

## **SWEP Priority of Access Guidelines**

The State-wide Equipment Program (SWEP) is committed to ensuring that equipment subsidy provided to the frail aged and people with a long term or permanent disability, funded through the Victorian Aids & Equipment Program (VA&EP) is undertaken in a priority order based on transparent guidelines. SWEP is bound to work within the VA&EP Operational Guidelines which specify the key characteristics of consumers and their support people and influence their priority of access. The intention of this framework is to provide an understanding of the order in which a consumer will receive their equipment, as well as providing reassurance that SWEP is committed to enhancing safety, independence, community access, and psycho-social well-being to all people eligible under the VA&EP scheme.

### **Objectives**

The objectives of a structured access prioritisation system are:

- Clarity for stakeholders about the order in which consumers should expect to receive subsidy funding
- Recognition of the implications of non-provision of equipment within the Department of Health (DH) ascribed paradigms
- Supported and stream-lined administrative processes

### **A risk management approach to prioritisation**

In order to consider the potential implications of non-provision of equipment to those eligible for subsidy, SWEP has developed a risk management approach to prioritisation based on the AS/NZS ISO 31000:2018, Risk management – Principles and guidelines. Risk/s to a consumer based on potential consequences or “Implications of non-provision” are assessed in a context of relative likelihood, providing a structured way to communicate urgency of need and articulate a reasoned approach to priority of access.

It should be noted that even those not at risk, but rather with ‘potential to benefit’ will still receive subsidy or access to refurbished equipment if they are eligible but are more likely to be placed on a waiting list.

Articulation of risk is intended to guide SWEP as to the level of urgency.

Funding for low cost (<\$300) items through the Aids & Equipment Program (A&EP) is reserved to enable a ‘one-touch’ process for all stakeholders, reduce wait times for consumers, reduce administrative burden and costs. This does not include the Laryngectomy, Lymphoedema Compression Garment Program, Domiciliary Oxygen or Continence Programs.

## Paradigms of priority assessment

The VA&EP Operational Guidelines indicate two categories of urgency for the subsidy of equipment. Paradigms used within this framework are derived from those articulated in the guidelines.

They are:

### No waiting category

The subsidy or repair will be supplied as soon as possible after all relevant documentation/information is received. Domiciliary oxygen

- The ongoing supply of continence aids
- Lymphoedema garments
- Laryngectomy consumables
- Assets triaged as requiring immediate repair
- Mobility assets triaged as requiring immediate modification
- Applications for refurbished assets
- Replacement of assets deemed financially unviable to repair

### High Urgency category

This subsidy will be supplied as soon as funds are available to buy the item/modification where a reissued item is not available, and all relevant documentation/information is received.

- The assistive technology is **critical** to the safety of the applicant or injury prevention in daily living activities
- Not supplying the assistive technology will lead to a deterioration in the applicant's health or functioning abilities that may result in premature admission to institutional care, hospitalisation, or dependence on more costly services
- Not making the assistive technology available will place excessive demand on carers in caring for the applicant and seriously jeopardise the current care/living arrangements

## Likelihood and Consequence

Within a risk management framework, analysis of potential risks must be undertaken in the context of consequence severity and relative likelihood. Incremental levels of outcome severity are defined, and the likelihood of that outcome if equipment is not provided for consumers within a timeframe is identified by practitioners. By analyzing the potential risk within the risk paradigms, SWEP has designed a structured system of priority of access that ensures those who need the equipment urgently are readily identified, while subsidy for equipment continues to be provided to all those who are eligible in an equitable manner.

The implications prioritisation matrix appears in *Table 1* below. Use of the matrix when assessing urgency of need allows for clarity and transparency around why some items are provided straight away. When completing an application, the matrix should be used to guide practitioner responses on the application forms in the sections that relate to implications of non-provision. It should be noted that some items of equipment for the same consumer may have greater levels of urgency, and therefore have access to subsidy more quickly, while the consumer may need to wait longer for other items. Without commentary relating to both likelihood and severity of consequence, urgency of need may not be optimally identified.

## IMPLICATIONS OF NON-PROVISION

**SAFETY** (Issues related to the physical safety of the consumer and possible bodily harm as they complete daily activities)

<b>Likelihood of Occurrence</b>	<b>3 - Imminent:</b> Will happen within 1 month	<b>3</b>	<b>6</b>	<b>9</b>
	<b>2 - Probable:</b> May happen in the next 1 - 4 months	<b>2</b>	<b>4</b>	<b>6</b>
	<b>1 - Possible:</b> May happen in the next 4 – 12 months	<b>1</b>	<b>2</b>	<b>3</b>
		<b>1 - Minor</b> Minor injury or complication / functional decline	<b>2 – Moderate/Major</b> Moderate to serious injury or complication	<b>3 – Severe</b> Life threatening injury or complication
		<b>Consequence of Occurrence</b>		

**INDEPENDENCE** (Changes to the consumer being able to participate in their daily activities with their usual or available level of support)

<b>Likelihood of Occurrence</b>	<b>3 - Imminent:</b> Will happen within 1 month	<b>3</b>	<b>6</b>	<b>9</b>
	<b>2 - Probable:</b> May happen in the next 1 - 4 months	<b>2</b>	<b>4</b>	<b>6</b>
	<b>1 - Possible:</b> May happen in the next 4 – 12 months	<b>1</b>	<b>2</b>	<b>3</b>
		<b>1 - Minor</b> Is experiencing difficulties accessing the community	<b>2 – Moderate/Major</b> Activities modified – reduced or limited participation	<b>3 - Severe</b> Will be admitted to hospital or long-term institutional care
		<b>Consequence of Occurrence</b>		

## HEALTH MAINTENANCE (Psycho-social factors impacting the emotional or mental health of the consumer)

Likelihood of Occurrence	<b>3 - Imminent:</b> Will happen within 1 month	3	6	9
	<b>2 - Probable:</b> May happen in the next 1 - 4 months	2	4	6
	<b>1 - Possible:</b> May happen in the next 4 – 12 months	1	2	3
		<b>1 - Minor</b> Consumer/Support person stress	<b>2 – Moderate/Major</b> Social Isolation / Psychological Intervention required	<b>3 - Severe</b> Consumer Suicidal ideation
		Consequence of Occurrence		

## SUPPORT PERSON NEEDS (Physical and psycho-social issues impacting a consumer's support person/s and their ability to maintain this caring or support role)

Likelihood of Occurrence	<b>3 - Imminent:</b> Will happen within 1 month	3	6	9
	<b>2 - Probable:</b> May happen in the next 1 - 4 months	2	4	6
	<b>1 - Possible:</b> May happen in the next 4 – 12 months	1	2	3
		<b>1 - Minor</b> Physical discomfort or distress when assisting consumer	<b>2 - Moderate/Major</b> OH&S Injury to support person or significant psychological impact	<b>3 - Severe</b> Inability to assist consumer due to OH&S injury to support person, extreme psychological distress
		Consequence of Occurrence		

Table 1: Implications of non-provision matrix

**Changes to risk and implications**

It is recognised that consumer and/or support person risk factors can change. Should a consumer's circumstances change after an application has been waitlisted, and this impacts the likelihood of issues occurring (or the severity of the consequences), there is capacity to escalate urgency of need on provision of additional information. Please note that either the consumer or the practitioner can escalate the urgency of need. However, if it is the consumer, SWEP will contact the practitioner for further details. Examples of priority of access for each paradigm within equipment categories appear in *Appendix 1*.

## **Appendix 1: \*Examples of priority of access ratings for each paradigm within equipment categories**

*\*Please note these are EXAMPLES ONLY and are not intended for use verbatim on application forms. Nor are they intended to be an exhaustive list of possible scenarios.*

### **Beds, mattresses, and pressure care products**

#### **1. Safety**

##### **Highest rating implications (9)**

The consumer has painful pressure ulcers, poor skin condition, poor skin sensation and limited movement. The current bed is not adjustable, and the mattress has insufficient depth; further skin breakdown is imminent.

##### **Mid-level rating implications (4-6)**

Without close monitoring and careful turning, red marks are appearing on the consumers skin in areas receiving pressure while lying in bed.

##### **Lowest rating implications (1-3)**

Consumer's bed mobility is deteriorating due to advancing neuromuscular disease. Skin integrity is not currently an issue but will be as the consumer's bed mobility continues to reduce.

#### **2. Independence**

##### **Highest rating implications (9)**

A consumer of bariatric weight with multiple disability, complex pressure and bed mobility issues will be admitted to long term care imminently as the support team is unable to safely turn them as required.

##### **Mid-level rating implications (4-6)**

A young quadriplegic person has a pressure care plan in place, but community support workers have noticed reddened areas on the consumer's skin. Skin break-down will lead to admission to acute care.

##### **Lowest rating implications (1-3)**

Consumer has a slowly deteriorating condition, and an adjustable bed will allow them to get out of it without assistance into the future.

#### **3. Health Maintenance**

##### **Highest rating implications (9)**

A consumer has previously been admitted for pressure care wounds and the newly developing pressure wounds on her sacrum and heels are creating extreme levels of anxiety around what might happen if progression cannot be stopped.

##### **Mid-level rating implications (4-6)**

A child is unable to sleep due to the discomfort of limited positions; lack of sleep is impacting mental health and behaviour during the day.

##### **Lowest rating implications (1-3)**

A disabled child is growing and is anxious that he will no longer fit in his bed – a larger electric hi lo bed is needed sometime soon.

#### **4. Support Person Needs**

##### **Highest rating implications (9)**

The father of a dependent child with severe cerebral palsy is highly anxious at the thought of pressure areas appearing. He insists that the child be turned at least hourly, and his anxiety is causing distress for the whole family.

##### **Mid-level rating implications (4-6)**

Consumer's current mattress requires weekly turning and while the support person can do this unaided at present, the task is difficult and risky for them.

##### **Lowest rating implications (1-3)**

Parents are fatigued by frequent waking at night as the existing mattress does not promote good sleep for their child.

## Continence products

### **1. Safety**

#### **Highest rating implications (9)**

Elevated residual volumes and/or complete urinary retention and urinary tract infection leading to sepsis.  
Medical conditions which have a higher risk of severe complications e.g., hydronephrosis, pelvic radiotherapy, bladder augmentation. Constant presence of moisture and faecal matter close to the skin will imminently cause skin breakdown. Constant presence of moisture and faecal matter close to the skin will imminently cause skin breakdown

#### **Mid-level rating implications (4-6)**

Constant presence of moisture and faecal matter close to the skin may lead to skin breakdown in the next months.  
Presence of moisture and faecal matter close to the skin may lead to break down if inadequately contained.

#### **Lowest rating implications (1-3)**

Sporadic incontinence leads to bedclothes requiring changing at least weekly, with the support person at risk of harm long term from lifting heavy bedding.

### **2. Independence**

#### **Highest rating implications (9)**

Significant carer stress is related to providing continence care, and increased risk of premature admission to residential care as a consequence.

#### **Mid-level rating implications (4-6)**

Child/consumer is at risk of reduced attendance at school/vocation due to poorly contained incontinence.

#### **Lowest rating implications (1-3)**

Consumer restricts socialisation due to fear of odour or uncontained incontinence.

### **3. Health Maintenance Highest rating implications (9)**

#### **Highest rating implications (9)**

Severe impact upon mental health and wellbeing due to degree of incontinence.

#### **Mid-level rating implications (4-6)**

Increased stress and isolation, e.g., reducing fluid intake to try to control incontinence.

#### **Lowest rating implications (1-3)**

Rationing of product use due to cost.

### **4. Support Person Needs**

#### **Highest rating implications (9)**

Imminent risk of relinquishing care role.

#### **Mid-level rating implications (4-6)**

Carer reports increased stress and fatigue from managing effects of provision of continence care e.g., washing, providing personal care.

#### **Lowest rating implications (1-3)**

A low risk is a carer able to provide care with current level of supports and access to products; carer role is sustainable.

## Electronic voice aids

### 1. *Safety*

#### **Highest rating implications (9)**

A consumer has a leaking voice prostheses which is causing aspiration, and this is a probable cause of their recurrent pneumonia.

#### **Mid-level rating implications (4-6)**

A consumer lives alone and/or in a remote location, and without an electrolarynx they may have an inability to vocalise in the event of an emergency e.g., use phone / call out for help.

#### **Lowest rating implications (1-3)**

A consumer requires an electrolarynx to communicate when family are not there to assist.

### 2. *Independence*

#### **Highest rating implications (9)**

Consumer is becoming debilitated due to frequent chest infections resulting from aspiration around ill-fitting voice prosthesis. Hospital or residential care admission is imminent.

#### **Mid-level rating implications (4-6)**

A consumer is unable to participate in their work or community activities without an appropriate electrolarynx.

#### **Lowest rating implications (1-3)**

A consumer will be limited in their ability to communicate their basic needs daily with close family, friends and/or limited in managing basic needs within the community.

### 3. *Health Maintenance*

#### **Highest rating implications (9)**

The consumer is very depressed and despondent due to inability to communicate by phone with their only family who live a long way away and he require an electrolarynx to make this possible.

#### **Mid-level rating implications (4-6)**

A consumer has an inability to communicate which has resulted in reduced participation in social situations and subsequent withdrawal from interactions with family and friends. The consumer is lonely and listless.

#### **Lowest rating implications (1-3)**

Family members are irritated by the need to transport a Consumer to visit a Speech Pathologist to change their indwelling voice prosthesis, and consumer is requesting a non-indwelling type to alleviate this need.

### 4. *Support Person Needs*

#### **Highest rating implications (9)**

Without a fully functioning voice prosthesis or electrolarynx, consumer will be fully dependent on support person for all communication. Additionally, a leaking voice prosthesis would require the support person to ensure appropriate food/fluids were provided to prevent aspiration.

#### **Mid-level rating implications (4-6)**

A consumer would require the support person to monitor the voice prosthesis less frequently following a change to the type of voice prosthesis used.

#### **Lowest rating implications (1-3)**

The consumer required the support person to monitor the voice prosthesis weekly.



## **Laryngectomy**

### **1. Safety Highest rating implications (9)**

A consumer has stomal stenosis and inadequate humidification which is likely the cause of their frequent admissions to hospital for sputum plugging.

#### **Mid-level rating implications (4-6)**

A consumer using a laryngectomy tube is unable to communicate due to the placement of the tube and would benefit from a different type of tube.

#### **Lowest rating implications (1-3)**

A consumer requires a laryngectomy tube to hold their HME due to poor baseplate adhesion when communicating.

### **2. Independence**

#### **Highest rating implications (9)**

The consumer is becoming debilitated due to frequent hospital admissions for sputum plugging. Residential care is imminent to safely manage the airway.

#### **Mid-level rating implications (4-6)**

A consumer is unable to participate in work or community activities without HME.

#### **Lowest rating implications (1-3)**

A consumer would benefit from hands-free for optimal communication.

### **3. Health Maintenance**

#### **Highest rating implications (9)**

A consumer is depressed due to increased coughing and secretions which is significantly reducing their participation in work, community, and social activities.

#### **Mid-level rating implications (4-6)**

A consumer has an inability to communicate which has resulted in reduced participation in social situations and subsequent withdrawal from interactions with family and friends. The consumer is lonely and listless.

#### **Lowest rating implications (1-3)**

A consumer has a reaction to baseplate adhesive and would benefit from additional humidification equipment to use as an alternative when skin flares.

### **4. Support Person Needs**

#### **Highest rating implications (9)**

Without appropriate consumables full dependence on a support person for secretion management /airway clearance such that the support person is required to be accessible to set up equipment/suction and/or clean the stoma.

#### **Mid-level rating implications (4-6)**

Requires the support person to clean the stoma daily and apply adhesives.

#### **Lowest rating implications (1-3)**

Occasionally requires support to remove and replace adhesives.

## Environmental Control Units

### **1. Safety Highest rating implications (9)**

A consumer who lives alone is unable to leave their home in the case of an emergency due to physical access issues with opening doors.

#### **Mid-level rating implications (4-6)**

A consumer is unable to operate the standard controls of their air conditioner, and inability to control the temperature of their environment creates high levels of discomfort and fatigue.

#### **Lowest rating implications (1-3)**

A consumer has bruised their hand while trying to open blinds and doors from their wheelchair without assistance.

### **2. Independence Highest rating implications (9)**

A consumer has the potential to live independently but cannot currently do so without a support person to operate basic features of the home environment, funding is imminently ending for existing support staff.

#### **Mid-level rating implications (4-6)**

A consumer cannot participate in work and leisure activities independently without ECU support to operate their home.

#### **Lowest rating implications (1-3)**

It is time consuming for a consumer to operate functions around their home due to slowed mobility and reduced balance.

### **3. Health Maintenance**

#### **Highest rating implications (9)**

A consumer is highly distressed and anxious about their inability to independently evacuate their home in an emergency.

#### **Mid-level rating implications (4-6)**

A consumer is withdrawn and starting to disengage from asking for assistance from their carer to assist with operating items around their home.

#### **Lowest rating implications (1-3)**

A consumer feels frustrated that they must call out for their bedroom light to be turned on every morning.

### **4. Support Person Needs**

#### **Highest rating implications (9)**

An elderly support person has been hospitalised after a fall while physically assisting a consumer with holding open heavy doors and supporting mobility.

#### **Mid-level rating implications (4-6)**

Due to various other roles, a mother is highly stressed about her ongoing ability to regularly support her child who lives independently in a nearby unit. An ECU system would mean the mother did not need to provide this support.

#### **Lowest rating implications (1-3)**

The consumer's son is concerned about his mother being at home alone while he is at work.

## Home Modifications

### **1. Safety**

#### **Highest rating implications (9)**

Consumer has very low function and has experienced multiple falls due to inappropriate home arrangements for bathing.

#### **Mid-level rating implications (4-6)**

A consumer can mobilise in a wheelchair and can transfer with assistance, but their condition is quickly deteriorating. The consumer will require wheelchair access to the shower within several months.

#### **Lowest rating implications (1-3)**

Consumer is unable to access bathing facilities but is willing to have bed baths as a temporary measure.

### **2. Independence**

#### **Highest rating implications (9)**

Consumer cannot enter or exit their property for work and essential medical appointments – being undertaken by ambulance transfer at present.

#### **Mid-level rating implications (4-6)**

Consumer lives alone and has funded support - would be independent if modifications were undertaken.

#### **Lowest rating implications (1-3)**

A consumer requires assistance to access stairs but can manage in only downstairs rooms in the short term.

### **3. Health Maintenance**

#### **Highest rating implications (9)**

A consumer feels highly self-conscious and embarrassed about his mother needing to wash him daily and is declining hygiene support which risks skin breakdown; consumer can be independent with provision of appropriate bathing aids

#### **Mid-level rating implications (4-6)**

Consumer's role as head of family diminished by disability – further degradation as family required to bathe them if modifications not done.

#### **Lowest rating implications (1-3)**

Consumer uses a portable commode but excessive cleaning by family members stresses their relationship – modifications will eliminate the need for this task.

### **4. Support Person Needs**

#### **Highest rating implications (9)**

A support person has sustained a back injury from assisting their partner to transfer over the step of the shower and care can no longer be provided.

#### **Mid-level rating implications (4-6)**

A carer feels anxious about the consumer's ability to manage the front steps whenever they need to leave the property and is discouraging community activities.

#### **Lowest rating implications (1-3)**

A carer is experiencing fatigue from moving aids around the home, which will be eliminated when home modifications are completed.

## Orthotics

### 1. Safety

#### Highest rating implications (9)

Consumer has Charcot-Marie-Tooth disease (CMT) with resultant foot ulcers and foot drop. Custom AFOs with inbuilt custom foot orthoses are required to prevent further ulceration and impending falls.

OR-consumer has a foot drop and drags their toes or catches their toes when walking. Walking without an AFO makes it exceedingly difficult to ambulate and there is a high safety risk of tripping, possibly falling with consequential injuries.

#### Mid-level rating implications (4-6)

Consumer has foot deformities due to long-standing cerebral palsy and also has diabetes with resultant poor circulation and sensation. Foot orthoses are required within the next few months to provide pressure relief.

Or-consumer has diabetes type 2 with associated neuropathy and a history of ulceration. To keep feet safe from future trauma possible ulceration, amputation with hospitalization, custom foot orthotics and medical grade footwear, readymade or custom-made are required

#### Lowest rating implications (1-3)

Consumer has good circulation but pain in their feet due to arthritis and requires extra-depth footwear to accommodate orthoses.

### 2. Independence

#### Highest rating implications (9)

A bariatric consumer with no support person is unable to ambulate for daily activities without bilateral custom knee orthoses. They are unable to manage any kind of wheelchair and due to their inability to undertake their own personal hygiene they will require admission to residential care.

Or-consumer has lower limb paralysis and relies on KAFO's to stand, transfer and walk short distances. Without the KAFO's that lock the knees and prevent them from uncontrollably flexing they have no alternative but to use a wheelchair only, which severely affects their everyday independence within the home and in the community.

#### Mid-level rating implications (4-6)

Consumer has juvenile arthritis and has painful, unstable knees. Without knee orthoses the consumer will require a wheelchair and will be unable to access their school.

#### Lowest rating implications (1-3)

Consumer has ongoing pain in the feet associated with pes planovalgus posturing. The pain is bearable but can be reduced with the provision of custom-made foot orthotics that in turn will enable them to walk further and participate in sport without this discomfort.

### 3. Health Maintenance

#### Highest rating implications (9)

Child with cerebral palsy is unable to sit up without a spinal brace. The child has grown and the current brace causes pain such that the child is distressed and constantly crying when worn.

#### Mid-level rating implications (4-6)

Consumer is an adolescent who requires locking knee ankle foot orthoses (KAFOs) to walk due to muscle weakness. Without KAFOs they need a wheelchair to mobilise, and this leads to taunting at school and potential depression and anxiety.

#### Lowest rating implications (1-3)

Consumer has moderate ankle pain due to osteoarthritis. When not wearing an ankle orthosis they become agitated and upset easily.

### 4. Support Person Needs

#### Highest rating implications (9)

A consumer relies on a support person to don and doff bilateral AFOs to enable their walking. The AFOS have had a lot of use and there are carbon fibre fractures; they are deemed unsafe to wear and need replacement. The support person can assist with donning and doffing the AFOS however does not have physical capacity to assist with wheelchair use. The support person is therefore unable to assist the consumer

#### Mid-level rating implications (4-6)

A consumer's knee brace has an exposed metal strut that has been caused by wear and tear. Their support person could cut their hand on an exposed metal section whilst donning a custom knee brace if the brace is not repaired.

#### Lowest rating implications (1-3)

A consumer's extra-depth footwear has become difficult to don due to the posterior heel cup collapsing as a result of wear and tear when using an AFO. The support person who assists with donning the shoes finds it difficult to

maneuver the consumer's foot into the shoe and has been squatting in an awkward position to get the shoe on sufficiently. The support person is reporting that their lower back and knees are uncomfortable when doing so.

## **Specialised bathing equipment**

### **1. Safety**

#### **Highest rating implications (9)**

A consumer is falling most days when being assisted to shower in the current shower chair causing consumer injury and staff OH&S risks, a better fitting commode chair is required to eliminate current issues.

#### **Mid-level rating implications (4-6)**

A consumer only has a shower over bath but needs a bath transfer bench to access. Strip washes are being completed but due to fatigue and some pressure care risks, this approach is not sustainable or optimal for the longer term.

#### **Lowest rating implications (1-3)**

A consumer feels less steady when standing to shower, a rail has been provided but they would benefit from being able to sit as balance further reduces with age.

### **2. Independence**

#### **Highest rating implications (9)**

With the provision of an over-toilet frame a consumer can use the toilet independently, even overnight.

#### **Mid-level rating implications (4-6)**

A self-propel shower commode will eliminate the need for transfers between devices, so a consumer can independently move themselves between the shower and toilet.

#### **Lowest rating implications (1-3)**

Provision of a shower chair will reduce support from occasional prompts to supervision only.

### **3. Health Maintenance Highest rating implications (9)**

A consumer feels highly self-conscious and embarrassed about his mother needing to wash him daily and is declining hygiene support which risks skin breakdown; consumer can be independent with provision of appropriate bathing aids.

#### **Mid-level rating implications (4-6)**

A consumer feels anxious about transfers on the over bath seat and does not want to continue doing these transfers in order to wash.

#### **Lowest rating implications (1-3)**

A consumer is frustrated that a funded bathing aid cannot be provided immediately.

### **4. Support Person Needs**

#### **Highest rating implications (9)**

The support person has sustained a physical injury and is having to withdraw essential support due to lack of bathing aids.

#### **Mid-level rating implications (4-6)**

An elderly consumer's daughter is struggling to continue providing showering support to her mother while waiting for funding for bathroom aids required for paid carer support.

#### **Lowest rating implications (1-3)**

A carer has some minor back and wrist pain when assisting the consumer without the required bathing aid.

## Specialised seating equipment

### 1. *Safety*

#### **Highest rating implications (9)**

Staff have gone on Workcover due to an injury from assisting a consumer to sit and stand from his low height dining and lounge chair.

#### **Mid-level rating implications (4-6)**

With the provision of a riser recliner, staff will need to offer less manual handling support to assist a consumer to regularly stand and shift weight.

#### **Lowest rating implications (1-3)**

A consumer has slowly progressing MS and it is becoming clear that a more supportive seat will be required in the loungeroom within the next few months.

### 2. *Independence* **Highest rating implications (9)**

A consumer lives alone and currently gets stuck for hours sitting in his primary chair as he cannot get out independently, the new high back chair will make him independent with transfers.

#### **Mid-level rating implications (4-6)**

A consumer is unable to get in and out of their lounge chair without moderate support but will become independent with the riser recliner requested.

#### **Lowest rating implications (1-3)**

A consumer requires supervision and occasional support when standing from leisure activities, they could be independent with provision of a new chair.

### 3. *Health Maintenance*

#### **Highest rating implications (9)**

A consumer is becoming extremely distressed and vocalizing loudly when sitting in the current unsupportive chair.

#### **Mid-level rating implications (4-6)**

Family members are anxious about a consumer needing some minor assistance from his elderly wife when getting out of the current couch.

#### **Lowest rating implications (1-3)**

There is minor financial strain and stress from hiring a high back chair while waiting for a new one to be provided.

### 4. *Support Person Needs*

#### **Highest rating implications (9)**

The support person has fallen and injured themselves on several occasions by assisting the consumer to get out of the existing couch.

#### **Mid-level rating implications (4-6)**

A parent is very anxious about possible postural and pressure care injuries that could be sustained by the consumer as they sit awkwardly in a poorly fitting chair during the day.

#### **Lowest rating implications (1-3)**

A carer does not like seeing the consumer struggle to get out of the low and armless dining chair at each meal.

## Transfer equipment

### 1. *Safety*

#### **Highest rating implications (9)**

A bariatric consumer has had several falls in the past few weeks when attempting to transfer.

#### **Mid-level rating implications (4-6)**

The consumer has a deteriorating health condition and skin integrity measures indicate high risk of sheer force injury if unassisted transfers are carried out.

#### **Lowest rating implications (1-3)**

The Consumer has a slowly progressing long term disability and will need assistance with transfers sometime in the next few months.

### 2. *Independence*

#### **Highest rating implications (9)**

Services will not transfer the consumer without a hoist, and consumer will require admission to residential care unless one is provided quickly as services will be withdrawn due to OH&S risks for support person.

#### **Mid-level rating implications (4-6)**

Consumer is currently transferred using a standing hoist and lives in a split-level environment. A ceiling hoist will be required in the near future to minimise transfers and reduce manual handling demands.

#### **Lowest rating implications (1-3)**

A consumer is being assisted to transfer by their support person. To protect the support person long term, a hoist is required.

### 3. *Health Maintenance* **Highest rating implications (9)**

An extremely anxious consumer is reliant on a support person for transfers. They are highly distressed about not having access to a hoist at home after experiencing hoist transfers in respite.

#### **Mid-level rating implications (4-6)**

A consumer is concerned that slide transfers are unsafe, and their anxiety is seen through vocalisations and unhelpful body movements during these transfers.

#### **Lowest rating implications (1-3)**

Consumer is unhappy with the current style of sling used with their hoist but will tolerate it in the short term.

### 4. *Support Person Needs*

#### **Highest rating implications (9)**

The support person of a consumer who is completely dependent on transfer assistance has injured themselves and can no longer provide support and alternative care cannot be provided without aids.

#### **Mid-level rating implications (4-6)**

A carer is really distressed about seeing the consumer struggle to complete transfers without the aids that they really need.

#### **Lowest rating implications (1-3)**

A support person will be relieved when they can use a Sara Steady rather than standing transfers with the consumer.

## Vehicle Modifications

### 1. *Safety*

#### **Highest rating implications (9)**

Carer has severely injured their back whilst transferring the consumer and is no longer able to assist the consumer to access their vehicle.

#### **Mid-level rating implications (4-6)**

The consumer currently drives safely using their foot but has a slow progressing condition which will cause them to require hand controls within six months.

#### **Lowest rating implications (1-3)**

Carer is currently able to safely assist the child to transfer into the vehicle, but the child will continue to grow and has degenerative condition and is likely to require modifications within the next 2 years.

### 2. *Independence*

#### **Highest rating implications (9)**

The consumer is dependent upon the requested modifications to access the community and has no alternative options such as public transport or taxi and no support people who could assist.

#### **Mid-level rating implications (4-6)**

Consumer has to catch two buses and a train to attend university whereas with requested vehicle modifications they could drive themselves and save two hours a day on travel.

#### **Lowest rating implications (1-3)**

The consumer's carer has the capability and availability to drive them to access the community however the consumer would like to be able to go out by themselves in their vehicle.

### 3. *Health* **Highest rating implications (9)**

Consumer is living alone in an isolated area and has a history of psychological support needs; without the requested modifications they cannot access the required treatment services.

#### **Mid-level rating implications (4-6)**

Consumer requires vehicle modifications to access the community to purchase groceries each week. Consumer can have the groceries delivered but the isolation places their well-being at risk.

#### **Lowest rating implications (1-3)**

Consumer is currently independent within their own community and can ambulate short distances. Consumer uses a power wheelchair for longer distance. Consumer reports feeling depressed because they can't take their power wheelchair with them on annual holidays.

### 4. *Support Person Needs*

#### **Highest rating implications (9)**

Support person is frail/has their own health conditions and is no longer able to transfer the consumer into the vehicle.

#### **Mid-level rating implications (4-6)**

The ongoing effort to take consumer out in the car is increasing, causing significant mental stress and burden on the support person.

#### **Lowest rating implications (1-3)**

Carer is currently able to safely assist the child to transfer into the vehicle, but the child will continue to grow and has degenerative condition and is likely to require modifications within the next 2 years. Support person may no longer be able to take their child, the consumer, to school or other activities.



## Walking aids and standing frames

### 1. *Safety*

#### **Highest rating implications (9)**

Consumer is frail and has had multiple falls due to poor dynamic balance which is resolved by use of a walker.

#### **Mid-level rating implications (4-6)**

Consumer is using a four-wheel walking frame but would be steadier and less likely to fall if using a gutter frame.

#### **Lowest rating implications (1-3)**

Consumer will require new walker in the next six months due to increased growth or slow progressive decrease in function.

### 2. *Independence*

#### **Highest rating implications (9)**

Without a standing frame the consumer is unable to sustain their posture for daily activities which prevents them from completing any of these activities independently.

#### **Mid-level rating implications (4-6)**

A walking aid is required by a young child with cerebral palsy as part of their growth and development to access their home more independently and function at pre-school.

#### **Lowest rating implications (1-3)**

Consumer needs supervision and occasional support to function in home/school environment without walking aid, whereas the recommended item would allow independence in most daily activities.

### 3. *Health Maintenance*

#### **Highest rating implications (9)**

A Consumer post-stroke is distressed by their limited mobility without a walker. They are taking their frustration out on their immediate family and relationships are floundering.

#### **Mid-level rating implications (4-6)**

Consumer is unable to use current standing frame resulting in greater burden of care on support people including raised anxiety about potential consequences to their health.

#### **Lowest rating implications (1-3)**

Consumer is complaining of discomfort as thoracic supports not fully supporting them in standing frame.

### 4. *Support Person Needs*

#### **Highest rating implications (9)**

A support person is putting themselves at imminent physical harm by assisting a consumer to walk without an urgently required walking frame.

#### **Mid-level rating implications (4-6)**

A carer is highly distressed watching the consumer experience reduced mobility and independence due to inappropriate walking aids.

#### **Lowest rating implications (1-3)**

A carer has some minor back and wrist pain when assisting the consumer to use the existing walking aid.

## Wheelchairs and pressure cushions

### 1. *Safety*

#### **Highest rating implications (9)**

The consumer has a rapidly progressing neurological condition and has fallen twice in the past 2 weeks.

#### **Mid-level rating implications (4-6)**

A consumer has put on weight and there are concerns that skin integrity may soon be compromised as mobility is also declining

#### **Lowest rating implications (1-3)**

A child is growing and will require a new wheelchair within six months.

### 2. *Independence*

#### **Highest rating implications (9)**

The consumer is unable to manage their own manual wheelchair, but full independence will be provided with a modified power pack.

#### **Mid-level rating implications (4-6)**

An electric wheelchair is required to assist a child to access school and all other community activities.

#### **Lowest rating implications (1-3)**

A scooter would allow the consumer to access the community and enhance independence.

### 3. *Health Maintenance*

#### **Highest rating implications (9)**

A consumer has a progressing neurological disorder and requires a power wheelchair and is expressing suicidal thoughts due to their constrained state without the chair.

#### **Mid-level rating implications (4-6)**

Consumer requires wheelchair to gain access to the supermarket to purchase groceries each week. She can have the groceries delivered, but the isolation places her well-being at risk.

#### **Lowest rating implications (1-3)**

A consumer with recently diagnosed Alzheimer's disease reports frustration with their functional decline. This is likely to progress to further anxiety in future months if mobility is not enhanced safely by a wheelchair.

### 4. *Support Person Needs*

#### **Highest rating implications (9)**

A carer has sustained a back injury from lifting a heavy wheelchair into a vehicle; a light-weight wheelchair is requested to reduce OHS risks and allow care to be maintained.

#### **Mid-level rating implications (4-6)**

The consumer sits in a manual wheelchair but needs to be re-positioned frequently. This places the support person at risk of injury.

#### **Lowest rating implications (1-3)**

A carer would prefer a different style of wheelchair for more convenient folding and adjusting footplates for transfers.