|  |
| --- |
| Document Metadata |
| **Target Audience** | All Clinical Employees |
| **Jurisdiction** **Jurisdiction Exclusions** | NT Health N/A |
| **Document Owner** | Kim ClayworthSenior Manager Community Allied Health & Aged Care, TEHS  |
| **Approval Authority** | David Braines-MeadActing Chief Executive Officer |
| **Author** | TEP Advisory Committee  |
| **PGC/SharePoint ID: HEALTHINTRA-1880-8500** | **PGC/Content Manager ID:** EDOC2018/44724 |
| **Version Number:** | Version: 6.0 |  | Approved Date: 01/02/2021 | Review Date: 01/02/2024 |
| This is a NT Health Policy Guidelines Centre (PGC) Approved and Controlled document. Uncontrolled if printed. |

# Policy Statement

To ensure fair and equitable access to assistive technology through the Territory Equipment Program (TEP).

# Policy Purpose

TEP aims to provide prescribed items of assistive technology to assist eligible residents of the Northern Territory with a permanent or long term disability, to enhance their safety and independence, and to assist them to live and participate in their community.

This policy has been developed to transition the former Disability Equipment Program (DEP) to a service model for the provision of assistive technology for people with a functional impairment, within a contemporary service system model and within existing funding.

This policy introduces assistive technology availablility, exclusions and access requirements.

# Policy Details

## Responsibilities

All staff have a responsibility to familiarise themselves with the TEP policies and procedures.

## Policy Content and Implementation

The TEPaims to provide the essential and basic items of assistive technology, which meets the assessed needs of the client. To do this effectively, prescriptions are assessed against clinical and financial eligibility criteria and prioritised.

## Items of Assistive Technology Provided

Items of assistive technology that the TEP provides assistance to fund are categorised as follows:

* Communication Aids and Devices
* Aids for Daily Living
* Bed Equipment
* Pressure Management Equipment
* Wheeled Mobility Aids
* Ambulant Mobility Aids
* Personal Emergency Response System (PERS)
* Home Modifications
* Oxygen/Respiratory
* Continence Aids

The specific approved items for each assistive technology category are listed in the TEP Approved Equipment List. Each assistive technology category has separate TEP clinical guidelines that include specific criteria and prescriber information.

An Approved Prescriber can prescribe an item that is not included in the TEP Approved Equipment List or is a non-disability specific item (such as lever taps or a hand held shower hose), however clinical approval must be sought from the appropriate clinical delegate. Clinical justification for the item is required to ensure that it is the most essential and basic item of assistive technology that will meet the client’s need. Standard prioritisation processes and the maximum subsidy amount for a comparable item on the TEP Approved Equipment List will be applied.

## General Exclusions

The TEP does not provide the following:

* items of assistive technology costing less than $100, with the exception of continence and oxygen consumables. This does not apply for stock items on the TEP Approved Equipment List;
* items of assistive technology that do not comply with Australian Standards where these exist or items of assistive technology that are not registered with the Therapeutic Goods Administration, as applicable;
* items of assistive technology primarily for sport, recreational, educational or employment purposes;
* optional accessories and/or modifications;
* items of assistive technology that have a purely therapeutic purpose, that do not directly contribute to a client’s mobility or independence;
* items associated with medical or surgical interventions including life support units, (ventilators), prosthesis, orthopaedic items, lymphoedema and burn garments;
* reimbursement for devices already purchased or for repairs completed without approval;
* home modifications and provision of fixtures for installation in properties owned by Territory Housing, Housing Associations and Co-Operatives or other publicly owned homes.

## Specific Exclusions

The TEP will not provide air-conditioners, personal aids and small appliances (cutlery, crockery etc), wigs, TENS machines, sheepskins, corsets, orthotics and prosthetics, mammary prosthesis and glucometers. This is not intended to be a finite list, rather an indication of items that will not be provided.

The TEP LE Alternate Equipment Sources list provides possible organisations that may be able to assist with contributions towards the supply of these items.

## Accessing TEP Assistance

Access to TEP assistance is based on assessed functional or clinical need by an Approved Prescriber. This involves the submission of an application and prescription form for new clients. Both forms must be submitted to determine eligibility and funding approval.

The application should be completed by an Approved Prescriber in conjunction with the client. This form provides personal and demographic information and details of the client’s functional impairment and is the basis for determining eligibility.

The prescription is completed by the Approved Prescriber. This form provides information regarding the client’s assessed need and details the minimum requirements of the item of assistive technology recommended. The Prescription Form is the basis for determining approval of the item of assistive technology to be funded.

New clients from 1 July 2019 are required to verify their ongoing financial eligibility for TEP by providing evidence that they are a beneficiary of a full Centrelink Disability Support or Age Pension at the time of each prescription. Subsequent TEP Applications are required to be completed when a client’s personal or financial details are known to have changed.

Clients previously deemed eligible on the basis of Financial Hardship are required to re-apply for Special Consideration and submit proof of income for new prescriptions if more than 12 months has passed.

|  |
| --- |
| Quality Assurance |
|  | **Method** | **Responsibility** |
| **Implementation** | Document will be available for all staff via the PGC. | PGC Administrators |
| **Review** | TEP policies - review every three yearsTEP procedures – review annually to ensure continuous quality improvement. | Senior Manager Community Allied Health & Aged Care, TEHS  |
| **Evaluation** | Adverse events will be recorded in the patient’s clinical notes and Riskman. | Senior Manager Community Allied Health & Aged Care, TEHS |
| **Compliance** |  |  |

|  |
| --- |
| Key Associated Documents |
| **Key Legislation, By-Laws, Standards, Delegations, Aligned & Supporting Documents** | TEP Policy and Procedure ManualTEP PO-2 Financial Eligibility PolicyTEP PO-4 Prioritisation PolicyTEP GL TEP GlossaryTEP LE Alternate Equipment Sources |
| **References** |  |

|  |
| --- |
| Definitions, Acronyms and Alternative Search Terms |
| Term | Description |
| **Approved Prescriber** | An allied health professional or specialist nurse registered with the TEP with prescribing rights according to professional qualification, experience and assistive technology category. |
| **TEP Approved Equipment List** | A list of specified items of assistive technology each having clinical guidelines and conditions for prescription. |

|  |
| --- |
| **National Safety and Quality Health Service Standards** |
| cid:image001.jpg@01D658ED.D030F090Clinical Governance | cid:image002.jpg@01D658ED.D030F090Partnering with Consumers | cid:image003.jpg@01D658ED.D030F090Preventing and Controlling Healthcare Associated Infection | cid:image004.jpg@01D658ED.D030F090Medication Safety | Comprehensive care iconComprehensive Care | cid:image006.jpg@01D658ED.D030F090Communicating for Safety | cid:image007.jpg@01D658ED.D030F090Blood Management | cid:image008.jpg@01D658ED.D030F090Recognising & Responding to Acute Deterioration |
|[x] [ ] [ ] [ ] [ ] [ ] [ ] [ ]