

Bidet Seat prescription and installation are considered a complex home modification.

This form should be provided with the bidet seat application submitted using the Home/Access
Modifications Application form (D1327) to your nominated DVA supplier.

Client name:		
DVA number: Assessment		
Address:		
Proposed Bidet Seat and related accessories:		
Contracted Brand and Model:		
User weight/Safe working load tolerance required:		
☐ Less than 130kg ☐ Between 130kg and 180kg ☐	Greater than 1	.80kg
Preferred location for Bidet seat installation:		
☐ Main Bathroom ☐ Ensuite ☐ Powder room/WC	☐ Other	
Location of room where existing toilet is situated in primary reside	ence:	
(consider the toilet with the simplest installation and which the client car	n access)	
☐ Ground level ☐ Upper level	☐ Other	
☐ Ground level ☐ Upper level Please tick all relevant criteria throughout the form and in Please consider - Cleaning will generally only occur to the area between butto assistance may be a more clinically approp	clude comment for ocks. In some cases, s	this modification
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Occupational Therapist's scripting considerations		Comments
Tailet Dan Shaner		
Toilet Pan Shape: ☐ Regular		
□ Elongated		
☐ U-shaped ☐ U-shaped		
U O-Silapeu/ D-Silapeu		
Note:		
- Shape of the toilet pan without the toilet seat will determine model options and seat - Bidet seats are designed with a smaller aperture as this helps keep the area opened f	•	
- Accessories such as pee guards are available for scripting in conjunction with bidet se	_	
Cook colours		
Seat colour:		
Regular (white)		
☐ Coloured toilet seat (blue or black only)		
Note:		
- Coloured toilet seats are only supplied to assist client orientation related to	diminished	
cognitive skills under RAP item BF03. Compatibility with bidet seat operation	must be	
confirmed by supplier.	tion of the seat	
- An alternate seat colour can only be used with models which allow deactival sensor.	tion of the seat	
Flushing type:		
☐ General household water		
☐ Tank water		
Note:		
- Water regulations do not allow grey water to be used for sanitation.		
- DVA do not upgrade utilities as part of the installation.		
- Tank water flushing will limit suitable options - Household water pressure can affect success of cleansing.		
Trouseriou water pressure currenteer success or creatisting.		
Transfers		
Assessment should confirm client capacity and understanding to lower	-	
Damage readily occurs to bidet seats when users complete side transfe themselves onto the seat with control.	ers using the seat	for stability or do not lower
themselves onto the seat with control.		
Recommended height of toilet pedestal and bidet seat combined:	mm	
Note: Existing seat will be removed as part of the bidet seat installation.		
Does the combined height of the toilet pedestal + bidet seat meet	☐ Yes	
this recommended height?	□ No	
Note:		
-DVA does not replace existing toilets to accommodate a bidet seat.		
- Use of aids and equipment available under RAP are to be assessed for		
suitable adjustment of transfer height.		



Occupational Therapist's scripting considerations		Comments
If No , nominate the height of raiser/spacer and brand/model:		
□ 50mm □ 80mm □ 100mm* □ 150mm*		
Brand/model:		
Note: *Some raisers must be customized by subcontractors prior to initial installation and d seatShape of raiser may impact on fluid flow into toilet bowl when used in conjunction w bidet seat modelConsider safe working load of scripted raiser as this may differ from bidet seat model	ith an elongated	
Rails/equipment required for transfer to/from bidet seat?	☐ Yes	
Note: Most effective use of a bidet seats occurs when clients are able to transfer to sit at the back of the toilet seat with a forward pelvic tilt. Manufacturers recommend user places their elbows or hands on knees with legs shoulder width apart where able.	□ No	
If Yes : A completed D0092 - Mobility and functional support <u>product order form</u> is require the application.	d to accompany	
☐ Fitted to toilet pedestal e.g. toilet arms - Some bidet seat models are not suited for use with rails fitted onto a toilet pedestal - Before scripting fitted rails consider the impact of excessive downward pressure dur longevity of fixings and pedestal structure.		
☐ Not fitted e.g. toilet surround		
☐ Fitted to wall - related diagrams and measurements will be required to accomp form.	any the D0092	
Will the client be using a shower commode chair in conjunction with the bidet seat?	☐ Yes ☐ No	
Note: There are limited shower commode options compatible with bidet seat use. Check with contracted supplier.		
If Yes is the configuration of the shower commode chair compatible with correct positioning over the toilet. E.g. Backrest tilt, seat height. If No showering and drying with carer assistance may be recommended as an alternative to a bidet seat.	☐ Yes ☐ No ☐ N/A	
Note: Bidet seats are designed with a smaller aperture. Consider alignment with shower commode chair aperture when assessing compatibility.		



Occupational Therapist's scripting considerations		Comments
If Yes is the configuration of the shower commode chair compatible with correct positioning over the toilet. E.g. Backrest tilt, seat height. If No showering and drying with carer assistance may be recommended as an alternative to a bidet seat. Note: Bidet seats are designed with a smaller aperture. Consider alignment with shower commode chair aperture when assessing compatibility.	☐ Yes ☐ No ☐ N/A	
Note: - Shower commode scripted must have a suitable clearance allowing the bidet seat water stream to be sufficiently effective for cleaning If yes, bidet seat model scripted must include the option to deactivate the seat sensor.	☐ Yes ☐ No ☐ N/A	
Controls		
Type of control	☐ Hand ☐ Foot	
Location of controls	,	
☐ Left side when seated ☐ Right side when seated ☐ Other ☐ Note: Provide additional details on clinically related positioning of controls in relevant.	comments where	
Mounting position		
☐ Seat mounted ☐ Wall mounted		
Tamper-proof cover required. Note: Not available on all models	☐ Yes ☐ No	
Installation		
Is an existing power point (GPO) available within 1.5m of the toilet pedestal?	☐ Yes ☐ No	
Note: - A GPO will be provided if required as part of the installation Installer will determine the location of any new GPO in line with electrical standards DVA does not undertake or fund the upgrading of basic utilities.		



Occupational Therapist's scripting considerations	Comments		
The contracted supplier will provide qualified trades to assess the proposed installation location prior to submitting the application to DVA.			
Where a local Water Corporation/Authority requires additional backflow containment at the property boundary based on local legislation/policy the installer will advise DVA. The installation costs and associated registration of the Reduced Pressure Zone device (RPZ) will be covered by DVA as long an eligible DVA client resides at this residence.			
Note : DVA will not install an RPZ valve/device where the relevant regulator does not require one. (see <u>bidet seat and RPZ valve guidelines</u>)			
The installer will advise DVA and the client if any additional <u>related works</u> are require utilities up to current building or plumbing standards. E.g. Safety switch for power be equipment. This work is the responsibility of the homeowner. Additional related work to DVA installations.	ox, additional water-pressure		
OT follow-up			
A post installation visit is recommended to ensure: - client/carer capacity to use controls correctly and provision of further education if	required.		
- client transfer technique demonstrates gentle lowering/transfer onto the bidet seat and whether any additional transfer aids are required.			
General			
Has the client been advised of their responsibility in terms of ongoing care of the bidet seat?	☐ Yes ☐ No		
Note: General toilet operation/sewerage issues are the responsibility of the homeowner.			
Client has been advised that any <u>significant</u> fluctuations in user weight may affect the safe and effective operation of the bidet seat.	☐ Yes ☐ No		
Client been advised to contact the prescriber on completion of the installation to confirm ease of and safe use of the installed modification?	☐ Yes ☐ No		
Which local authority provides Water and Sewerage services to property?	□ Not known		
Note: Local authority can be confirmed by asking the client/family who delivers water and sewerage services to the residence.			





Mobility and Functional support product ord	er form D0992 completed where releva	nt for additional
equipment or minor mods with diagram/s re	lated to this application?	☐ Yes ☐ N/A
Toilet measurements and photos are attache	d?	\square Yes \square No
Authority to Install (D1323) attached which re	eflects the final recommendations?	\square Yes \square No
OT Signature:	Contact Number:	
OT Name:	Contact Email:	