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# Purpose

The purpose of this guideline is to specify Territory Equipment Program (TEP) funding criteria for this group of assistive technology; items provided; eligible prescribers and provide a basis for consistent and transparent decision making.

# Guideline

Adaptations to the home environment so that a person with disabilities can live independently and safely as possible.

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| **Includes** | | **Eligible Prescribers** |
| **Minor (Level 1) Home Modifications**   * Grab Rails – Off the Shelf * Banister Rail * Lever Taps * Hand held Shower hose * Ramp – Portable | | Occupational Therapist |
| **Major (Level 2) Home Modifications**   * Bathroom or access modifications. * Kitchen modification * Widening doorways * Grab Rails – Custom Made * Ramp – Fixed | | Occupational Therapist with:   * More than 1 year clinical experience; and * 3 previous prescriptions for Level 2 General equipment of the specified Equipment Type AND/OR * Completed Advanced Home Mods course and any prerequisites |
| **Excludes:**   * Items under $100 * Items considered household norms including flooring, toilets, baths, showers with hob/step, vanity units, mirrors, fans, towel rails or hot water systems * Concrete paths, driveways or fences * Modifications on a public access route e.g. ramps will not be built on council land. This includes common areas such as rails or paths in blocks of units used by other residents | | |
| **Alternate Funding Sources for Aids and Equipment**  Availability of equipment funding from other sources must be investigated.  This list should not be considered exhaustive, as further alternative funding sources may be available. | | Items for aged clients may be provided through a Commonwealth Home Care Package 1, 2,3,4 or a Residential Aged Care facility Items may be funded through an approved National Disability Insurance Scheme (NDIS) Plan  Compensable and private funding such as Department of Veterans Affairs (DVA), Motor Accident Compensation (MAC)or other Insurance schemes  Public/community housing organisations e.g. Department of Housing and Community Development, Housing Co-operatives |
| **Identification of Need/Clinical Criteria** | | |
| **Home Modifications may be funded where:**  1. A client is unable to access the house or areas of the house due to structural barriers **AND/OR**  2. A modification would increase the client’s safety and independence and/or the carer’s safety.  The provision of major home modifications is based on clinical and functional criteria and not on leisure or recreational or home security needs. | | |
| **Other Considerations** | | |
| * For TEP clients all home modifications must be completed by a registered builder. For CHSP clients, home modifications may be completed by a licensed or registered tradesperson. * TEP will fund modifications to only one access/egress point per home * TEP is unable to fund modifications to areas of the home that are not structurally sound * Homemodification quotes submitted to TEP must only relate to modifications required for client’s assessed clinical needs. TEP will not fund home modifications retrospectively * All future repairs and maintenance to home modifications are the responsibility of the client * TEP will only approve modifications to the client’s primary place of residence. Home modifications are not available for secondary places of residence such as holiday homes or another family member’s home. * TEP will not fund modifications for places of short-term occupancy i.e. less than 12 months or places of temporary or casual use such as weekend leave from a nursing home or respite * For private rental properties, TEP will only fund Minor (Level 1) modifications. Landlord consent must be obtained prior to installation * TEP will not restore a property to its former state once the modifications are no longer required * Removal of asbestos, this is the responsibility of the owner of the property   For Grab Rails   * TEP will not fund supply of rails without installation. Clients wishing to arrange for installation of their rails will be required to supply their own rails.   For Ramps and External Rails   * TEP will fund ramps when the client is wheelchair or walker dependent, or unable to negotiate steps * TEP will fund a ramp for one entrance only * TEP will fund one rail at an entrance unless functional need can be established for multiple rails * TEP will fund the purchase, install and gift recycled rubber ramps (such as Tyrex and Envirorubber) to a client however will not assist with retrieval or disposal should they no longer be needed. * Demountable/modular ramps remain the property of TEP. Demountable/modular ramps will be retrieved by TEP when they are no longer needed * Demountable/modular ramps should be installed over existing steps, as TEP will not fund any works required to ‘make good’ the access point once ramps are removed * TEP will fund ramps and rails to provide direct access to the home. Rails and ramps to the garage/carport will be considered if this is the main access route for the client. Ramps and rails to general areas (e.g. work shed or garden beds) will not be considered * A landing may be required where ramp meets existing path, TEP will fund ramp landing maximum of 1600mm in length as per Australian Standards, pending direction of travel   For Major (Level 2) Modifications   * Major/complex home modifications should only be considered when all other equipment, minor modifications and training options have been exhausted. Ensure that the prescription demonstrates that this is the case * Structural alterations/additions, with the exception of widening doorways, are not funded by TEP. This includes any alteration or addition to a building, which changes the existing structure of the building and/or its foundations * TEP will only fund one major home modification every 5 years. It is recommended that where modifications are required for more than one room, the details of the proposed rooms requiring modifications be submitted and considered at the one time * TEP will not fund the same modifications for a client within 5 years. Additional modifications may be considered where the client’s functional ability has changed significantly or there are extenuating circumstances that necessitated the client moving to another home * Where a new home or addition is being constructed, it is expected that prior consideration will be given to the design, specifications and construction of the building in relation to the needs of the client. In regard to a new home or extension, TEP will fund only the difference between the specialised item and the household norm e.g. the monetary difference for specialised taps over a standard tap set * TEP will fund modifications made using basic cost items only, based on the clinical need. The homeowner may choose higher cost items or arrange for additional modifications to be completed at the same time as the essential modifications. This work should be itemised and a separate quote presented to the homeowner who will be responsible for all additional costs and should make private arrangements with the builder for these items * TEP will not fund to undertake repairs or modifications that are the result of long term neglect of the home owner   For Bathroom Modifications   * TEP will fund modifications to one bathroom only * TEP can make good the walls and floor area disturbed by the modification however, it is unable to consider modifying the remainder of the room to match the modified wall or floor covering. If the client wishes to proceed with this then they will need to fund the additional works at their own expense   For Paths   * TEP does not carry out maintenance on paths or replace cracked paths   For Children in the Care of the Minister   * For homes where Territory Families (TF) has placed children, discussions and documentation with TF regarding future planning is required. TF are responsible for any amount over the cost of the Maximum Subsidy as documented in the shared care plan   For Public and Community Housing   * TEP will not provide home modifications to properties owned by Department of Local Government, Housing and Community Development, Housing Associations and Co-Operatives or other publicly owned homes. This includes properties used for the purpose of supported accommodation * Home modifications are not provided to residents of boarding houses or residential aged care facilities, such as nursing homes, hostels or related services * The majority of houses in Indigenous communities are owned by Department of Local Government, Housing and Community Development and home modifications remain their responsibility. The exception is housing in outstations which are managed by the local Regional Council. These home modification recommendations should be forwarded to the Regional Council office in the main community. While the expectation is that Regional Council will fund and organise these home modifications, in practice this does not always happen   Approved Prescribers must continue to recommend home modifications and their funding to the Regional Council. Case by case negotiation may sometimes result in TEP funding an item considered essential for the client’s basic safety and independence in the community. TEP is under no obligation to fund these items and any decision to fund will remain with the TEP program. There may be communities that do not come under a Regional Council but are classified by the NTG as outstations and have their own funding for housing.  Standards   * Wherever possible and appropriate modifications should meet either of the following Australian Standards (AS):   AS4299-1995 Adaptable Housing **OR**  AS1428-2009 Design for access and mobility Part 1: General requirements for access – New building work AS 1428.1 – 2009 Australian Standards   * All electrical work in wet areas should comply with AS/NZS 3018:2001 * All ramps should comply with AS1428 * Where appropriate all modifications should meet NT Government and Local Government building requirements. The builder is responsible for obtaining necessary building permits or other certificates.   Prescribers use these standards as a starting point for prescribing home modifications however, their recommendations and specifications may deviate in order to meet the functional goals of the client. Any significant deviation from the Australian Standards needs to be clearly documented with the clinical justification included in the prescription form | | |
| **Clinical Priority** | | |
| While a person may be eligible for TEP, it does not guarantee that a particular aid or item of equipment will be provided. This decision is dependent on the clinical priority and the availability of funds.  **New or re-issue stock items will be issued as soon as possible following approval and the processing of the prescription.**  To ensure clients most in need are assisted, each prescription item will be clinically prioritised using the following criteria.  This is an indication of the clinically assessed priority for the prescribed item and should be clearly justified by the prescriber within the prescription. | | |
| * **High Urgency Category** | The provision of aids or equipment which are ***essential***to :   * The safety of the client/carer in the home * The continuation of the current care/living arrangements * The client’s independent functioning in the home | |
| * **Medium Urgency Category** | The provision of aids or equipment which will ***improve*** the:   * Safety of the client/carer in daily living activities * The client’s independent functioning in daily living activities   The provision of aids or equipment that will ***maintain*** the client’s current care/living arrangements. | |
| * **Low Urgency Category** | The equipment ***is therapeutic based*** equipment that increases the client’s mobility and communication abilities in the long-term  The equipment ***contributes*** to the client’s quality of life but is not essential for their current care/living arrangements. | |

**Please note:** These prioritisation guidelines are the standard for TEP. In this Clinical Guideline, “aids” and/or “equipment” refers to Home Modifications.

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| **Equipment Decision and Justification** |
| **Client Factors** |
| **Provide**   * The client’s functional goal with the modification * A brief description of functional abilities, such as mobility, upper limb function, strength, transfers etc. * Clinical need for modifications   **Confirm**   * That safety and risks have been considered * Home ownership – privately owned, privately rented, public/community housing * Future plans re accommodation, living location   **Consider**   * Whether a piece of equipment would achieve the same outcome * The activities the client will perform with the modification, including transfers * Cultural aspects of the household * Potential disruption to the home environment which may be caused by modification being undertaken and how client will manage during this time i.e. is there a need for alternate accommodation arrangements during completion of works; this will need to be arranged by client at client’s own cost |
| **Social/Carer Factors** |
| **Confirm**   * Home ownership – privately owned, privately rented, public/community housing. Refer to resources for documents for landlord/owner agreements   **Consider**   * Client’s level of assistance required to complete functional tasks * Whether provision of modification will increase or decrease physical or other load on carers * Whether modifications will impact on other household members’ access and safety * That there is a plan for training clients/carers in the use of modifications such as ramps |
| **Environmental and Equipment Factors** |
| **Provide**   * Resources as appropriate for modification level   **Confirm**   * If home is structurally sound. TEP will not recommend home modifications for homes that are not structurally sound * Which access/egress point is the primary access for use * Home visit has been conducted to assess the home environment * Modification is compatible with the client’s: * functional level * basic mobility needs * current equipment including dimensions, turning circle requirements etc * planned equipment including dimensions, turning circle requirements etc   **Consider**   * Duration of proposed works * Position of hand held shower hoses that are height adjustable on a vertical rod or a weight bearing rail and their placement in relation to water pipes in the shower and bath area, prescribers need to consult with registered builder or tradesperson. |
| **Trial or Investigation** |
| **Trial or Investigation of the equipment may be required.**  Refer to TEP Approved Equipment List.  Trial of equipment as alternative to modification must be considered  **Provide**   * Objective evaluation of the options considered and trialled/investigated and their client’s ability to use alternative options * Reasons why comparative options were unsuitable, including information about the client’s functional use of the equipment where applicable |
| **Plan for Delivery** |
| * All work must be carried out by a registered builder and comply with relevant legislation   For Minor (Level 1) Home Modifications  **Provide**   * Name and contact details of client/carer and any clinicians who must be notified prior to delivery * Delivery instructions   For Major (Level 2) Home Modifications  **Provide**   * Name and contact details of client/carer and any clinicians to arrange for Client Contribution Agreement to be completed and returned to TEP office. * Name and contact details of client/carer and any clinicians who must be notified prior to delivery. * Delivery instructions |
| **Plan for Equipment Review** |
| It is the prescribing therapist’s responsibility to ensure correct fitting and client education for TEP equipment on issue.   * Prescribers must: * undertake a review of all home modifications, to ensure correct positioning and achievement of objectives and complete required resources * monitor and review modifications progress * review the completed modification to ensure the end product meets the recommended prescription modifications   At completion of Level 2, works prescriber must complete the TEP HM-C Home Mods Certificate of Completion (see Resources) and return to TEP work unit. |
| **Resources** |
| Resources to be submitted **with a prescription** form   * **MINOR (LEVEL 1) HOME MODIFICATIONS**   Provide the following:   * TEP HD Home Modification Diagram   Refer to TEP intranet/internet for document  **AND**   * TEP GR-D Grab Rail Disclaimer Form   Refer to TEP intranet/internet for document  **AND, as required**   * TEP GR-C Grab Rail Owner Landlord Consent   Refer to TEP intranet/internet for document   * **MAJOR (LEVEL 2) HOME MODIFICATIONS**   Provide the following:   * TEP HD Home Modification Diagram   Refer to TEP intranet/internet for document  Resources to be submitted **following approval**   * **MAJOR (LEVEL 2) HOME MODIFICATION**   **Prior to commencement** of works provide the following:   * TEP HM-D Home Modifications Disclaimer   Refer to TEP intranet/internet for document  **AND**   * TEP HM-1 Home Modifications Agreement Between Owner/s and TEP   Refer to TEP intranet/internet for document  **AND**   * TEP HM-1A Home Modifications Agreement between Owner/s and Builder (Schedule A)   Refer to TEP intranet/internet for document  **AND**  **At** **completion** of works provide the following:   * TEP HM-C Home Mods Certificate of Completion   Refer to TEP intranet/internet for document |
| **For Reference** |
| * Australian Standards (subscriber site)   <http://www.saiglobal.com/>   * NSW Home Modifications Information Clearinghouse   <http://www.homemods.info/>   * An Occupational Therapist’s Guide to Home Modification Practice, 2010   Authors: Desleigh DeJonge and Elizabeth Ainsworth  Published by SLACK Incorporated, USA ISBN 9781556428524   * Building Advisory Service – Guidelines and Policies   [www.lands.nt.gov.au/building](http://www.lands.nt.gov.au/building) |

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| Quality Assurance | | |
|  | **Method** | **Responsibility** | |
| **Implementation** | Document will be available for access via the PGC | PGC Administrator | |
| **Review** | Document will be reviewed within 5 years or when changes in practice occur | TEP Advisory Committee, Primary & Public Health Care, Top End Health Service and Central Australia Health Service. | |
| **Evaluation** | Document will be evaluated informally at time of review | TEP Advisory Committee, Primary & Public Health Care, Top End Health Service and Central Australia Health Service. | |
| **Compliance** |  |  | |

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| Key Associated Documents | |
| **Key Legislation, By-Laws, Standards, Delegations, Aligned & Supporting Documents** | See For Reference |
| **References** | These Clinical Guidelines have been adapted from the New South Wales (NSW) Health EnableNSW Prescription and Provision Guidelines available at the following site: http://www.enable.health.nsw.gov.au/home/forms-and-guidelines |

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| Definitions, Acronyms and Alternative Search Terms | |
| Term | Description |
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| Evidence | | | |
| **Reference** | **Method** | **Evidence Level (I-V)** | **Summary of Recommendation from this Reference** |
| N/A | N/A | N/A | N/A |

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| **National Safety and Quality Health Service Standards** | | | | | | | |
| cid:image001.jpg@01D658ED.D030F090  Clinical Governance | cid:image002.jpg@01D658ED.D030F090  Partnering with Consumers | cid:image003.jpg@01D658ED.D030F090  Preventing and Controlling Healthcare Associated Infection | cid:image004.jpg@01D658ED.D030F090  Medication Safety | Comprehensive care icon  Comprehensive Care | cid:image006.jpg@01D658ED.D030F090  Communicating for Safety | cid:image007.jpg@01D658ED.D030F090  Blood Management | cid:image008.jpg@01D658ED.D030F090  Recognising & Responding to Acute Deterioration |
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