove some of the physical barriers to independence and community participation, support service delivery by contributing to the cost of assistive equipment and technology, basic household services/appliances, maintain health or well being, and/or specialised training. For more information about one off funding refer to the ACP Package Procedures.

The ACP Package is aimed at achieving the outcomes of a client's Individual Care Plan.

3.2 Funding level allocation

The amount of approved funding for assistance and services will be determined by a number of factors including assessed need, levels of informal and formal support available and current DADHC policies on targeting. The hourly rate of funding will be based on an annual adjusted rate for Personal Care and adjusted for other service types included in the approved package.

Funding equivalent to less than 15 hours per week of service may be approved if the applicant:

- has a rapidly degenerative condition and is likely to need an increased level of care within a short time
- informal care arrangements are likely to change, e.g. the person is assessed as needing 30 hours of care per week, the carer is providing 20 hours per week of care at the time but this situation is likely to change in the short term
- requires mainly supervision to complete self-care tasks of less than 15 hours per week and the applicant is not prioritised for Home and Community Care (HACC) services; and

- has other circumstances considered appropriate.

Some individuals may be eligible for increased funding (Level 2 funding), if:

- they require additional specialised supports or services other than personal assistance to make the Package viable, because of their condition or individual circumstances e.g. living in a remote area
- they require specialised input of assessment, risk management or programming support to ensure the viability and sustainability of the caring relationships
- they require funding for two attendant carer staff for the same hour of face to face personal care to complete safe transfers
- residential aged care is the only other option for care; or
- they have been assessed as needing additional personal assistance services other than personal care to continue living independently in the community and a packaged approach is the best option.

In some circumstances approved ACP clients may qualify for further increased time limited funding (Level 3 funding) if they:

- are palliative and the additional support will enable the family to continue to care for the client at home
- have a complex health care or behavioural issue that places them and/or their carers at risk and requires extra care for a period of time to allow for stabilisation, assessment, risk management procedures to be developed or an equipment solution be put in place
- have been assessed as requiring a higher level of support for a short period (three to six months) to cover a transition period or need for specialised training or time limited intensive case management support.

3.3 Service Funding Models

An ACP Package may be administered and managed under three different funding models:

1. The **Employer Model** where funds are paid to organisations which have been approved as eligible for delivering ACP services under Section 6 of the *Disability Services Act NSW 1993*. In this model service providers are the employers of attendant carers and are accountable to DADHC for expenditure and service quality. Clients can be involved in the selection, rostering and management of attendant carers to different degrees.
2. The **Cooperative Model** where funds are paid to an approved organisation. In this model the service provider manages the funds, provides administrative support and

is accountable to DADHC for expenditure and service quality. Clients are the employers of attendant carers and are responsible for managing them.

3. The **Direct Funding Model** where funds are paid directly to the client for the purchase of approved services. In this model clients are responsible for managing their care and are accountable to DADHC for expenditure and service quality. Clients take on the full employer/ service provider responsibility and enter into their own Funding Agreement with DADHC. ACP clients who have the capacity to manage and direct their ACP Package can apply to the Attendant Care and Physical Disability Unit to access the Direct Funding Model. Due to current Australian Tax Office and Centrelink rulings related to the transfer of funds directly to clients this funding model is not available in cases where a third person is assisting the client to manage their care services and their ACP Package. Refer to *ACP Direct Funding Model Guidelines* (March 2007) in the DADHC website.

All funding and service models are to be undertaken in accordance with the principles of Section 6 of the *Disability Services Act NSW 1993* and the current ACP Package Guidelines & Procedures.

The rate payable to organisations or direct funded individuals per hour of service is standard and is negotiated from time to time by DADHC in line with notional unit costs. The hourly rate includes payment to attendant carers, workers compensation insurance, associated administrative costs (including coordinator salaries or part salaries) and ongoing costs for training of attendant carers.

The ACP Direct Funding Model has separate Guidelines that have been developed to assist ACP Package clients who are considering direct payments or who have been approved to receive direct payments, to understand the model.

4 SERVICE SPECIFICATION

4.1 Service definition

An ACP Package provides attendant care assistance to maintain individuals aged 16 to 65 years who have a physical disability or who need personal assistance to complete activities of daily living, who are able to manage living in the community and who live in their own home or in their own leased accommodation. An ACP Package is portable, flexible and provides individualised service outputs and funding allocations. Additional eligibility criteria are described in section **5.2 Who is eligible for an ACP Package**.

4.2 Service objectives

The objectives of an ACP Package are to:

- assist the person with a disability to increase or maintain independence at home and in their own community by providing a flexible, person centred range of personal assistance and support services to support their quality of life
- provide support which is tailored to the individual, sustainable and increases opportunities for decision making, choice and portability
- prevent people with a disability from premature or inappropriate admission to long term residential care
- assist people with a disability to access and pursue educational, vocational, and leisure goals
- support individuals to maintain positive family relationships and develop and maintain social networks through flexible approaches to care planning and daily routines and
- empower approved individuals to self direct their services by being involved in the management of their attendant carers and environment.

4.3 Service outcomes

An ACP Package must adhere to the standards of performance prescribed by the Disability Services Standards and any DADHC Quality Standards to ensure that each client:

- receives a planned service which is designed to meet their individual personal assistance needs, in the least restrictive way
- receives a service that is flexible in response to meeting their changing needs (services may increase through functional deterioration or decrease due to increased skills)
- has their right to privacy, dignity and confidentiality respected and recognised in all aspects of their life
- has the opportunity to participate as fully as possible in making decisions about the events and activities of their daily life in relation to the services they receive
- is supported and encouraged to participate and be involved in the community
- has the opportunity to develop and maintain the skills required to participate in activities that enable them to achieve valued roles in the community
- receives a service which recognises the importance of preserving family relationships and informal social networks; and
- receives a service which is sensitive to their cultural and linguistic diversity.

5 SERVICE ACCESS

5.1 Target group

The target group for ACP Packages are people aged 16 to 65 years with a physical disability or those who need personal assistance to complete activities of daily living or instrumental activities of daily living. Additional eligibility criteria are described in section 5.2.

5.2 Who is eligible for an ACP Package?

People with a physical disability or those who require personal assistance to complete activities of daily living and instrumental activities of daily living are eligible for an ACP Package if they:

- are aged from 16- 65 years of age
- are able to manage living in the community accessing appropriate community supports
- live in their own home, the family home or in leased accommodation where they are managing the lease
- can exercise control over their environment and direct and supervise their attendant carers or need the assistance of a third person to assist them to manage their care and
- are ineligible, not prioritised or are unlikely to require other DADHC provided or funded accommodation support services in the short to medium term.

Eligible applicants who need the assistance of a third person to assist them to manage their care due to their complex needs, limited decision making capacity or a deterioration of their cognitive function may include people for whom the Attendant Care Program is a suitable option and who have:

- an Acquired Brain Injury (ABI) and a physical disability (or who need physical assistance to complete tasks of daily living) including those who have had a stroke
- degenerative and neurological conditions including rapidly degenerative conditions and
- ventilation dependency (over 24 hours) in which case the package may be jointly funded and managed with NSW Health.

The ACP Packages may be further targeted depending on DADHC priorities and funding initiatives.

5.3 Who is not eligible for an ACP Package?

A person with a disability is not eligible for an ACP Package if they:

- live and intend to continue living in a government funded group home or other government funded residential accommodation including a funded facility with partial accommodation support funding
- live and intend to continue living, or plan to move permanently to another State or Territory or overseas
- have a high level of need such that they are unable to manage their needs within the levels set for an ACP Package
- have personal care needs that require the support of a Registered Nurse on an ongoing basis. The exception is where a Registered Nurse is required to assess, risk manage and train attendant carers to complete complex personal care tasks for clients
- have been assessed as suitable and eligible for other funded services providing the same service type(s)
- require more extensive levels of support and alternative forms of accommodation support than that provided under the ACP
- are unable or likely to be unable to take up an approved ACP Package within three (3) months of the Package being approved or six (6) months with written approval from the Attendant Care and Physical Disability Unit (ACPDU).

An approved client is not eligible to use ACP Package funds to supplement, complement or replace any accommodation service that is funded by a government agency to provide care and accommodation. This includes a residential respite or aged care facility, hospital, supported accommodation or correctional facility. Refer to 6.5 Interruption to services/use of approved services.

Applicants who are considered suitable for other funded services providing high level of in-home support will be re-referred to the identified services.

5.4 Intake

Applications are accepted from eligible applicants by the Attendant Care and Physical Disability Unit in DADHC. An Application Register is maintained when there are more applicants than places. Applicants are prioritised for assessment by using consistent criteria when places become available.

5.5 Prioritisation

Priority of access to an ACP Package will be given to applicants whose characteristics and needs match with the primary objectives of ACP. The approval of an ACP Package is aimed at preventing premature or inappropriate admission to long term residential care, maintaining the applicant's care in their own homes and enhancing the quality of life of clients and their carers.

Prioritisation criteria will assist in determining each applicant's need relative to those of other applicants and will determine the order in which assessment will be completed. Prioritisation and targeting will be coordinated with other DADHC Funded Programs and special funding initiatives and may change from time to time.

The elements of prioritisation include:

- high level of personal support and/or functional need
- other relevant information about health and functional self-care and daily living skills needs
- living arrangements, home and safety issues
- ineligibility or low priority for other government funded services of similar type
- inappropriate current living arrangements including residential aged care and long term hospital care
- unsustainable current living arrangements including limited or no access to support services
- level of formal and informal support available in the short or medium term to the applicant
- carer, family and relationship factors
- issues relevant to maintaining care at home
- need for assistance to participate in employment, education and leisure activities
- the wishes and priority needs of the applicant; and
- the assessed level and nature of care required to sustain care at home.

There are a number of strategic, service and environmental factors, such as level of available resources and availability of other services, which may also need to be considered.

5.6 Assessment

Assessment for an ACP Package is arranged for those with the highest priority when vacancies are available on the Program. Referral for an assessment does not guarantee a place on the Program or the approval of funding.

The purpose of the assessment is to validate the applicant's eligibility for an ACP Package, to validate and assess priority factors for consideration and to determine the amount and nature of support services required. The process also involves identifying, in conjunction with the applicant, other requirements for the successful transition (if appropriate) from hospital, rehabilitation or residential aged care to community living.

The assessment report provides the basis for consideration of approval of an ACP Package and also the basis for an Individualised Care Plan to be negotiated between the approved applicant, if appropriate, their family and/or advocate and their chosen ACP service provider. The assessment report describes the type of assistance and supports required to maintain care in the home.

5.7 Service approval

The Minister's delegated DADHC officer approves an ACP Package. Approval is dependent upon a number of factors including the number of available packages, priority for a package, any risks or concerns identified in the assessment and the nature and level of personal assistance required.

Services, level of service and specific requirements for inclusion and level of funding approved are generally consistent with the assessment report. Funding equivalent to one additional hour per week is approved to cover emergency situations or unplanned events. Approved applicants are allocated this emergency resource to cover supplementary non-regular situations such as recovering after an acute hospital stay, sudden change in the carer's situation or to enable the person to attend an unplanned out-of-home event. If the person uses the full funding allocation each week, they will need to have identified contingency arrangements to cover unplanned emergencies.

Approved applicants will receive a letter of offer from DADHC with details of the approval, conditions of acceptance of an ACP Package and information on the process to be followed including the choosing of an ACP eligible service provider.

Services must commence within three (3) months of an approval offer being made. If the package cannot be accepted due to circumstances beyond the person's control, this period may be extended up to a maximum of six (6) months. In this case written approval from DADHC is required. After this period, the ACP Package is offered to another prioritised assessed applicant. The original approval will remain 'in principle' and the applicant may be offered the next available vacancy if their eligibility status remains the same.

5.8 Conditions for accepting an ACP Package

To accept an ACP Package, it is necessary that the client or if appropriate the client's carer and/or advocate:

- has read and understood the ACP Package Guidelines
- agrees to receive services in line with the DADHC offer of funding and these Guidelines
- notifies DADHC of any compensation/damages claim that has been/will be lodged for an injury resulting in the need for ACP funding, and the status of that claim
- agrees to inform DADHC of the outcome of any compensation/damages claim and allows DADHC to view the Terms of Settlement of successful claims
- agrees to relinquish any other services funded by DADHC that are included in the ACP Package
- notifies DADHC as soon as possible of their preferred funding model; and
- notifies DADHC as soon as possible of their chosen service provider (if applicable) and a start date.

6 SERVICE DELIVERY

6.1 Service Activities

Service activities in an ACP Package may include:

- personal assistance to support the client to complete activities of daily living and instrumental activities of daily living in the home and in other locations such as a place of study, work or a community location
- specific specialist services or supports that are related to the person's condition or needs and may be needed from time to time to enable the safe and effective completion of the personal assistance support
- case or support coordination where the effectiveness of the ACP Package depends on the coordination of specialised or community supports
- provision and/or brokerage of related support services that are necessary to maintain the care at home or will maintain the caring relationships
- coordination of referrals and collaboration with time limited specialised case management support during periods of transition or change to manage the stabilisation of the ACP Package or the transition to new accommodation support arrangements
- training for attendant carers, carers and clients; and
- related support services that support the client with their care needs, are deemed appropriate and are approved for inclusion in a packaged arrangement.

Clients may not access other government funded services for the same service type/activity they are funded for through their ACP Package. Clients may access other services to support their independence and continue living in the community. This may include transport, home maintenance, community nursing, residential respite services, social or recreational programs, community participation programs and peer support.

Clients may access case management services including case management services funded through the Home and Community Care Program (HACC) for time limited periods to assist them to organise services or supports required during periods of crisis, change or transition.

6.2 Service features

Funding approved and conditions of approval are directly related to the ACP assessment and related reports. Service providers or directly funded clients in receipt of DADHC funding for an approved package must provide/receive the approved outputs in line with the approval and these Guidelines. The service delivery may be negotiated to reflect service specifications as outlined in these Guidelines and to ensure the services are both flexible and responsive.

Services are provided in the client's home. Where appropriate, the client may negotiate/organise (within the approved services) for personal assistance to be provided in other locations such as in the community, at a holiday, work or study location. Services must match the client's lifestyle requirements, including services being delivered outside working hours and on weekends.

An ACP Package must be person centered and reflect the client's needs and preferences in the Individual Service Plan and Service Agreement. How services are delivered will reflect flexibility and include the option to:

- save up to a maximum of 50 hours of personal assistance or the equivalent in funding at any given time and from one financial year to the next to use at a later date to enable clients to take a holiday or fulfil additional goals
- have services delivered at a different location when taking a holiday by negotiating a suitable arrangement with the service provider
- use funds to finance personal assistance while taking an interstate or overseas holiday for periods of up to three months per calendar year
- request the use of a small proportion of approved funding (no more than 20%) for disability related tasks/services not related to personal self-care tasks; and
- pool some hours e.g. for meal preparation or domestic tasks in order to maximise personal assistance in a household with more than one client approved for an ACP Package.

6.3 Service providers

Eligible ACP service providers are approved by DADHC through an Expression of Interest Application process. Eligible ACP service providers must be eligible under Section 6 of the *Disability Services Act NSW 1993* and commit to provide services in a manner that is consistent with the aims of the ACP and the objectives, principles and application of principles of the Disability Services Standards.

ACP service providers must:

- enter into a Funding Agreement with DADHC
- provide the approved services and outputs to each approved client
- develop an Individual Care Plan and Service Agreement with each client that reflects the client's assessed needs and preferences. Service providers must do this within the Terms of their Funding Agreement with the Department and in accordance with the ACP Package Guidelines
- develop and implement policies that reflect the ACP Package Guidelines
- facilitate client involvement in matters relating to choice, flexibility, individual care planning and the assumption of control of their service arrangements where ever possible. Advice in these matters should always be sought from the person with a disability in first instance and where appropriate advocate or carers can be also be consulted

- provide systems and procedures to support flexibility, client involvement and emergency back-up and support
- provide procedures and ensure clients are supported should they choose to change their ACP service provider including those listed below under **6.4 Changing service provider**
- be responsible for managing all human resource matters with staff including attendant care training both general and individual specific
- provide clients with information on other specialist and generic services that may enhance and support their life in the community and, where required, assist them to gain access to these services
- account to the DADHC for ACP Package funds and for negotiated client outcomes, as required under Section 6 of the *Disability Service Act NSW 1993* and the Funding Agreement
- notify the Attendant Care and Physical Disability Unit immediately of dates and issues that will result in changes to funding such as service start and cessation dates
- notify the Attendant Care and Physical Disability Unit of significant changes in the client's needs or situation that may result in temporary or permanent changes in funding approvals
- conduct an annual service review in line with the Service Review Policy or more frequently if required
- ensure quality, compliance and accountability for each individual's funding allocation and service; and
- monitor quality, cost and amount of service delivered by sub-contracted or brokered service providers.

Service providers are provided with a copy of the ACP assessment. The service provider and the approved client are responsible for developing the Individual Care Plan and Service Agreement which need to:

- be in line with the approved service outputs
- include flexible and responsive arrangements to meeting the care needs, in a way that:
 - can best accommodate the preferences and wishes of the approved applicant and
 - meets the requirements of the service provider under the Funding Agreement with the DADHC.

The Individual Care Plan and Service Agreement are to be reviewed by the service provider annually with the client/advocate/carer.

It is the responsibility of the approved client to work together with their chosen service provider to ensure the Individualised Care Plan and Service Agreement cover the key aspects of the services to be established; meet their essential requirements and needs in a way that maximises their choices and flexibility; reflect the requirements and

responsibilities of the service provider under legislation and their Funding Agreement; and make the most effective use of the approved DADHC funding.

6.4 Changing service provider

Clients may request a change of service provider and may change to another eligible ACP service provider that provides services in their Local Planning Area. Requests to change service provider must be accompanied by the reason for the request.

Service providers must:

- complete a service review and both parties make an effort to resolve any issues if the request to change is the result of conflict
- not withdraw services until the client has secured services from another provider or alternative arrangements are put in place
- agree on a change over date with the client and the new service provider
- inform the Attendant Care and Physical Disability Unit by email of the agreed change over dates
- inform the Attendant Care and Physical Disability Unit of the number of hours the client has saved at the change over date; and
- acquit to DADHC any funding paid on behalf of that client past the specified change over date (less any banked hours).

6.5 Interruption to services/ use of approved services

When a client ceases to receive an ACP Package services on a temporary basis due to a change in personal circumstances e.g. hospitalisation, entry to a correctional facility, admission to residential respite care or temporary move (interstate or overseas), their approval for the ACP Package is maintained for a period of up to three (3) months. The unused funds will be acquitted to DADHC at the end of the financial year.

If the interruption continues after three (3) months, a service review must be carried out within a fortnight and DADHC notified of the outcome. Where the interruption has been caused by factors beyond the client's control and the service provider understands that the client will resume services DADHC may maintain the approval for a period of up to six (6) months.

After six (6) months of services being interrupted the ACP Package is relinquished. Individuals can re-apply for an ACP Package should their circumstances change.

ACP funds can not be used during periods of interruption to supplement, complement or replace any accommodation service that is funded by a government agency to provide care and accommodation. This includes a residential respite or aged care facility, hospital, supported accommodation or correctional facility.

Clients who regularly under-use their approved services will be reviewed by service providers to ascertain whether the level of support being provided to them is still required. Service providers will notify DADHC of the outcome.

Service provision should not exceed the amount of funded support services approved on any regular basis. Service providers and clients must ensure that the Individual Care Plan and Service Agreement develop care routines and staff rosters that efficiently use allocated funding to prevent this situation. Outcomes of service reviews should be made available to the Attendant Care and Physical Disability Unit where possible options can be discussed.

6.6 Service Review

It is DADHC policy that services provided to clients receiving an ACP Package be reviewed annually. The client, if appropriate their advocate or carer, the service provider, DADHC regional or the Attendant Care and Physical Disability Unit staff can initiate a service review at any time if required. The aim of the review process is to ensure that services are responsive to the client's support needs and delivered in accordance with the ACP Package Guidelines. The Service Review policy also identifies the conditions under which ACP Package services may be discontinued.

Service providers who decide to discontinue services due to unresolved critical issues e.g. occupational health and safety issues, must conduct a service review, formally advise the client and the Attendant Care and Physical Disability Unit, provide a minimum of eight (8) weeks notice, and assist with the appropriate referrals to ensure the continuation of services.

7 PORTABILITY

An ACP Package is portable across New South Wales. There are eligible ACP service providers for each of the DADHC Local Planning areas. Approved clients who are having difficulties establishing service should discuss their options with DADHC.

The Program is not portable across State and Territory boundaries. The interstate portability protocol "*Moving Interstate: Assistance for People with Disabilities and their Carers*", has made provisions for clients moving interstate.

8 COMPENSABLE CLIENTS

Clients or if appropriate, their advocate or carer must notify the Attendant Care and Physical Disability Unit of any compensation/damages claim that has been lodged, or is intended to be lodged in relation to the illness, injury or disability for which they need care through their ACP Package.

Individuals in receipt of compensation payments which are intended to cover costs for care or support services will have their funding adjusted accordingly and be expected to pay up to the full cost of services received. Individual circumstances are assessed on a case by case basis to determine the actual amount of funding for past and future services that will be affected by the Settlement.

Clients have an obligation to update the Attendant Care and Physical Disability Unit on a regular basis of the status of claims. This includes notifying the outcome of any such compensation/damages claim and allowing DADHC to view the Terms of Settlement or be fully informed of the outcome.

Approved ACP clients are made aware of this Condition of Acceptance when they are notified of their approval offer.

Service providers are also required to notify the Attendant Care and Physical Disability Unit if they become aware that a client receives damages or compensation as a result of their injury.

Where an individual is waiting on the outcome of a claim or court proceedings, they may receive services on the understanding that, once settlement is reached or a judgment made, they will:

- reimburse up to the full costs of services already provided and
- meet the full or pro-rata cost of any on-going care or support services required.

9 GRANT MANAGEMENT AND SERVICE MONITORING

9.1 Grant management

The DADHC Grant Manager, who is a nominated officer at DADHC Regional office, will manage the Funding Agreement with one or several nominated ACP service provider(s) to ensure that the terms of that Agreement are being met. The management role encompasses responsibility for:

- managing the relationship between DADHC and the service provider e.g. providing advice and information and conducting, or facilitating negotiations
- managing the Funding Agreement e.g. coordinating reviews and updates to the Funding Agreement and ensuring the provider complies with the terms of the agreement; and
- monitoring the compliance of the service provider with the terms of the Funding Agreement and the quality of the services delivered to DADHC clients.

9.2 Monitoring

DADHC maintains an ongoing relationship with service providers to manage the Funding Agreement and monitor:

- service quality
- performance (against targets and performance indicators)
- compliance with the terms of the Funding Agreement including the requirement to complete Minimum Data Set (MDS) reporting ; and
- financial performance or viability.

9.3 Service quality

DADHC monitors service providers to ensure that services are delivered in a manner that is consistent with the aims of the ACP Package Guidelines, the Service Review Policy, the Disability Services Standards and the specifications of the DADHC Funding Agreement.

9.4 Financial monitoring

Expenditure is monitored through an acquittals process at the end of each financial year.

9.5 Output monitoring

Monitoring of outputs (hours of service provided/service events) is carried out through the examination of National Disability Agreement Minimum Data Set (MDS) reports. All service providers are required to complete MDS reports regularly and failure to do so is a breach of the Funding Agreement.

10 COMPLAINTS AND APPEALS

DADHC acknowledges the right of clients, carers and the community to complain regarding the services they are receiving. They also have the right to appeal the outcome of operational processes including eligibility and termination of services.

Complaints against service providers must be made in the first instance to the service provider. Clients have a right to expect that their complaint will be dealt with in accordance with the written policy and procedures of the service provider. Service providers must provide a copy of their complaint policy and procedures to clients at the time they commence services.

Complaints received by DADHC are handled in a manner that protects the privacy and dignity of complainants in accordance with the Privacy and Personal Information Protection Act 1998.

Appeals and complaints raised with DADHC will be addressed within 30 days of receipt of the grievance. Steps taken by DADHC will be communicated to the client.

Complaints about DADHC or service providers can also be directed to the NSW Ombudsman.

11 PROGRAM MANAGEMENT

The Attendant Care and Physical Disability Unit in conjunction with DADHC regional officers administer the ACP Packages.

The Attendant Care and Physical Disability Unit is responsible for:

- developing and reviewing policy, guidelines and procedures
- participating in the ongoing development, monitoring and evaluation of the Program
- processing applications, managing the Application Register and allocating vacancies
- referring prioritised applicants for an ACP assessment or re-assessment as required
- managing and monitoring Program funds at a State level, liaising with applicants, referrers, clients and service providers to get approved services established; and
- supporting clients and service providers with service development and improvement issues.

DADHC regional officers are responsible for the management of grants, monitoring, funding and financial acquittal issues and all service delivery issues including complaint and review management.

12 PROCEDURES

These Guidelines are supported by ACP Package Procedures. The Procedures provide further guidance in relation to these Guidelines.

Additional practical procedures will be designed as required.

13 ASSOCIATED POLICIES AND LEGISLATION

DADHC and those services provided, funded or licensed by DADHC are required to meet legislative requirements when administering or delivering services.

The primary related legislation, standards and guidelines include:

- NSW Disability Services Act 1993
- Home and Community Care Act 1985
- Home and Community Care Amending Agreement 1999
- Community Services (Complaints, Review and Monitoring) Act 1993
- NSW Ombudsman Act 1974
- Privacy and Personal Information Protection Act 1998
- Commonwealth State and Territory Disability Agreement 2002-07
- Occupational Health and Safety Act (NSW), 2000
- DADHC Policy: Feedback & Complaint Handling Principles & Guidelines (2005)
- ACP Service Review Policy; and
- ACP Direct Funding Model Guidelines.

14 DEFINITIONS

ACP Attendant Care Program

ACPDU Attendant Care and Physical Disability Unit

Acquired Brain Injury (ABI)

ABI refers to any type of brain damage that occurs after birth. It can include damage sustained by infection, disease, lack of oxygen, drug and alcohol abuse or physical trauma.

Activities of Daily Living (ADL's)

Are a defined set of activities necessary for normal self care. The activities include movement in bed (sitting in, rising from and moving around in bed), transfers, locomotion, dressing, personal hygiene and eating.

Appeal: A request or application to DADHC to review or change a decision.

Applicant: A person who has applied to DADHC for an ACP package.

Attendant carer: A person employed to provide personal care/assistance services to the client.

Carer: A person who has a major unpaid supporting role for the client. A carer would usually be a family member or partner.

Case Management :

Refers to the identifying and planning of services to meet the client's individual needs, the linking of the client to services able to meet their needs and the monitoring and evaluation of these services. Case management may also include assessment of individual needs, development of a support plan, coordination of services and the provision of information.

Client: A person who has been assessed as eligible, prioritised for services and approved as the service recipient.

Compensable client:

An individual who has received, expects to receive or is actively seeking compensation to cover the cost of care or support as a result of an accident, injury or illness.

Complaint: An expression of concern, dissatisfaction or frustration with the quality or delivery of service, a policy or procedure, or employee conduct.

DADHC: Department of Ageing, Disability and Home Care.

Domestic assistance:

This service type includes, but is not limited to, assistance with (or supervision of):

- household tasks including; house cleaning, removal of household waste, ironing, personal laundry services including laundering of clothing and bedding that can be machine-washed, but excluding cleaning of clothing requiring dry cleaning or another special cleaning process
- meal preparation
- bed making
- banking and use of computer for essential shopping
- assistance with essential shopping;

The service activities do not include home maintenance, childcare, work in a family business, doing more than the client's share of the housework, providing services to other household members, or professional services such as carpet laying or plumbing.

Funded Accommodation Facility:

A supported accommodation facility/unit that receives government funding (other than the ACP Packages funding) to provide personal care services and support to its residents.

HACC Program: Home and Community Care Program.

Individual Care Plan:

A documented plan that identifies personal goals and the strategies to achieve these goals. The Plan also describes how services will be provided e.g. Service roster, description of tasks and provision for back up and emergency situations.

Instrumental Activities of Daily Living (IADL's)

Are activities of daily living that are not necessary for fundamental functioning, but enable the person to live independently within the community e.g. light housework, preparing meals, taking medications, shopping, using a telephone, managing money, communication device use, financial management, health management and maintenance, safety procedures and emergency response.

Motor Neurone Disease:

Motor neurone disease is the name given to a group of diseases in which the nerve cells, neurones, controlling the muscles that enable us to move around, speak, breathe and swallow, fail to work normally. With no nerves to activate them, muscles gradually weaken and waste. The patterns of weakness vary from person to person.

NDA MDS:

The National Disability Agreement (formally known as the Commonwealth/State and Territories Disability Agreement) Minimum Data Set (MDS). The purpose of MDS collections is to obtain reliable, consistent data that can be used for planning, program evaluation and monitoring.

One-off funds: Funds approved on a one off basis (non recurrent).

Personal assistance:

A variety of services that support a person to live independently in the community with a focus on personal care. Services may include assistance with self-care, domestic chores, some transport and support to access the community.

Personal care services:

Personal assistance, including individual attention, support, supervision and physical assistance with:

- a. bathing, showering, toileting, personal hygiene, shaving, hair care and grooming, eating, drinking, dressing and undressing, limited nail care (following appropriate professional assessment), and using dressing aids
- b. communication including assistance to address difficulties arising from impaired hearing, sight or speech, or lack of common language, and assistance with the fitting of sensory

communication aids, checking hearing aid batteries and cleaning spectacles and assistance in using the telephone

- c. mobility (in bed and out of bed) such as to sit up, turn, stand and walk, sit, to transfer to commode, wheelchair, chair or vehicle;
- d. fitting and use of appliances such as splints and callipers or hoists; and
- e. monitoring self medication

Portability:

This term refers to the ability to maintain an ACP Package when moving address. ACP Package funds are portable within New South Wales but are not portable to take to another State/Territory on permanent basis.

Rapidly Degenerative Conditions:

Are degenerative neurological conditions where the person has a prognosis/ life expectancy of less than 5 years and who has had a rapid decline of function across one or more daily living areas of functioning or are expected to have a rapid decline of function within a period of few months e.g. Motor Neurone Disease.

Service Needs Register:

A record of all applicants who have not yet been approved for services.

Service provider:

An organisation that has been approved by DADHC as eligible to provide ACP Package services.

Specialised Services/Supports:

This can include behaviour support services, specialised assessments and therapy services provided by government, non-government or private health and clinical professionals.

Respite Care:

Assistance received by a carer from a substitute paid carer who provides supervision and assistance to their care recipient in their absence. Respite care is a limited, planned break for the carer of a person with a disability or frail aged person.