

## Part 10: Respite care services

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

This version of Part 10 of the Lifetime Care and Support Guidelines (the Guidelines) takes effect on the date of gazettal in the NSW Government Gazette and applies to any assessment of treatment and care needs relating to respite care services made on and from that date in respect of any participant 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 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 or any other Guideline in any other circumstances.

## 1 Reasonable and necessary respite care services

- 1.1 Lifetime Care considers treatment or care needs in connection with respite care services to be reasonable and necessary when the services:
  - a) are planned and short-term services to support and enhance the sustainability of the family unit or usual living arrangements in the household where the participant lives;
  - b) enhance sustainability of the regular care or support routine by providing the participant with a break from usual care arrangements; or
  - c) facilitate and support the primary informal support relationship between the family or carer and the participant.
- 1.2 Reasonable and necessary treatment and care needs in connection with respite care do not include:
  - a) respite care services relating to circumstances, a need and/or an impairment that existed before a motor accident or that are not a result of a motor accident injury; and
  - b) services that are not for short intervals (although respite services may be scheduled at periodic intervals during the course of a twelve-month period).
- 1.3 The reasonable expenses in relation to the participant's assessed treatment and care needs in relation to respite care services will not generally include:
  - a) expenses that are attendant care services or domestic services under Part 8;
  - b) expenses related to holidays as respite services, such as the travel, accommodation costs and activity costs for a holiday; and
  - c) respite care services that exceed any injury-related need, such as additional costs incurred as a result of choosing a respite service option which offers a higher level of support than is required to meet the participant's needs. For example, Lifetime Care will

not regard the extra cost to be reasonable and necessary where a participant does not require high level nursing care and chooses this option.

- 1.4 Lifetime Care will consider paying reasonable expenses of alternatives to respite care services, such as centre-based respite, and flexible respite. Specifically, in some circumstances other programs will be considered when such alternatives are:
  - a) age-appropriate;
  - b) provide appropriate support;
  - c) assessed as a suitable alternative to meet the participant's injury-related needs; and
  - d) designed to support and sustain the participant and their usual care arrangements as outlined in clause 1.1 above.
- 1.5 Respite care services may be provided to a participant who receives other support services such as attendant care. If regular respite care services are requested to undertake a particular task, Lifetime Care may review the participant's needs for attendant care services, with reference to Part 8 of the Guidelines, as an alternative to funding respite care services.
- 1.6 When a participant is away from home, a request to fund attendant care in an alternative setting on a short-term basis should be made with reference to clause 10 of Part 8 of the Guidelines.
- 2 Method of assessment and criteria used to determine reasonable and necessary treatment and care needs in connection with respite care services
- 2.1 To determine whether a participant's need for respite care services is reasonable and necessary in the circumstances, the services must:
  - a) be planned in collaboration with the participant;
  - b) be age-appropriate;
  - c) consider the participant's individual needs for respite care in the context of other treatment and services provided, including attendant care and aids and appliances (equipment);
  - d) consider the needs of the family unit or usual living arrangements, including who the participant chooses to deliver their attendant care; and
  - e) consider the environment or environments in which respite care services will be delivered.
- 2.2 Information required by Lifetime Care to assess a participant's treatment or care needs in connection with respite care services may include:
  - a) information relating to the motor accident injury, including nature and severity of injury;
  - b) about pre- or co-existing conditions that may also give rise to a respite care need;
  - c) relating to other treatment and care needs under section 5A of the Act, such as attendant care, aids and appliances (equipment) and home modifications; or
  - d) providing justification for the type and level of respite care services requested and for the provider of the service, where applicable.