



Household Services –
Information for Occupational Therapist's undertaking
an Activities for Daily Living assessment

Before undertaking an assessment

There is an expectation that Occupational Therapists are familiar with DVA Guidelines in CLIK regarding Household Services (HHS) and Attendant Care and utilise these when making their recommendations on the prescribed Activities of Daily Living (ADL) form.

You can find CLIK here:

https://clik.dva.gov.au/rehabilitation-library/keyword-index/household-services

Documents required

The DVA D9353 form is the only form that should be used for HHS assessments and it is to be uploaded to the portal against the HHS claim number given at the time of referral.

You can find the prescribed D9353 ADL form here:

https://www.dva.gov.au/about-us/dva-forms/activities-daily-living-assessment

To support you in completing this form, please see below for an example D9353 ADL with guiding points.

Special Circumstance or complex cases

If the HHS claim is of a complex nature or the recommendations do not generally meet our guidelines within *CLIK7.1.1 - reasonable level of service*, to support the recommendations we will accept a one page addendum to also be uploaded to the clients claim alongside the ADL form. As part of the addendum, with the client's permission, photos may be included as further evidence.

Vulnerable or Urgent Cases

If you believe the client is vulnerable or requires urgent services please do not hesitate to upload your report and then email (<u>HHS@dva.gov.au</u>) or call 1800 550 457 (Option 5) for the HHS team to alert us to the urgency. You will be required to provide reasons for the urgency.

Communicating with the HHS team

All referral acknowledgements and correspondence with the HHS team need to be sent to https://example.com/hHS@dva.gov.au. In the subject line, please include the clients name and HHS claim number.



Activities of Daily Living Assessment

The Department of Veterans' Affairs (DVA) can reimburse the reasonable cost of household services to serving and exserving members of the Australian Defence Force who have an incapacitating compensable condition accepted under the Safety, Rehabilitation and Compensation (Defence-related Claims) Act 1988 (DRCA) or under the Military Rehabilitation and Compensation Act 2004 (MRCA).

Household Services Are those services which are reasonably required for the proper running and maintenance of a person's household and may include meal preparation, cooking, cleaning, laundry, ironing, shopping, lawn mowing and gardening. Household Services can be provided up to a statutory maximum weekly limit.

> Medical information and evidence regarding the practical implications of the person's condition(s) are essential for DVA to make a determination.

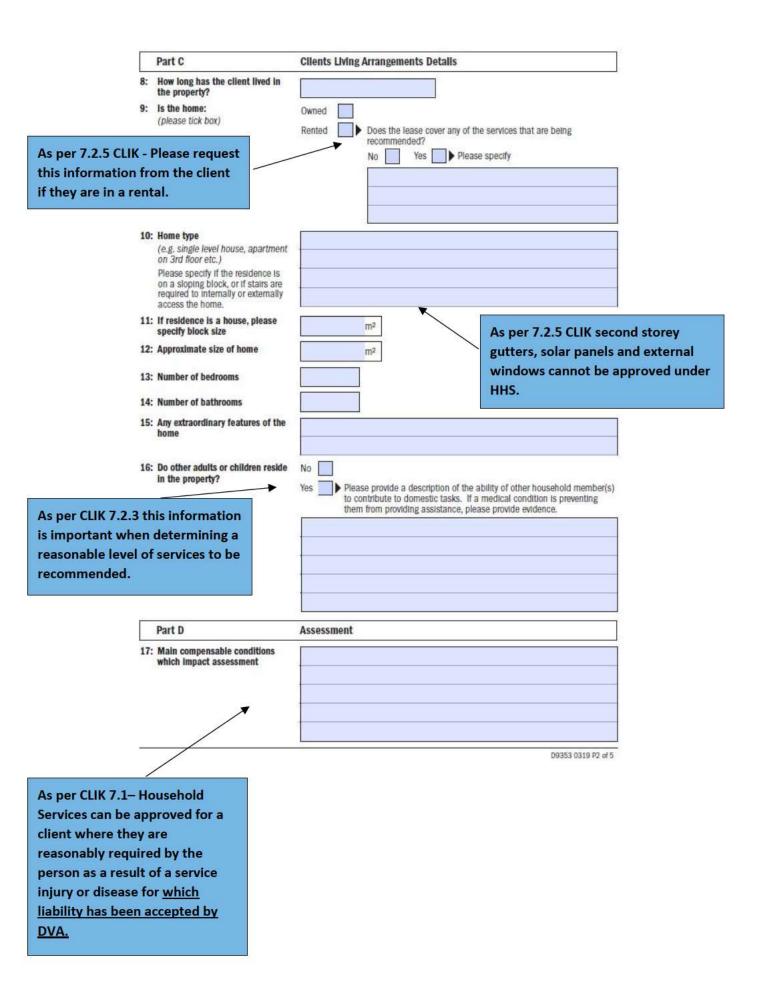
Privacy notice

Your personal information is protected by law, including the Privacy Act 1988. Your personal information may be collected by DVA for the delivery of government programmes for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

Read more: How DVA manages personal information.

This form is to be completed by a suitably qualified and experienced Occupational Therapist engaged by DVA to undertake an assessment of the person's ability to undertake tasks which are required for the proper running and maintenance of their household.

	Part A	Client Details
1:	Surname	
2:	Given name(s)	
3:	Address	POSTCODE
4:	Date of birth	7 7
5:	DVA file number	
	Part B	Assessment Details
6:	Date of assessment	
7:	Is this assessment for: (please tick box)	New Household Services Claim Renewal Household Services Claim



Part D

Assessment cont...

18: Please provide details of both the clients and your clinical assessment of the following functions:

Ensure to fill out all functions and state any that you have not personally witnessed over video or in person in your clinical assessment.

Function	Clients Assessment	Clinical Assessment
Sitting		
Standing		
Walking		
Using stairs		
Walking on uneven surfaces		
Lifting capacity		
Squatting and kneeling		
General body movement e.g. bending, neck turning, reach		
Balance		
Endurance		
Any relevant mental health factors		
Any relevant health factors		

D9353 0319 P3 of 5

The state of the s	Assessment cont		
19: Summary of clients' capacity to undertake household tasks			
Part E	Recommendations		
20: Based on your assessment of this client's capacity, do you recommend they receive household services?	No Yes		
21: Please provide your clinical reasoning for your recommendation			
eds to take into consideration			
K policy guidelines and only clients accepted DRCA/MRCA ndition that is causing the			
itations.			
22: Please provide your recommendations on the types of household services required and		Frequency of Ser	vice or not recommended
frequency (e.g. domestic cleaning - one service per fortnight/2 hours	100	_	
per visit)	Gardening		Enter the frequency an
	Gutter cleaning		hours with due regard
swer each recommended vice type even if it is not	Window washing		each client's individual
ommended. This will prevent	Other (if applicable and please li	iet)	needs and circumstanc within their household
S Delegates having to chase	Other (ii applicable and please ii	ist)	you are recommending
s information up where it is left			service.
nk.			
	30		Address any other service
			requested by the client or
			their HHS claim form here
23: Please provide any other relevant			If recommending pool
Information			cleaning or solar cleaning
	2		please enter installation date as they must have
			been installed prior to the
			The state of the s
			clients accepted injury da
			clients accepted injury da and therefore the client w
ase advise in this box whether the	face		and therefore the client w undertaking this service
ase advise in this box whether the essment was completed via face to eo or telephone, and if done via tel	Section 20		and therefore the client w

important information.

Provider Details
[] Mobile
rider Upload Page (PUP). If you are unable to do this, please email this document to HHS@dva.gov.au by clicking on the EMAIL button below. by hand, please scan the completed document and return to the same email address.





Household Services & Attendant Care Program Occupational Therapists Assessors Guide for Activities of Daily Living (ADL) assessments

Version 1.1 December 2023

Important: To ensure your assessment aligns with DVA's wellbeing approach to veterans, please read this information sheet, taking note of the types of household and attendant care services supported by us.

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ABOUT DVA'S HOUSEHOLD SERVICES AND ATTENDANT CARE PROGRAM

DVA's purpose is to support the wellbeing of those who serve or have served in the defence of our nation and their families.

One of the ways we do this is to partner with organisations and individuals, including allied health professionals like yourself, to deliver effective programs to empower our veterans to live well. The broader ecosystem that provides support to veterans and families includes:



DVA's Household Services and Attendant Care Services Program (the Program) provides compensation to veterans for home-based tasks they were independently undertaking prior to the onset of their accepted Safety, Rehabilitation and Compensation (Defence-related Claims) Act, 1988 (DRCA) &/or Military Rehabilitation and Compensation Act, 2004 (MRCA) service-related condition/s, and can no longer do. The aim of the program is to maximise a veterans' independence around the home and in their basic daily ADL.

Household Services include instrumental ADL activities required to keep the household running, including house cleaning and garden maintenance. Attendant Care Services include personal care services such as bathing/showering, dressing, eating and transfers/ safe mobilisation around the home.

Help can be provided for a short period to assist whilst a veteran recovers from their accepted injury or surgery so they can maximize independent function in their daily life. It can also be provided on an ongoing basis if there are complex or deteriorating health conditions.

The Veteran Summary provided with your referral contains information about the veteran's accepted conditions and other important information.

The process

Within one business day

- 1. Read the information in this document.
- Decide if you have the skills and knowledge for the assessment.
- 3. Accept or decline the referral by email.

Within three business days

 Make an appointment to visit the veteran. If there are delays please alert us by <u>email</u> with details of the delay.

Within 15 business days

- Complete your assessment.
- Use this guide to check your assessment is within DVA <u>Household Services</u> and <u>Attendant</u> Care guidelines.
- 7. <u>Upload your assessment</u> on <u>form D9353</u>, any addendum reports and your full invoice. (in the case you are unable to upload to the PUP, please email the <u>HHS claims team</u> please <u>do not</u> both upload and email the documents)

Communication with DVA

While we enjoy talking with Health Providers, it is easier for us if you communicate via email HHS@dva.gov.au. If you have any questions in relation to your veteran – ensure you include the veteran's name and claim number in the subject line.

If it can't wait and you need to contact us during the assessment, call 1800 550 457 (option 5).

Vulnerable or urgent cases

If our veteran is presenting as vulnerable or requires immediate action from the delegate to access Household or Attendant Care Services, please call our team on 1800 550 457 (Option 5) to alert us to the urgency.

Other urgent supports are listed on the <u>Other Services and Mental Health Support</u> page.

Privacy

The Privacy Act contains rules on how Australian government agencies and organisations handle personal information. We are bound by the Privacy Act and the 13 Australian Privacy Principles (APPs). The APPs outline how we collect, store, use and disclose personal information. More information is available on our website.

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YOUR ASSESSMENT

Assessment reports aligned with our guidelines are processed faster. As a registered Occupational Therapist (OT), your clinical

assessment will provide us with the information we need to ensure we can help our veterans maximise their function and be as independent as possible within their homes. This may include

showing them alternative ways to do tasks they are unable to complete themselves, linking them with appropriate community services, treatment/ conditioning programs or the provision of HHS&AC services to compensate them for tasks they can no longer do.

We recognise each veteran is different and each assessment length may vary. The following is an average of the time taken across OT's who have conducted ADL assessments for our program, for guidance:

Assessment (1 - 2 hours) Travel (time taken)

Report (1 – 2 hours)

Communication – up to 2 hrs

If your office has multiple locations, billing should be from the location closest to the client. If travel is likely to be over one hour each way, please check with our team before accepting the referral.

The Program is unable to pay third party costs directly, like GP/Medical Specialists. Costs may be covered by the client's Gold/White card, or funded by yourself and listed on your invoice to DVA.

Our referral provides a maximum financial limit for your services and we expect each invoice to be itemised showing the actual time taken per task.

Telehealth Assessments

OT's are expected to attend the veteran's residence to conduct assessments.

FIM Assessments

If we have requested a FIM assessment, please read our information regarding Catastrophic Injury provisions.

Essential Reading prior to commencing Assessment

The following essential reading provides further context on the program:

- CLIK Policy Library Household Services and Attendant Care
- **DVA Website Household Services and Attendant Care**

What your assessment should not include

- × Follow up sessions, review sessions or treatment
- Assessments for RAP items* or home modifications (refer the veteran to their GP for a community OT referral)
- Recommendations for services that reinforce isolation
- Recommendations for the Program to provide emotional support, community participation, access to medical appointments and/or transport

*Note: completion of simple RAP direct order forms for assistive equipment which require no follow up can be included in the cost of this assessment. When prescribing, it is a requirement to prescribe the most cost-effective, safe and clinically appropriate aids or appliances.

Assessment checklist

- Who was responsible for each task prior to injury?
- Who is currently completing the tasks? What support is being provided or could be provided by family/friends
- How do the veterans' accepted conditions impact on tasks being or not being completed? Do symptoms fluctuate?
- How do the veterans' non-accepted conditions impact on tasks?
- Are there any medical plans or interventions in place, or required, to increase functional independence over time? ie. treatment plans, task modification or aids?
- Observations of: the veteran's environment, impact of weight, impact of medication, behaviours and coping strategies.
- Are other support/treatment services being accessed or for consideration/referral? ie NDIS
- Are the recommendations evidence based? Has an appropriate functional assessment been completed to support the recommendation?
- Is the veteran insisting on services? Include your opinion of the reasonableness of services based on your clinical assessment.
- Is there any other information that will help us make the decision about approving services?

Document submission checklist

- ☐ Complete the <u>D9353 form</u>* Activities of Daily Living Assessment. *We are currently reviewing this form to make it more user-friendly.
- Attach an addendum for further information: include photographs where recommended services are above what are normally reasonable for a typical family home, with the veteran's consent. ie. Larger than typical garden areas, high tree/foliage density above gutters.
- Provide Attendant Care services recommendations in a table at the end of your report which clearly outlines the task, the justification and the level of support requested.
- Only one invoice (itemised) is to be submitted at the completion of the service ensuring the assessment type is noted as an ADL and/or FIM assessment.
- Upload your documents via Provider Upload Page (PUP)

What happens after the assessment?

- The HHS&AC Claims team reviews the report and recommendations.
- If any information is missing or requires further clarification, the delegate will contact you.
- The veteran receives a letter advising the outcome and how to engage a provider (if services are approved). The outcome letter may take up to 3 weeks from the date the assessment report is submitted.
- Our accounts team will process your payment in 20 business days.

HOW WE ASSESS REASONABLENESS

We know empowering our veterans with injuries to be independent is important. The HHS&AC team is committed to balancing a range of factors when making their decision:



Task modification

Can the task be modified so the veteran can still undertake the task independently? Can the task be spread out over hours/days? Are there any aids or appliances available on the RAP Schedule to assist the veteran increase independence in this task now or in the future? If so, a simple RAP order form can be completed in this assessment, as long as no follow up is required. For most items, please liaise with the veteran's General Practitioner to seek referral to an OT as the assessment will be billed under the clients Gold or White Card.

Family and household member's involvement



Within a family unit, each person has an important role in supporting and caring for each other (with or without injuries).

The Program is intended to provide services to compensate for the veteran's injury, without taking over the responsibility that other family or household members have in the running of the household.

Exceptions may be made when the extra burden of caring for a veteran is impacting on a family member to the extent that their wellbeing, employment or external commitments are being unreasonably impacted. Exceptions are also considered when other members of the house are injured, ill or frail as we recognise this impacts on the ability of the other family members to undertake household services for themselves and the veteran.

Your assessment needs to include information on the reasonable participation of family and household members. Further information on this topic is found in CLIK - Criteria for assessing what is reasonable.

Length and frequency of service

There is a skill to estimating the right level of service. Over servicing reinforces a sense of 'disability'. In addition it puts unnecessary pressure on our Program. The following is a *guide* to help with estimating the right level of service.

Lawn mowing;

The average yard size is approx. ¼ acre, so up to 2 hours per service is appropriate (noting minimum service times may apply).

Cleaning;

Fortnightly cleaning should only be recommended for the tasks in which the veteran was responsible for completing prior to injury and not based on the general requirement of the household.

Gutter and Window cleaning

1 to 2 services annually may be appropriate however consideration needs to be given to the environment and location and if it's more appropriate to employ specialised services to undertake these tasks.

Financial limits of the program

Funding for Household Services and Attendant Care are limited by a weekly statutory limit. This rate is adjusted annually. This means a veteran may only have combined services up to the limit for each week, with separate limits for Household Services and Attendant Care Services.

DVA also sets a maximum hourly service rate for service providers, which is adjusted annually. Current maximal rated are located here:

<u>Statutory Rate - Hourly - Household Services</u> <u>Statutory Rate - Hourly - Attendant Care Services</u>

It is important for the OT to consider the statutory limits and the priority of services in making recommendations to avoid the veteran having out of pocket costs to access the recommended services.

CHANGE IN CIRCUMSTANCES

If a veteran has a change in their circumstances after Household or Attendant Care services have been approved, and those changes will impact the existing services approval, they can contact the Household Services team on 1800 VETERAN or HHS@dva.gov.au. The team will look at their circumstances and consider any changes or organise an OT to perform a new ADL assessment.

CATASTROPHIC INJURY PROVISIONS

MRCA and DRCA legislations have provisions to remove the weekly financial statutory limit for those veterans assessed with a catastrophic injury. This assessment requires a separate referral from DVA to a FIM credentialed OT. For the catastrophic injury provision to be enacted, the assessment must show the veteran has a score of 5 or less on any items on the FIM and the injury is assessed as any of the following catastrophic injuries:

- Nerve
- Burn
- Brain
- Amputation
- Blindness

Further information is available: CLIK - Catastrophic Injury.

HOUSEHOLD SERVICES GUIDE

The Household Services included in this program are those tasks of a domestic nature in which the veteran had been solely responsible for completing prior to injury. If the injury is assessed to impact the veteran and they are no longer able to perform those tasks (or elements of the task) due to their accepted DRCA or MCRA condition, compensation through the Program can be considered. Refer to the Family and household member's involvement section about the expectation of their involvement.

At present, 65% of service approvals are currently being delayed by OT requests outside these guidelines. Funding for services needs to be aligned with HHS Program intent in the legislation. By following this guide, you will ensure appropriate services as per the legislative intent will be approved faster.

Types of Household Services

The following is a guide on the types of services this program could fund if the veteran was responsible for the task and is unable to do because of their DVA accepted conditions.

Services included within the home

- Air conditioner filter cleaning
- Bathroom cleaning
- Fan cleaning
- Fireplace cleaning (excluding chimney)
- Food shopping for or with veteran (when home delivery is not
- Internal domestic cleaning (including removal of household rubbish from the home to an outdoor bin)
- Laundry, washing, changing bed linen, ironing, folding
- Meal preparation (excludes food and delivery costs)
- Oven cleaning (excludes products)
- Window cleaning

Services included that are outdoor tasks

- Garden tidy (excluding tip fees)
- Gutter cleaning (ground level storey gutters only)
- Hedge trimming
- Lawn mowing and edges (the climate and growing conditions should be considered in frequency)
- Mulch spreading (excludes mulch and delivery)
- Outdoor area cleaning (such as patio areas and carport)
- Pruning trees and bushes (standard ladder access only)
- Window cleaning (single story only)
- Weeding and weed spraying (excludes products)
- Wood chopping and stacking (excludes purchase of wood and delivery fees)

Once off services

These services are still included in the weekly statutory limit calculations and may affect regular any weekly services.

- Hazard reduction garden tidy due to fire safety risk (excluding major tree trimming, surgery and removal).
- ✓ Professional Bond Clean (standard 'Bond Clean' only please) ensure you sight the lease agreement and note this in your report.)

Not included

- At height jobs above the height of a standard ladder
- Carpet cleaning
- Chimney cleaning
- Decluttering
- Dry cleaning
- Food/Grocery costs and/or delivery fees
- Gardening services beyond the curtilage
- Hedging and bush/tree pruning above standard ladder height or if specialised equipment is needed
- Landscaping
- Home maintenance
- Non-labour items (like cleaning products, mulch, rubbish dump
- Home removalist costs (ie for moving house)
- Packing and unpacking of boxes (ie for moving house)
- Pest control
- Professional services (like electrical, painting and plumbing)
- Repairs to property or garden structures
- Rubbish, furniture or waste removal
- Tree removal
- Vehicle washing and maintenance
- Washing and walking pets

Child care - specific requirements

Childcare will only be approved when a reasonable requirement for childcare is established and either of the following two criterion are met:

CRITERIA 1:

The child/ren was/were born before the compensable injury occurred, and the veteran was responsible for caring for the child/ren during working hours before the compensable injury occured, and ☐ there are no other members of the household who could provide the care, and the veteran has to pay for the services that they weren't paying before, because of the compensable injury. OR, CRITERIA 2:

- ☐ To address a crisis or unexpected situation (examples are in CLIK - Child Care) which could include attending treatment for an unexpected health event, and
- the veteran does not have an active DVA rehabilitation plan and there is likely to be a delay in them being able to access a rehabilitation assessment

P	ool cleaning – specific requirements
R	equests for pool cleaning need to establish;
	When the pool was installed
	How and when it is used by the veteran
	What standard cleaning responsibility the veteran had prior to injury (excludes maintenance – only labour costs,
	excludes any products used)
	Is it reasonable for someone else in the household to undertake this task?

Solar Panel cleaning - specific requirements

Re	quests for Solar Panel cleaning need to establish;
	When the panels were installed
	If panels actually need regular cleaning (consider the
	environment, location, trees close by, dirt or salt build up)
	Who was responsible for cleaning them prior to injury
	If the panels can be accessed from the ground (ie via a hose or standard ladder, with no need for specialised
	equipment or a for person to get on the roof
	Is it reasonable for someone else in the household to undertake this task

Who can provide Household Services?

Veterans can engage an appropriately experienced provider with public liability insurance, police checks and working with vulnerable people checks.

Providers of Child Care must be an **approved child care provider** approved to operate a child care service and administer the Child Care Subsidy. They must also be approved by the Australian Government and their State or Territory Government. Further information is available from the Department of Education, Australian Government.

ATTENDANT CARE SERVICES GUIDE

The Attendant Care services included in the Program are personal care services to meet essential and ongoing personal needs based on a veteran's clinical needs assessment. Attendant Care services may be short term while the veteran is recovering after surgery or long-term for chronic health conditions. The types of services are intended to provide the veteran with a degree of independence and improve their overall ability to independently function normally in the community.

Family members are expected to assist with *personal* tasks that do not exceed general relationship expectations or impact their ability to work. This includes reminders, decision making, managing financial transactions and emotional support. These supports are not funded by the Program.

Attendant Care services should work in conjunction with a veteran's treatment plan. Services do not replace treatment options like behavioural support, cognitive support, psychiatrist support, pain specialist or counselling.

Over 50% of requests for Attendant Care services fall outside our guidelines. Funding for services needs to be aligned with the Program intent of the legislation. By following this guide, you will ensure appropriate services will be approved faster.

Please ensure you present recommendations for Attendant Care services in a table, as set out in the <u>assessment checklist</u>. This should include what type of assistance is required for each specific task, and the amount of time assistance is required per individual task.

Types of Attendant Care Services

Services includes

- Ambulating: assistance transferring between sitting and standing
- <u>Dressing</u>: getting dressed, using zippers and buttons, attaching prosthetics
- ✓ Eating/drinking
- Grooming: personal hygiene tasks like brushing teeth, bathing, shaving, hair and nail care
- ✓ Toileting: continence, using toilet, cleaning after use

Services not included

- × Accommodation
- Administrative assistance (ie. Paying bills, booking appointments, collecting scripts
- Food costs
- Meal delivery costs
- Medical services/ treatment
- Medication administration and management
- Nursing/ clinical care

Who can provide Attendant Care Services?

We strongly recommend that professional attendant care service providers are engaged to provide services. The <u>Australian Community Industry Alliance (ACIA)</u> has a list of registered care providers.

DVA rarely approves support by a family member, as it puts considerable strain on the family member providing what can be physically and emotionally demanding services. There is a risk that family members will incur injuries, and if the family member is unwell, the veteran does not have support when needed. Other financial and support options for family members who care for veterans, like a Centrelink Carers Allowance may be more appropriate. Some options are listed on our Other Services and Mental Health Support page.

In exceptional circumstances, a family member can be approved to be paid to provide specific attendant care tasks, however, the OT must firstly contact the delegate to discuss. The delegate will consider each case including the client's wishes and what might be reasonable to expect others to provide informally without compensation alongside formal supports. The next step is for the OT to contact the treating GP and obtain further medical support.

The delegate will provide extra information in the referral when you have been requested to complete an assessment for a veteran who has previously been approved for paid support by a family member or out of scope services. Please ensure you Liaise with the delegate throughout the process and do not discuss any changes to services directly with the client, as this may cause unnecessary distress.



OTHER SERVICES AND MENTAL HEALTH SUPPORT

If other support is more appropriate to help a veteran build capacity or receive appropriate support, the following links may be helpful.



What other services is the veteran receiving, i.e. NDIS?

Can a medical professional provide tools to self-manage their injury and remain independent?

"Is there an app for that?"

Is this service being requested to provide the family with additional finances?

Medical & Allied Health Support

- Services that may be covered by DVA's <u>Gold Card</u> (for all conditions) and <u>White Card</u> (for specific conditions) are on our <u>Health Services</u> page. *GP referral required* for services.
 - General practitioner and medical specialist services
 - Allied Health services
 - Dietetic services
 - Exercise physiology services
 - Occupational therapy services
 - Osteopathic services
 - Physiotherapy services
 - Podiatry services

Mental Health Support

- Open Arms veteran and family counselling, 24 hour crisis support. An OT can <u>refer a veteran</u> via phone, or email with consent. Veterans can also <u>self-refer</u>.
 - **counselling**
 - * treatment programs and workshops
 - peer support
 - suicide prevention and resilience training
 - crisis accommodation support
 - self help tools
- <u>Lifeline</u>
- Non-Liability Healthcare (NLHC) GP referral
- Mental Health support services GP referral
- PTSD treatment options and resources GP referral
- <u>Psychiatric Assistance Dog Program</u> referral via psychiatrist, psychologist, MH social workers or MH OT.
- Suicide Call Back Service

Other Programs

- NDIS
- Local Community Health programs
- Council services for older Australians
 COMMECT / SUDDOM / PESDECT

DVA Programs

- Community Nursing Program GP referral Nursing services at home
- <u>Coordinated Veteran Support</u> referral via DVA delegate

For veterans with complex and multiple needs.

- <u>Coordinated Veterans' Care Program</u> GP referral
 For those with chronic and mental health conditions
- New claim for liability

During the assessment, if a non-accepted condition appears to be service related, the veteran can apply for the condition.

- Vehicle cost assistance
- Rehabilitation Aids Program (RAP) GP referral to appropriate health professional, i.e. OT
 - Assistive technology
 - **Equipment**
 - Home Modifications
 - Vehicle Modifications
- <u>Rehabilitation Services</u> self referral
 Focuses on assistance with skill and capacity development to maximise wellbeing.
- Veterans' HomeCare referral via 1300 550 450
 Different eligibility and legislative requirements than Household Services, no choice of provider and annual limits per service type.
- <u>Veterans' Transport Service</u> self referral
- Wellbeing and Support Program 1800 VETERAN (1800 838 372)

Case management to assist with healthcare and connections with local services and other DVA programs.

Helpful Apps

- Apple Reminders
- Community Circle app
- Google Keep
- High Res app
- Microsoft To Do
- Operation Life app
- PTSD Coach app
- The Right Mix app

Support for Carers

- Carer Gateway
- Respite Care
- Open Arms
- Centrelink Carers Allowance



Activities of Daily Living Assessment

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Medical information and evidence regarding the practical implications of the person's condition(s) are essential for DVA to make a determination.

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Read more: How DVA manages personal information.

This form is to be completed by a suitably qualified and experienced Occupational Therapist engaged by DVA to undertake an assessment of the person's ability to undertake tasks which are required for the proper running and maintenance of their household.

5	Part A	Client Details	
1:	Surname		
2:	Given name(s)		
3:	Address		POSTCODE
4:	Date of birth		
5:	DVA file number		
	Part B	Assessment Details	
6:	Date of assessment	/ /	
7:	Is this assessment for: (please tick box)	New Household Services Claim Renewal Household Services Claim	

in and an analysis of the second	Part C	Clients Living Arrangements Details
8:	How long has the client lived in the property?	
9:	Is the home: (please tick box)	Owned
		Rented Does the lease cover any of the services that are being
		recommended?
		No Yes Please specify
10:	Home type	
	(e.g. single level house, apartment on 3rd floor etc.)	
	Please specify if the residence is on a sloping block, or if stairs are	
	required to internally or externally access the home.	
11:	If residence is a house, please specify block size	m ²
12:	Approximate size of home	m²
13:	Number of bedrooms	
14:	Number of bathrooms	
15:	Any extraordinary features of the home	
16:	Do other adults or children reside in the property?	Yes Please provide a description of the ability of other household member(s) to contribute to domestic tasks. If a medical condition is preventing them from providing assistance, please provide evidence.
77		
	Part D	Assessment
17:	Main compensable conditions which impact assessment	

Pa	rt	D

Assessment cont...

18: Please provide details of both the clients and your clinical assessment of the following functions:

Function	Clients Assessment	Clinical Assessment
Sitting		
Standing		
Walking		
Using stairs		
Walking on uneven surfaces		
Lifting capacity		
Squatting and kneeling		
General body movement e.g. bending, neck turning, reach		
Balance		
Endurance		
Any relevant mental health factors		
Any relevant health factors		

i i			
	Part D	Assessment cont	
19:	Summary of clients' capacity to undertake household tasks		
8	Part E	Recommendations	
20:	Based on your assessment of this client's capacity, do you recommend they receive household services?	No Yes	
21:	Please provide your clinical reasoning for your		
	recommendation		
		-	
00.	Diamananada	<u></u>	
22:	Please provide your recommendations on the types of	Recommended Service Type	Frequency of Service or not recommended
	household services required and frequency (e.g. domestic cleaning	Domestic cleaning	
	 one service per fortnight/2 hours per visit) 	Lawn mowing	
	per visity	Gardening	
		Gutter cleaning	
		Window washing	
		Other (if applicable and please lis	st)
23:	Please provide any other relevant information		
	viiliddoll		
		<u>k</u>	7

Provider Details			
[]	Mobile		
Upload the ADL to the Provider Upload Page (PUP). If you are unable to do this, please email this document to HHS@dva.gov.au by clicking on the EMAIL button below.			
	ider Upload Page (PUP). If y	[] Mobile	

HHS DETERMINATION CHECKLIST

This checklist must be used by DVA delegates in determining household services claims. For comprehensive information on HHS refer to Household Services Policy Manual in CLIK
A clean version of this template is available on the SharePoint page. You will need to save this to your desktop each time you complete a new assessment.

Client Information		
Name of client:		
UIN:		
REH:		
Date checklist undertaken:	Click or tap to enter a date.	
Staff member (name and position number):	Choose an item.	

	s part of the checklist relates to the evidence required	to make a HHS det	
			COMMENTS / NOTES
1	What type of claim is being determined?	Choose an item.	8
2	What legislation does clients accepted impacting conditions fall under?	Choose an item.	
3	Do you have sufficient information and clinical justification required to make a determination without proceeding to an ADL?	Choose an item.	Trim ref#
4	Was an ADL conducted face to face in the client's home as per HHS requirements?	Choose an item.	
5	Have you received a completed ADL report that provides you with enough information and clinical justification to make a determination?	Choose an item.	Trim ref#
6	Has the OT provided any subsequent information to be considered during the determination process?	Choose an item.	Trim ref#
7	Have you checked the OT has addressed all of the clients impacting accepted DRCA/MRCA conditions as per VIEW?	Choose an item.	
8	Has the OT addressed all client service requests from HHS claim form?	Choose an item.	
9	Is the client receiving assistance under VEA?	Choose an item.	

PAI	PART TWO – Legislative requirements for delegate consideration				
This	This part of the checklist relates to the legislation and policy considered by the delegate				
			COMMENTS / NOTES		
10	You have evidence that the services being recommended were personally undertaken by the client prior to the impacts from the clients accepted DRCA / MRCA conditions?	Choose an item.			
11	You have evidence that the client has current restrictions and limited capacity to undertake household tasks in relation to their impacting, accepted DRCA/ MRCA conditions?	Choose an item.			

12	You have evidence that consideration has been given to any other members of the household and their ability to contribute to tasks?	Choose an item.	
13	Are the recommendations within the ADL	Choose an item.	
	considered reasonable under HHS scope?		
	SERVICES WITH FURTHER SPECIFIC REQUIR Only required to be completed where you have a rethat have extra requirements attached to them in the extra requirements must be met in order for the have sufficient information to address the requirement to email in any further supporting information	recommendation for the follow the decision making process. e service to be considered for nents, you must discuss with	For each service type, or approval. If you do not
	Service Type	Requirement to be met	
13.1	Bond cleaning	The client has been assess Therapist and domestic cle approved. Choose an iten	aning has been
		You have received a copy of agreement and can confirm service is not required. Cho	n that a professional
13.2	Pool cleaning	Pool was installed or client with a pool prior to conditio an item.	
13.3	Solar panel cleaning	Solar panels were installed property with solar panels property with solar panels property. Choose an iter Solar panels are in a position greater than 3 metres or for panels to get onto the roof.	orior to conditions m. on that requires a ladder r the person cleaning the
13.4	Gutter cleaning	There is an identified need for the gutters to be cleaned Choose an item. Examples - gutters are prone to filling up with leaf litter because there are overhanging trees, client lives in bushfire risk zone.	Please comment with identified reason:
13.5	Window Cleaning	The recommendation is for external ground level only.	
13.6	Wood Chopping and stacking	Wood heater was installed property with wood heater impacting. Choose an iter	prior to conditions
13.7	Shopping	The client lives in a geogra not have grocery delivery s Choose an item. or;	•

	The client is unable to utilise grocery delivery services due to their impacting conditions Choose an item.
13.8 Childcare	The client was responsible for caring for the child/children during working hours prior to the accepted conditions impacting or unexpected circumstances arose Choose an item. There are no other members of the household who could reasonably be expected to care for the child/children without substantial disruption to their employment or other daily activities. Choose an item.

PAI	PART THREE - Determination This part of the checklist relates to the final determination being made and the outcome.			
This				
		1478	COMMENTS / NOTES	
14	What is the outcome of your determination?	Choose an item.		
15	Is the determination in line with the recommendations on the ADL or further information provided by the OT?	Choose an item.		
16	Did you seek technical escalation or policy advice for this determination?	Choose an item.		

PAI	PART FOUR – Decline Reasons		
This	part of the checklist relates to	decline reasons if applicable.	
17	In this column – list any declined services (add additional rows if needed)	In this column, write your reasons for the decline – ensuring to include all reasons a particular service was declined (e.g. there may be multiple)	In this column, note the section of the legislation that most relates to the decline reason
		110 - 220 - 111 S - 20 - 20	Choose an item.
			Choose an item.
			Choose an item.

PART FIVE - Task Compliance This part of the checklist confirms documentation has been completed and forwarded to client and that ISH is up to date for this claim. COMMENTS / NOTES 18 Have all approved and declined services been Choose an item. added to the clients claim in ISH? 19 Has the determination letter been completed Choose an item. and checked for errors? Do the services listed on the determination letter 20 Choose an item. match the services approved in ISH? 21 How has the determination letter been sent to Choose an item. client? 22 What is the TRIM reference of the determination Trim ref# communication? Have you checked the file to confirm all tasks 23 Choose an item. are completed and any future tasks are not duplicated and set to correct date for review?

24	Now that you have completed the determination	Choose an item.
	have you moved the claim into the HHS	
	Approved Holding Bay?	

THIS DOCUMENT MUST BE TRIMMED TO CLIENTS FILE FOR EVIDENCE OF DECISION MAKING

NAMING CONVENTION - HHS DELEGATE DETERMINATION CHECKLIST COMPLETED REH#

Case note on the client's current ISH claim -

Step 1 - Choose applicable statement:

Determined all household services to be approved please see delegate checklist for further information Determined all household services to be declined please see delegate checklist for further information Partial approval for household services determined please see delegate checklist for further information

Step 2. As well as above relevant statement add below two lines to case note and complete dates and trim ref numbers:

Determination checklist completed (date) - Trim ref # xxxxxx Determination letter sent to client (date) - Trim ref # xxxxxx

Eg.

Partial approval for household services determined please see delegate checklist for further information Determination checklist completed (01/09/23) – Trim ref # 0123456

Determination letter sent to client (01/09/23) - Trim ref # 0123457



7 Household Services

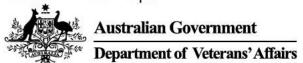
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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services

Last amended 06/10/2023 - 12:00pm



7.1 Household Services

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/71-household-services

Last amended 05/05/2023 - 12:00pm



7.1.1 What are household services?

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/71-household-services

Last amended 11/09/2023 - 12:00pm



7.1.2 What tasks are not considered household services?

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/71-household-services/712-what-tasks-are-not-considered-household-services

Last amended



7.1.3 Household services for serving members

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/71-household-services/713-household-services-serving-members

Last amended 11/04/2023 - 12:00pm



7.2 Criteria for assessing what is reasonable

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/72-criteria-assessing-what-reasonable

Last amended 29/06/2023 - 12:00pm



7.2.1 Personally undertaken prior to injury

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/72-criteria-assessing-what-reasonable/721-personally-undertaken-prior-injury

Last amended 13/05/2021 - 12:00pm



7.2.2 Injury implications

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/72-criteria-assessing-what-reasonable/722-injury-implications

Last amended 11/04/2023 - 12:00pm



7.2.3 Family members to contribute

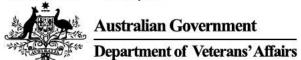
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Last amended 11/04/2023 - 12:00pm



7.2.4 Substantial disruption

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Last amended 14/09/2016 - 12:00pm



7.2.5 Any other relevant matter

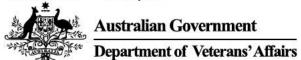
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Last amended 11/09/2023 - 12:00pm



7.2.6 Lawn Mowing for Rural or Semi Rural Properties

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/72-criteria-assessing-what-reasonable/726-lawn-mowing-rural-or-semi-rural-properties

Last amended



7.2.7 Child care

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Last amended 11/04/2023 - 12:00pm



7.2.8 Dog washing and dog walking

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/72-criteria-assessing-what-reasonable/728-dog-washing-and-dog-walking

Last amended Tue, 24/10/2023 - 12:00pm



7.3 Investigating a claim for Household Services

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/73-investigating-claim-household-services

Last amended 02/01/2024 - 12:00pm



7.3.1 Service Providers

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/73-investigating-claim-household-services/731-service-providers

Last amended



7.3.2 Provision of household services outside Australia

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Last amended Tue, 01/08/2017 - 12:00pm



7.4 Approving and Reviewing Household Services decisions

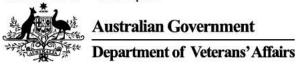
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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/74-approving-and-reviewing-household-services-decisions

Last amended 11/04/2023 - 12:00pm



7.5 Veterans' Home Care program

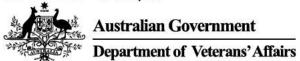
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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/75-veterans-home-care-program

Last amended 06/10/2023 - 12:00pm



7.6 Catastrophic Injury Provisions

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Source URL: https://clik.dva.gov.au/rehabilitation-policy-library/7-household-services/76-catastrophic-injury-provisions



Get Support Recognition

MyService About

Home > Get Support > Health support >

Care at home or aged care >

Services to support you at home > Household services

Household services

Last updated: 30 September 2024

Important update for Household Services service providers.



From 30 September 2024 the way service providers upload invoices for Household Services has changed. Read more information on the new

Important update for Household **Services clients**



From 30 September 2024 the way clients seek reimbursements for Household Services has

changed. <u>Read more</u> information information on the new process.

On this page

<u>Important update for Household Services service providers.</u>

<u>Important update for Household Services clients</u>

What are household services

Who can receive it

How you claim

How much you can receive

What to tell us

Things you should know

What are household services

Extra support can be provided if you need help at home because of a service-related injury or condition.

Short-term help can be provided to assist while you are recovering from surgery or on an ongoing basis if you have complex health issues.

Common services may include help with:

- cleaning
- shopping
- > childcare in some short-term and crisis care circumstances
- laundry
- ironing
- > lawn mowing
- gardening
- > meal preparation

Who can receive it

You may be eligible if you:

- are unable to manage household tasks because of your accepted service-related injury or condition (accepted under MRCA or DRCA); and
- are assessed as having a reasonable requirement for household services

How you claim

You can complete a <u>claim form</u> and send it to us:

- > by email to hhs@dva.gov.au; or
- > by post to GPO Box 9998, Brisbane QLD 4001

If you need help accessing or completing the form, you can <u>contact</u> <u>us</u>

If you are eligible for an assessment, we will:

- > confirm your eligibility for services
- assess your needs
- > determine the level of support you can access

Once approved, you will need to:

- > choose a suitable service provider
- > confirm the provider has appropriate insurance coverage
- > arrange suitable times for service
- > ensure that standards of service are maintained
- > let us know if your circumstances change

A suitable service provider is someone who holds an Australian Business Number (ABN), is equipped to deliver a high quality of service and has completed the following checks:

- > Working with Children Check
- > Working with Vulnerable People Check
- > Police checks

How much you can receive

Your clinical needs determine the services you can receive. The provider who undertakes your initial assessment will recommend the services you need.

We can reimburse you or pay your service provider directly for approved services they provide. There is a maximum amount we can pay per week. If your injury or condition is accepted under:

- MRCA the maximum is \$597.13
- > DRCA the maximum is \$574.76

Standard maximum rate for household services

The standard maximum rate your service providers may charge for the 2024 calendar year is \$72.75 per hour inclusive of GST. You do not need to seek further DVA approval for your provider to charge up to the rate published each calendar year for the duration of your approved service period.

This <u>flyer</u> shows service providers how to submit an invoice to the Department of Veterans' Affairs to receive payments for Household Services. They can also <u>watch this video</u> <u>animation</u>.

What to tell us

You should tell us if:

- you are receiving or applying for services from the <u>National</u> <u>Disability Insurance Scheme (NDIS)</u>
- > the level of help that you need changes
- > you plan on relocating to another area
- > you cease or close a rehabilitation plan
- > you are hospitalised, enter respite care or go on holidays

> you plan to move overseas

Things you should know

- > The services you receive will be reviewed regularly to ensure that you are receiving the right amount of help.
- > Household services do not include nursing care.
- As a general rule we cannot pay family to provide household services.
- > You should keep receipts from service providers.

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The Department of Veterans' Affairs acknowledges the Traditional Custodians of Country throughout Australia. We pay our respects to

Elders past and present. We recognise and celebrate Aboriginal and Torres Strait Islander people as the First Peoples of Australia and their continuing spiritual and cultural connection to land, sea and community.

To speak with someone at DVA, call 1800 VETERAN (1800 838 372)

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Division 3—Compensation for household and attendant care services

213 Definitions

(1) In this Division:

attendant care services for a person means services (other than household services, medical or surgical services or nursing care) that are required for the essential and regular personal care of the person.

catastrophic injury or disease means an injury, or a disease, where the conditions determined in an instrument under subsection (2) are satisfied.

household services for a person means services of a domestic nature (including cooking, house cleaning, laundry and gardening services) that are required for the proper running and maintenance of the person's household.

(2) The Commission may, by legislative instrument, determine conditions for the purposes of the definition of *catastrophic injury or disease* in subsection (1).

214 Compensation for household services

- (1) The Commonwealth is liable to pay weekly compensation for household services provided to a person if:
 - (a) the Commission has accepted liability for a service injury or disease of the person; and
 - (b) the person obtains household services that he or she reasonably requires because of the injury or disease; and
 - (c) a claim for compensation in respect of the person has been made under section 319.
- (2) However, the Commonwealth is only liable to pay compensation in respect of an aggravated injury or disease if it is because of the

Military Rehabilitation and Compensation Act 2004

209

Compilation No. 71

aggravation or material contribution (whether wholly or partly) that the person reasonably requires the household services.

215 Matters to be considered in household services compensation claims

In determining whether household services are reasonably required for a person, the Commission must have regard to the following matters:

- (a) the extent to which household services were provided by the person before the service injury or disease;
- (b) the extent to which he or she is able to provide those services after the service injury or disease;
- (c) the number of other persons (*household members*) living with that person as members of his or her household;
- (d) the age of the household members and their need for household services:
- (e) the extent to which household services were provided by household members before the service injury or disease;
- (f) the extent to which household members, or any other relatives of the person, might reasonably be expected to provide household services for themselves and for the person after the service injury or disease;
- (g) the need to avoid substantial disruption to the work or other activities of the household members;
- (h) any other matter that the Commission considers relevant.

216 Amount of household compensation

- (1) Subject to subsection (2), the weekly amount of compensation under section 214 that the Commonwealth is liable to pay for household services is the lesser of the following amounts:
 - (a) the weekly amount paid or payable for those services;
 - (b) \$330.

Note: The amount of \$330 is indexed under section 404.

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(2) If the service injury or disease referred to in paragraph 214(1)(a) is a catastrophic injury or disease, the weekly amount of compensation under section 214 that the Commonwealth is liable to pay for household services is such amount as the Commission determines to be reasonable in the circumstances.

217 Compensation for attendant care services

- (1) The Commonwealth is liable to pay weekly compensation for attendant care services provided to a person if:
 - (a) the Commission has accepted liability for a service injury or disease of the person; and
 - (b) the person obtains attendant care services that he or she reasonably requires because of the injury or disease; and
 - (c) a claim for compensation in respect of the person has been made under section 319.
- (2) However, the Commonwealth is only liable to pay compensation in respect of an aggravated injury or disease if it is because of the aggravation or material contribution (whether wholly or partly) that the person reasonably requires the attendant care services.

218 Matters to be considered in attendant care compensation claims

In determining whether attendant care services are reasonably required for a person, the Commission must have regard to the following matters:

- (a) the nature of the person's injury or disease;
- (b) the degree to which that injury or disease impairs the person's ability to provide for his or her personal care;
- (c) the extent to which any medical service or nursing care received by the person provides for his or her essential and regular personal care;
- (d) the extent to which the attendant care services are necessary to meet any reasonable wish by the person to live outside an institution;

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Division 5—Household and attendant care services

29 Compensation for household services and attendant care services obtained as a result of a non-catastrophic injury

- (1) Subject to subsection (5), where, as a result of an injury (other than a catastrophic injury) to an employee, the employee obtains household services that he or she reasonably requires, the Commonwealth is liable to pay compensation of such amount per week as the MRCC considers reasonable in the circumstances, being not less than 50% of the amount per week paid or payable by the employee for those services nor more than \$200.
- (2) Without limiting the matters that the MRCC may take into account in determining the household services that are reasonably required in a particular case, the MRCC shall, in making such a determination, have regard to the following matters:
 - (a) the extent to which household services were provided by the employee before the date of the injury and the extent to which he or she is able to provide those services after that date;
 - (b) the number of persons living with the employee as members of his or her household, their ages and their need for household services;
 - (c) the extent to which household services were provided by the persons referred to in paragraph (b) before the injury;
 - (d) the extent to which the persons referred to in paragraph (b), or any other members of the employee's family, might reasonably be expected to provide household services for themselves and for the employee after the injury;
 - (e) the need to avoid substantial disruption to the employment or other activities of the persons referred to in paragraph (b).

Note: In relation to paragraph (2)(d), see also subsection 4(2).

(3) Where, as a result of an injury (other than a catastrophic injury) to an employee, the employee obtains attendant care services that he

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or she reasonably requires, the Commonwealth is liable to pay compensation of:

- (a) \$200 per week; or
- (b) an amount per week equal to the amount per week paid or payable by the employee for those services;

whichever is less.

- (4) Without limiting the matters that the MRCC may take into account in determining the attendant care services that are reasonably required in a particular case, the MRCC shall, in making such a determination, have regard to the following matters:
 - (a) the nature of the employee's injury and the degree to which that injury impairs his or her ability to provide for his or her personal care;
 - (b) the extent to which any medical service or nursing care received by the employee provides for his or her essential and regular personal care;
 - (c) the extent to which it is reasonable to meet any wish by the employee to live outside an institution;
 - (d) the extent to which attendant care services are necessary to enable the employee to undertake or continue employment;
 - (e) any assessment made in relation to the rehabilitation of the employee;
 - (f) the extent to which a relative of the employee might reasonably be expected to provide attendant care services.

Note: In relation to paragraph (4)(f), see also subsection 4(2).

- (5) The Commonwealth is not liable to pay compensation under subsection (1) in respect of any week within the period of 28 days beginning on the date of the injury unless the MRCC determines otherwise in a particular case on the ground of financial hardship or the need to provide for adequate supervision of dependent children.
- (6) An amount of compensation payable by the Commonwealth under subsection (1) or (3) is payable:
 - (a) where the employee has paid for the household services or

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- attendant care services, as the case may be—to the employee; or
- (b) in any other case—to the person who provided those services.
- (7) Where the Commonwealth pays an amount to a person who provided household services or attendant care services to an employee, the payment of the amount is, to the extent of the payment, a discharge of the liability of the employee to pay for those services.

29A Compensation for household services and attendant care services obtained as a result of a catastrophic injury

Household services

- (1) If, as a result of a catastrophic injury to an employee, the employee obtains household services that he or she reasonably requires, the Commonwealth is liable to pay compensation of such amount per week as the MRCC considers reasonable in the circumstances.
- (2) Without limiting the matters that the MRCC may take into account in determining the household services that are reasonably required in a particular case, the MRCC must, in making such a determination, have regard to the following matters:
 - (a) the extent to which household services were provided by the employee before the date of the catastrophic injury and the extent to which he or she is able to provide those services after that date;
 - (b) the number of persons living with the employee as members of his or her household, their ages and their need for household services;
 - (c) the extent to which household services were provided by the persons referred to in paragraph (b) before the catastrophic injury;
 - (d) the extent to which the persons referred to in paragraph (b), or any other members of the employee's family, might

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