icare Lifetime Care

Part 5: Assessment of treatment and care needs

This Part of the Lifetime Care and Support Guidelines is made under sections 11A, 11AA, 23, 28 and 58 of the *Motor Accidents (Lifetime Care and Support) Act 2006* (the Act).

This version of Part 5 of the Lifetime Care and Support Guidelines (the Guidelines) takes effect on the date of gazettal in the NSW Government Gazette and, on and from that date, applies to all participants in the Scheme, whether interim or lifetime, and whether accepted into the Scheme before or after the date of gazettal.

The Lifetime Care and Support Authority (Lifetime Care) may waive observance of any part or parts of this Guideline. Waiving observance of all or part of this Guideline in any particular circumstances is not an indication that Lifetime Care will waive observance of this part or any other parts of the Guidelines in other circumstances.

Any reference to the participant means their legal guardian or legal representative where this applies.

1 Assessment and planning principles

- 1.1 Lifetime Care and service providers use the principles below to direct the overall approach to assessment and planning for participants.
- 1.2 Principles for the assessment of treatment and care needs:
 - a) the participant is central to all planning and decision making;
 - b) the participant's right to exercise choice and independence should be evident in plans and requests for services;
 - c) the participant is as actively involved as they wish to be in all decision making and planning about their treatment, rehabilitation and care services, with support provided as needed;
 - d) the Scheme provides participants with opportunities to maintain and develop skills to maximise independence, life roles and community participation, to facilitate social and economic participation; and
 - e) treatment, rehabilitation and care services meet treatment and care needs, and develop the individual's participation, independence and life roles while respecting flexibility and lifestyle choices.
- 1.3 Principles for communication:
 - a) effective communication with the participant and people close to them is essential for assessment, planning and delivery of services; and
 - b) communication is in ways which best suit the participant's individual circumstances.
- 1.4 Principles for assessment:
 - a) the participant's needs are identified through a comprehensive assessment of their strengths, abilities, limitations and desired participation goals. The assessment considers any potential facilitators and barriers to achieving the goals;
 - b) the participant's views are essential to their assessment and plan;
 - c) assessments are conducted using objective tools wherever possible; and
 - d) management plans are completed for any risks identified within the assessment, with the input and agreement of the participant, people close to them, service providers and Lifetime Care.
- 1.5 Principles for plans and requests for services:
 - a) plans and requests are directed by the participant, outlining their identified goals and expected outcomes;
 - b) in establishing goals with the participant, any potential environmental or personal barriers or

facilitators are recorded and addressed; and

- c) plans and requests explicitly state which services are to be funded by Lifetime Care to meet the participant's motor accident injury-related treatment and care needs and may include information about services Lifetime Care does not fund.
- 1.6 Principles for service delivery:
 - a) effective service delivery is participant-centred and involves communication and cooperation with the participant, their family, service providers and Lifetime Care;
 - b) effective service delivery maximises the participant's independence and their participation in life roles in the community;
 - c) the participant has the right to direct their service delivery to the extent that this is possible or that they wish to; and
 - d) participants with decision making capacity have the right to refuse services, even when others may not agree with this choice.

2 Procedures to be followed in connection with assessments

Assessment of a participant's treatment and care needs

- 2.1 Lifetime Care must make an assessment of the treatment and care needs of a participant in the Scheme in accordance with the Act and the Guidelines.
- 2.2 Lifetime Care may conduct an assessment of the treatment and care needs of a participant in the Scheme if the need is identified by Lifetime Care, and/or if requested by the participant or someone on their behalf.
- 2.3 A request may be made:
 - a) on a form;
 - b) in writing (e.g. by letter, email or fax); or
 - c) verbally to Lifetime Care or a service provider.
- 2.4 If a request is made to a service provider by a participant or someone on their behalf, the service provider must request Lifetime Care to conduct an assessment of the treatment and care needs.
- 2.5 Lifetime Care's procedures for requesting services must be used by a service provider when requesting Lifetime Care to conduct an assessment. This includes using Lifetime Care's approved forms for requesting an assessment. All of Lifetime Care's approved forms are available at <u>www.icare.nsw.gov.au</u>.
- 2.6 Lifetime Care may request that a participant, service provider or other person on the participant's behalf provides additional information if there is insufficient information contained within the request to undertake an assessment of needs.
- 2.7 A request for an assessment by Lifetime Care may relate to more than one of the treatment and care needs listed in section 5A(1) of the Act. Lifetime Care may decide to assess more than one request for assessment of treatment and care needs at the same time, regardless of whether this was requested.
- 2.8 Lifetime Care may assist a participant to access services or a participant may request Lifetime Care to undertake an assessment of their needs. This may include funding a service provider such as a case manager.

Lifetime Care reviewing requests

- 2.9 Where possible, Lifetime Care will make its assessment within 10 working days of receipt of a request, where it has all relevant information to assess the treatment and care needs, except for requests for:
 - a) prostheses; or
 - b) home and transport modification, unless the cost of the modification is under \$10,000.

- 2.10 In relation to requests for prostheses and home and transport modifications over \$10,000, Lifetime Care will provide written advice to the participant about the status of a request within 20 working days of receipt of the request.
- 2.11 Lifetime Care will give the participant a copy of its reasons for approval or refusal of a request in a certificate in accordance with section 23(4) of the Act in the relevant timeframe as outlined above. Lifetime Care will also provide information about the process for resolving disputes about treatment and care needs.

Ongoing assessments

- 2.12 Lifetime Care will conduct ongoing assessments when the participant's treatment and care needs are likely to change over time. In deciding the intervals at which assessments are to be carried out, Lifetime Care may consider any of the following factors and any other factors it considers relevant, including:
 - a) the nature and severity of the motor accident injury;
 - b) whether the participant is an interim participant, as assessments of treatment and care needs may occur more frequently;
 - c) the frequency of any requests received from the participant;
 - d) when the motor accident injury occurred, given that participant's treatment and care needs may change during the recovery process;
 - e) the extent of the participant's treatment and care needs;
 - f) whether and how the participant's motor accident injury affects their ability to request that Lifetime Care assesses their needs; and
 - g) where possible, the extent to which the need for multiple assessments can be decreased.

External assessments

- 2.13 Lifetime Care may request a participant undergo an assessment or a medical examination with an external service provider or a health professional.
- 2.14 If the participant agrees to undergo an assessment or medical examination, Lifetime Care may request an external service provider or health professional to:
 - a) complete a report;
 - b) complete a plan or a request for services on one of Lifetime Care's approved forms; and/or
 - c) provide additional information to accompany a plan or request already submitted to Lifetime Care.
- 2.15 If a participant refuses a reasonable request to participate in an assessment which results in Lifetime Care being unable to make an assessment of a treatment and care need, Lifetime Care may have insufficient information to determine that the requested treatment and care need is reasonable and necessary.
- 2.16 Lifetime Care will document the refusal by informing the participant or a person acting on their behalf, in writing, that:
 - a) Lifetime Care is unable to make a decision to approve the treatment and care need;
 - b) the reasons for, and circumstances of, the refusal of the treatment and care need; and
 - c) Lifetime Care will not arrange and pay for services to meet the treatment and care need.

3 Methods used to determine treatment and care needs

- 3.1 In undertaking an assessment, Lifetime Care will:
 - a) take the participant's views into consideration;
 - b) identify the participant's goals, aspirations, strengths, capacity, circumstances and context;
 - c) assess, with the participant, their activity limitations, participation restrictions or barriers and needs arising from the motor accident injury;

- d) assess risks and safeguards in relation to the participant;
- e) wherever possible, relate treatment and care needs to the participant's stated goals and aspirations:
- f) consider the assessment and planning principles in the Guidelines; and
- g) wherever possible, use appropriate standardised objective assessment tools as published on Lifetime Care's website at: www.icare.nsw.gov.au
- 3.2 Information that Lifetime Care may require to conduct an assessment of a participant's treatment and care needs may include:
 - a) any information provided in any request for a treatment and care need;
 - b) answers to questions posed by Lifetime Care or external service providers;
 - c) hospital records;
 - d) treating doctor's reports and other medical reports;
 - e) past medical records or school records;
 - f) other pre-accident information or general medical information; and
 - g) any other information Lifetime Care considers relevant.

4 Reasonable and necessary criteria used to determine needs

4.1 Part 6 of the Guidelines outlines the criteria Lifetime Care may consider in determining reasonable and necessary treatment and care needs.

5 Information needed by Lifetime Care to determine whether a treatment and care need is related to the motor accident injury

- 5.1 In deciding whether a treatment and care need is related to the motor accident injury, Lifetime Care may consider:
 - a) information in 3.2 above;
 - b) whether it is possible to assess the nature and extent of any pre-existing or co-existing injury to determine the treatment and care need solely related to the motor accident;
 - c) whether a pre-existing injury or co-existing injury has been exacerbated by the motor accident injury;
 - d) whether there are other needs related to the motor accident injury that may be affected by a decision that a need is not related; and
 - e) any other information Lifetime Care considers relevant.

6 Incurred expenses and reimbursement

- 6.1 Where possible, assessment of treatment and care needs is to be undertaken before expenses are incurred on treatment, items or services.
- 6.2 If a participant, or someone on their behalf, incurs an expense and requests Lifetime Care reimburse the expense, Lifetime Care may:
 - a) assess the treatment and care needs that relate to the motor accident injury in accordance with this Part; and
 - b) use the criteria in Part 6 of the Guidelines to determine whether the expense incurred is reasonable and necessary.