

Policy 9	SERVICE ACCESS
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Record of policy development		
Version	Date approved	Date for review
2.4	November 2020	November 2022
2.2	May 2019	January 2021
2.3	October 2017	October 2020

Policy purpose: Coastlink ensures that each client’s access to services is based on consultation with the client (and/or their representative), equity, consideration of available resources and program eligibility.

Policy: Coastlink will:

- identify and address barriers to access for people in the target group/s
- use service planning to maximise accessibility for people in the target group/s, ensuring that all services, activities, facilities and premises are designed to maximise physical and cultural accessibility for clients
- use proactive information strategies for potential client groups to increase knowledge of and understanding about the organisation and the services offered
- regularly review how accessible services are and use this information to improve access wherever possible

Relevant Standards

NSW Disability Service Standards:

- | | |
|------------------------------|--------------------------|
| 1. Rights | 4. Feedback & Complaints |
| 2. Participation & inclusion | 5. Service Access |
| 3. Individual outcomes | 6. Service Management |

NDIS Practice Standards:

1. Rights and Responsibilities
2. Provider Governance and Operational Management
3. Provision of Supports
4. Support Provision Environment
5. High Intensity Daily Personal Activities
6. Specialist Behaviour Support
7. Implementing Behaviour Support Plans
8. Early Childhood Supports
9. Specialised Support Coordination
10. Specialist Disability Accommodation

Aged Care Quality Standards	
1. Consumer dignity and choice	5. Organisation’s service environment
2. Ongoing assessment and planning with consumers	6. Feedback and complaints
3. Personal care and clinical care	7. Human resources
4. Services and supports for daily living	8. Organisational governance

Related Legislation & References
Aged Care Act 1997 (Cth), Schedule 2 User Rights Principles 2014. Charter of Rights and Responsibilities – Home Care
Aged Care Quality & Safety Commission
Better Practice Guide to Complaints Handling in Aged Care Services (2013)
Children and Young Persons (Care and Protection) Act 1998
Commonwealth Home Support Programme Guidelines
Commonwealth Privacy Act 1988
National Disability Insurance Scheme (Practice Standards—Worker Screening) Rules 2018
National Disability Insurance Scheme (Provider Registration and Practice Standards) Rules 2018
National Disability Insurance Scheme Act 2013
National Disability Insurance Scheme Code of Conduct
NDIS Quality and Safeguards Commission
Ombudsman Act 1976
United Nations Convention on the Rights of Persons with Disabilities
Work Health and Safety Act 2011

Related Procedures	
Documents/Forms	
Funding details/documents	Current Grant Funding– CFO’s office Superseded – filing cabinets behind

	Current NDIS Bookings and Service Agreements in folders with Coordinators – Booking amounts on Consolidated Spreadsheet and Scanned into client files (S: Drive) Booking budget in Client Management System
Hazard reports and HAZPAK checklists	Client Management System and identify risk on client files
Home Safety Checklist	Client Management System and client files
Incident/Accident	Client Management System and client files
Deciding Priorities For Assistance Notes	Client Management System and client files (old WHS Register)
FACS Eligibility Form for Younger People with Disabilities (YPWD)	Client Management System and client files (historic data maintained in client files)
Client records	Client Management System and client files
Client Spreadsheet	Shared Drive (Consolidated data sheet)

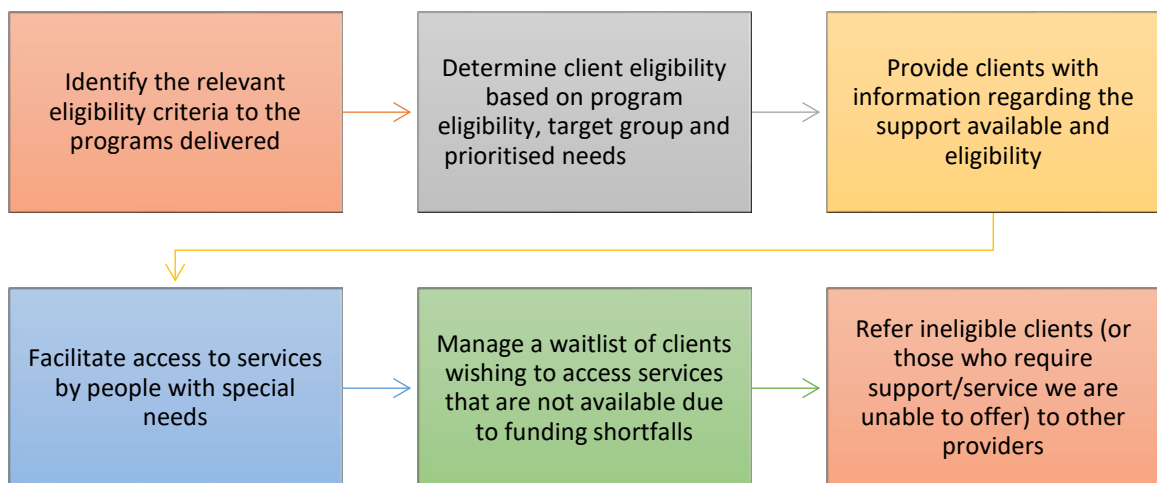
Responsibilities and delegations

This policy applies to: Clients Employees/volunteers	It will be distributed through: Client handbook, Coastlink website, Coastlink brochures Employee/volunteer handbook, shared drive
Policy approval	CEO

Definitions

Refer to Definitions list at front of Coastlink Policy and Procedure Manual

SERVICE ACCESS PROCEDURE OVERVIEW



SERVICE ACCESS PROCEDURE

9.1 Eligibility for Services

9.1.1. Summary of Eligibility Criteria for funded programs

Commonwealth Home Support Program (CHSP)

The following people are eligible for CHSP services:

Frail, older people (aged 65 years and over or 50 years and over for Aboriginal and Torres Strait Islander people) and who need assistance with daily living to remain living independently at home and in the community

Frail, older Commonwealth Home Support Programme clients aged 65 years and over (50 years and over for Aboriginal and Torres Strait Islander people) will be the direct service recipients of planned respite services, which will allow regular carers to take a break from their usual caring duties

DISABILITY PROGRAMS – National disability approved clients.

9.1.2 People with Disabilities

People with disabilities can self refer, can be referred by family and friends (with the person's permission) or any other organisation such as Coordination of Supports services, GPs, other allied professionals or directly from the National Disability Insurance Agency (NDIA) or their agency representatives (i.e. Local Area Coordinators).

People with disabilities are generally aged between 0–64 and with a permanent and significant disability as assessed under the NDIS guidelines. People receiving funding under continuation of support arrangements with the NDIA may be over 65 years of age.

All services are allocated in line with NDIS funding arrangements or through self-funding arrangements.

The eligibility of people with disabilities seeking to access NDIS funding for disability services will be determined through the NDIA eligibility criteria.

9.2 Accessing Services

Clients and carers are not excluded from access to the service on the grounds of their gender, marital status, religious or cultural beliefs, political affiliation, particular disability, ethnic background, age, sexual preference, inability to pay, geographical location or circumstances of the carer.

Commonwealth Home Support Program (CHSP)

CHSP clients are referred by My Aged Care Contact Centre, with or without a Regional Assessment Service (RAS) assessment, through the My Aged Care provider portal.

If a client contacts COASTLINK directly in the first instance we refer them to the My Aged Care Contact Centre using the referral form available on the My Aged Care website (www.myagedcare.gov.au) or assisting them to make contact by telephone.

9.2.1 My Aged Care Portal

The My Aged Care provider portal is used by COASTLINK to maintain information about the CHSP services we provide, including availability. To ensure referrals from My Aged Care the information on the portal must be kept up to date. The Aged Care Coordinator is responsible for this.

The portal is also used to:

- Accept, reject or waitlist referrals for services
- Review the client record before delivering services, and update the client record with service delivery and care planning information
- Request a new assessment if the client's needs have changed.

9.2.2 NDIS CLIENTS

The NDIA is responsible for administering the NDIS. They and their partners (Local Area Coordinators) are responsible for the preparation of Support Plans for each NDIS participant. Once a Plan has been received by the client, contact may be made with support services such as COASTLINK.

COASTLINK discusses the Plan with the client or their carer to develop a service agreement, provide quotes and a booking for agreed supports.

Once the agreements and bookings are signed, a booking is lodged by one party and agreed to by the other party through the NDIA PRODA on-line system.

Supports may commence once agreements and bookings have been agreed and processed.

9.2.3 CLIENT INVOLVEMENT

Clients (and/or their representatives) are consulted about the services they identify as requiring. Eligibility is determined in the first instance and then further discussions are held with the Coordinator regarding the assessed needs and the services required.

Accurate and up to date service information will be made available to enable:

- new or prospective clients to make informed decisions about their use of the service
- referring agencies to make appropriate referrals
- staff to discuss and negotiate the expectations of clients or referring agencies.

9.2.4 Individual Care and Support

People who are frail aged and younger people with disabilities want more choice and control over the services they receive.

Both levels of Government are legislating to make individual care the centre of the community care system through the NDIS and Consumer Directed Care:

9.2.5 Consumer Directed Care

COASTLINK has not yet been awarded aged care packages but continues to tender for these packages.

Clients who are provided support through a Home Care Package will be supported to receive their package on a Consumer Directed Care (CDC) basis. Note: All new packages from August 2013 are delivered via CDC and all other packages will be transitioned to a CDC basis by July 2015.

9.2.6 NATIONAL DISABILITY INSURANCE SCHEME (NDIS) SUPPORTS

- The NDIS is the governmental response to demands from people with disabilities and their families for fairer and more equitable support funding.
- The rights of the individual are at the heart of these schemes which are based on the government funding “reasonable and necessary” supports for each person to live the life they choose.
- People with disabilities will be encouraged to make choices on the life they wish to lead without constraint and we will work with each person to achieve their goals.
- Each person with a disability has a person centered plan designed around their choices which staff will assist to facilitate.
- People with disabilities are encouraged to work towards living a full life around employment, volunteering, community inclusion as well as recreation, and sporting activities and are encouraged to enhance their skills to enable that to happen.
- Each person makes their own choices and we will facilitate those choices to the best of our ability.

9.3 Prioritising Need

9.3.1 People with Disabilities:

All services are allocated on the basis of need, for younger people with disabilities. If Coastlink is able to meet the needs of the client, Coastlink will provide these services. However, where Coastlink is not able to provide services, the client will be referred to another service.

9.3.2 Clients with special needs

A full list of definitions of special needs is included in Section 4 Community Understanding and Engagement 4.2 Clients with Special Needs.

9.3.3 Aboriginal and Torres Strait Islander Clients

COASTLINK acknowledges that Aboriginal people are the most socially and economically marginalised people in New South Wales and experience greater barriers in accessing services than the rest of the community. COASTLINK will work with other services, including Aboriginal Services, to try to close the gap on services provision in ways that are culturally sensitive.

COASTLINK endeavours to provide Aboriginal and Torres Strait Islander clients with culturally appropriate services and where possible, services delivered by Aboriginal and/or Torres Strait Islander staff. COASTLINK works closely with local agencies including the Aboriginal Liaison Officer at the hospital to ensure that services are culturally appropriate and that clients are supported whilst accessing and receiving support.

The Coordinator will ensure at assessment and other meetings that the space to meet in is acceptable to Aboriginal people in that is peaceful and free from inflammatory posters/pictures. Aboriginal elders, other family members and clan members will be welcome (provided this is approved by the client) and advocates will be welcomed.

Each person attending will be treated with respect and information on our services provided in ways each attendee can understand.

The information regarding the assessment, review, service plan and services is clearly explained and understood by the client and their family members/advocates.

The following principles will guide the COASTLINK's work in delivering culturally responsive services for Aboriginal older people, Aboriginal people with a disability, their families, carers and communities. We will:

- respect the values, culture and heritage of Aboriginal people
- acknowledge that Aboriginal people and communities know and best interpret their own needs
- encourage transparency, equity and choice
- promote person centred, flexible and locally based service delivery approaches
- provide culturally appropriate information and resources
- engage the Aboriginal community in the development of new programs and policy reform

- build the capacity and resilience of Aboriginal organisations, communities and families
- recognise that responsive service for Aboriginal communities is best delivered by Aboriginal staff.

9.3.4 People Who Do Not Speak English

If a person does not speak English an interpreter is offered at no cost to the participant. Some families prefer to use a family member who will interpret for the client or carer and this is accepted but the use of a professional interpreter is preferred to enable Coordinators to be able to fully understand the client's needs and preferences.

Other options for interpreter services include a staff person or the Telephone Interpreter Service.

9.3.5 Clients Who Do Not Read or Write

In cases where the client does not read or write, the Coordinator/Assessor makes sure that the information in the Client Handbook, and information regarding the assessment, reviews, service plans and services is clearly explained and understood by the client and/or their carer.

9.3.6 Clients With Dementia, CHALLENGING BEHAVIOURS and Other Special Needs Groups (see 9.4.2 – INAPPROPRIATE BEHAVIOUR)

When necessary the Coordinator/Assessor identifies the need for support for clients with dementia, challenging behaviours or other special needs groups and those with specific care needs. COASTLINK provides training for relevant staff in how to work with people with dementia, people with challenging behaviours, or with specific care needs. COASTLINK makes every effort to make sure that services are delivered in an appropriate and sensitive way to all people, and in particular, to people with different levels of needs.

9.3.7 Case Closure

Clients may choose to cease being provided with services or may need referring to another provider if needs change or if COASTLINK is unable to provide services.

If a client chooses to cease service delivery or COASTLINK services are unable to be delivered the Coordinator ensures that:

- Clients and their representative/s are assisted to seek other care options (if appropriate).
- Consultation and liaison occurs with the Coordinator/Assessor.
- Actions are taken to assist the client are documented in their client records.

9.4 Termination, Withdrawal or Change of Services

Services may be terminated, withdrawn or changed in the following circumstances:

- Workplace Health and Safety risk to staff/volunteers that can't be rectified.
- Inappropriate client behavior.
- Change in client circumstances that influence eligibility.
- The agency ceases to deliver the service.

Each of these circumstances is discussed in detail below.

9.4.1 Workplace Health and Safety Risk to Staff/Volunteers

A Workplace Health and Safety risk can arise from a variety of factors including dangerous access to a person's house or dangers inside the house or home environment. These are identified through a Home Safety Checklist conducted when a client is first accepted for services or when reviews are carried out or when staff report a danger to their supervisor. Examples of these WHS risk issues could include:

- Dangerous steps, verandahs, internal flooring.
- Faulty electrical wiring.
- Dangerous roofs/ceilings.
- Dangerous dogs.
- Smoking in the immediate vicinity of staff.
- Displaying challenging behaviours.

COASTLINK provides extensive community access opportunities, especially for YPWD. All venues and activities will be assessed for risk using the HAZPAK checklist.

Where a WHS risk is identified, the Coordinator works with the client to remove or reduce the risk to an acceptable level. If this cannot be achieved through reasonable means the Operations Manager can decide to cease the provision of services to the client where staff are at risk. Removal of the service would be the last resort.

9.4.2 Inappropriate Client Behaviour (INCLUDING CHALLENGING BEHAVIOUR)

Challenging behaviour may be defined as:

“Behaviour... of such an intensity, frequency or duration as to threaten the quality of life and/or the physical safety of the individual or others and is likely to lead to responses that are restrictive, aversive or result in exclusion.” Please reference

This can include direct physical actions or threats, sexual suggestions, self harm, damage to property, willful exposure and foul language.

COASTLINK has a number of clients who frequently display “challenging behaviours” and makes every endeavour to ensure that person is dealt with safely (both for themselves and staff members) and positively and to continue to enjoy community access and in-home care as much as possible, having regard for the safety of community members. Only as a last resort will a person with “challenging behaviours” be denied services either temporarily or permanently.

Each episode of “challenging behaviour” will be treated independently and staff members supporting the client will work with their supervisors and coordinators will determine how to manage each episode.

Each person who exhibits inappropriate behaviour will have a Behaviour Support Plan in place prepared by professionals. These plans will be followed by COASTLINK staff at all times and will be regularly reviewed.

Staff will complete incident and accident reports in all incidents of such behaviour as will witnesses and other relevant parties.

The Coordinator and Senior Coordinator assess the client behaviour. If it is found inappropriate the Coordinator discusses this with the client and his/her family and attempt to find a solution to try to modify such behaviours where possible.

- Any changes required are discussed fully with the client, and their carer if appropriate, and are fully documented in the client record.
- Every effort will be made to seek professional advice from behavioral clinicians, geriatricians on the best way to manage challenging behaviours.
- Case conferences with parents, carers, advocates and experts with knowledge of the client will be sought to try and find strategies to manage behaviours.

If inappropriate client behaviour continues after reasonable attempts to curb it, the Coordinator will discuss the matter with the Operations Manager who can decide to cease the provision of services affected by the client’s behaviour. This will be the last resort in all cases and after every attempt has been made to manage the client’s behaviour.

COASTLINK reserves the right to refuse service to any person whose behaviour could pose a threat to the safety of staff and/or other clients.

9.4.3 Change in Client Circumstances That Influence Eligibility

Where a client’s circumstances or condition changes to the point that services are no longer required the Coordinator can decide to change or cease the provision of services to the client.

For example, if a person who receives services due to hip problems has a hip replacement and regains full mobility they may no longer need the service. Where a person’s general well-being increases to a point where they can undertake all acts of daily living independently their services may be reduced or withdrawn.

Any changes required are discussed fully with the client and their carer if appropriate and are fully documented on the assessment form and in the client record.

9.4.4 The Agency Ceases to Deliver Services

If we cease to deliver services, clients are given maximum notice that the services are ceasing and CHSP clients are referred to My Aged Care and provided with support during the transition;

Younger people with disabilities will be assisted to find another service which may be able to meet their needs and are supported during the transition.

9.4.5 Process for Termination, Withdrawal or Change of Services

If support to a client is terminated, withdrawn or changed the following process applies:

- Extensive consultation will take place with the client, and where appropriate carers, family members and advocates. All consultation, discussions and actions are documented in the client record and families will be kept informed of discussion and decisions at all times.
- Give the client as much notice as possible with a minimum of 1 (one) month.
- Explain face to face to the client and their carer/family if appropriate, why the services are being ceased or changed and any arrangements required for the client.
- Provide written notice if appropriate.
- Ask permission to refer to other services if appropriate.
- Attempt to find another agency to provide the required service and try to ensure services are provided without any break.
- If no other agencies are available, identify other options in consultation with the client.
- In the case of CHSP clients advise My Aged Care
- Advise the client that they can appeal the decision to terminate, withdraw or change their services to the CEO.
- Assist the client in appealing if necessary.
- Record all relevant information in the client records.

9.5 Service Continuity

We comply with the CHSP Guidelines, the Aged Care Funding Agreement as well as the requirement of the NSW Disability Support Act provisions that relate to ensuring continuity of service, and the NDIS Practice Standards. As part of our risk management processes, we have developed Activity Continuity Plans which cover:

- Transition out of services – for example, to transition services to another service provider where funding has expired, is terminated, or a higher level of service, i.e., packaged care is required.
- Transition between services within COASTLINK – to provide a seamless transition the Coordinator will work with the client and new service to develop a transition plan
- Transition between COASTLINK and another service provider – to provide a seamless transition the Coordinator will arrange a transfer of relevant information in relation to the client, and their needs (following consent of the client), and plan for the transition, in collaboration with the new provider. COASTLINK will support clients through a transition period, if required, and support the rights of clients to move between service providers.
- Risks associated with each transition to or from a service or provider are identified, documented and responded to.
- Processes for the transition of clients between services or providers are reviewed and communicated with the clients.
- Management of serious incidents, e.g., particularly management of natural disasters, to continue delivery of services if a fire or flood occurs.

Our organisation also has processes in place to ensure service continuity for clients as they transition from the younger to older age cohort.

- Once a person turns 65 they can elect to stay in the disability programs to which they have become accustomed or can move to the programs we provide for people who are 65 and over.

9.6 Monitoring Service Access Processes

Service access provisions and systems are regularly audited as part of our audit program and staff, clients and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made (see Corporate Calendar and Section 5: Continuous Improvement).