

Care Needs Assessor Expectations SP19

Information for care needs assessors working with Lifetime Care, Workers Care, and CTP Care

Care Needs Assessor Expectations

For the purposes of this document the term 'participant' is used to describe participants in the Lifetime Care Scheme, workers in the Workers Care Program, and clients in the CTP Care Program. The Care Needs Assessor Expectations should be used in conjunction with the Terms of Agreement (TOA) and Schedules for icare Care Needs Assessors.

Expectation	Evidence care needs assessor meets the expectations
Assessment	
Has clinical knowledge and expertise to deliver quality care needs assessments	Makes clinically appropriate decisions and recommendations in line with latest best practice and evidence-based data.
	Uses and appropriately applies resources such as SCI Guidelines; CANS; ICF Only accepts referrals for adults if approved for care needs assessment for adults
	Only accepts referrals for children if approved for care needs assessment for children
	Only accepts referrals for participant categories as approved
	Demonstrates the ability to complete an objective assessment of care need across all domains of function and considering all potential barriers and facilitators impacting activity participation
	Provides accurate and sufficient information in reports and request for icare to make an assessment of care against reasonable and necessary criteria
Care Needs Assessments are completed using a person-centred approach	Care Assessment includes the participant perspective & reflection regarding capability, changes, current care program delivery/effectiveness and potential future needs
	Incorporation of My Plan content – any roles and/or training for support workers to help achieve goals
	Awareness and incorporation of programs to improve quality of life and other outcomes that impact care needs – for example, Positive Behaviour Support (PBS) Plans; and any training required by Support Workers to provide specialty support
	Demonstrates understanding of the needs of the participant in terms of their disability, life roles and community participation.
	Demonstrates sensitivity to personal preferences, cultural and religious considerations of the participant, and the impact on icare
	Care formulation includes appropriate incorporation of feedback from others – for example family members, care provider, icare contact

Report includes the person/family's perspective while remaining an objective assessment of their current circumstances.

Adapts assessment approach to each participant's unique circumstances – eg needs on a large, rural property; needs when living near the ocean; property type; standards/preferences/priorities; size of dwelling; people living at the dwelling; roles (eg 'parent')

ACSR includes informed choices made by the participant regarding care delivery options. There is evidence that the care needs assessor has provided enough support to the participant to enable them to exercise choice.

ACSR demonstrates appropriate utilisation of informal supports as requested/preferred by the participant and their family.

Applies relevant scheme guidelines appropriately

Demonstrates appropriate management of situations where the assessor's recommended care is different to what is requested by the participant

Hours recommended to support the completion of specific tasks/activities are reasonable in the circumstances and recorded accurately

Incorporates normal expectations of parental roles and responsibilities and knowledge of increased parental personal support vs domestic task support in lieu of care

Provides the participant (and family if appropriate), with enough information to ensure participant choices are fully informed

Demonstrates understanding of the difference between an active, well informed choice regarding high risk behavior, and inherent vulnerability when the participant lacks insight, has compromised judgement, is a child or other factors which might influence their capacity to be the decision-maker in regard to their care

Where risk to a participant is identified, appropriate actions are taken to minimise risk of harm. Some actions may include, but are not limited to:

- Guides participants in finding ways to mitigate or manage risk within their choices related to care
- Liaises with other stakeholders (such as icare contact, case manager, care coordinator, family, FACS,) to ensure the appropriate people are aware of and manage identified risks

Knows when to refer to appropriate bodies for high risk behavior management or child protection issues – eg FACS, guardian

Where risk has been identified and advice/actions taken, appropriate documentation is provided to **icare**

Adverse Events

In the event of the care needs assessor becoming aware of an adverse event or change in situation that has caused or poses an immediate or serious risk of harm, icare is informed immediately by telephone and follow up email/other written correspondence.

Adverse Change in Situation

Advises **icare** in writing as soon as care needs assessor becomes aware of an adverse change in situation for a participant where their safety or wellbeing will or may be significantly affected.

Documentation and requests	
Acceptance of referral and timeliness	Referrals are accepted within 2 business days of receipt
	Completes the assessment and provides the report to icare in the timeframe outlined in the referral (as per Schedule 3 in the TOA or as negotiated)
Provides a clear and logical assessment and explanations	Reports & request forms include enough information to enable an assessment of care against the reasonable & necessary criteria
	Hours of care recommended and being requested are reasonable in the circumstances and consistent with representation of the participants needs in the CNAR
	Where the ACSR includes care not identified in the CNAR, the Care Needs Assessor has adequately explained these circumstances in the request
	Alternatives to care have been considered and discounted (for example, alternatives to inactive overnight care such as emergency call systems have been considered)

Professional conduct and continuous improvement	
Professionalism	Adheres to professional boundaries
	regarding the role of an independent assessor. Delivers only services which fall within this role and as requested.
	Demonstrates clear understanding of the distinct roles of support workers, RN, Care Coordinators, CM, to ensure the right provider is delivering the right care
	Remains within the scope of care needs assessment during and following the care needs assessment. Does not make recommendations to the participant/family which are outside the role as care needs assessor (and especially which other members of the treating team might have responsibility for)
	Any out-of-scope issues/needs which become evident during the care needs assessment are reported back to the case manager/icare contact for their attention and are not discussed directly with the participant/family.
Terms of Agreement	Adheres to all sections of the Care Needs Assessors (icare) Terms of Agreement

Working relationships	
	Uses appropriate communication strategies to suit the participant needs.
Working effectively with participants	Explains the purpose of the Care Needs Assessment to enhance participant's understanding of their rights and responsibilities with regard to care under the Scheme
Working with other service providers	Integrates information from others into the report while maintaining an objective balanced assessment
Working cooperatively with icare	Understands the extent and limit of icare's role in meeting the participant's requested care where this does not match the care needs assessor's recommendations or icare's assessment of care
	Responds constructively to feedback from icare regarding assessments, reports and requests, and is able to understand icare's perspective when further information is requested or where icare's assessment of care differs from the assessor's recommendations
	Makes contact with icare and provides a reasonable written explanation when a report will be delayed

Business management	
Ability to provide services efficiently	Sufficient skills in technology to use icare templates ie interactive PDFs, Word, Excel
Efficient invoicing systems	Invoices are sent in a timely manner and include all information required by icare. • ABN • Invoice number • Participant Number • RP number/s • Service codes • GST as appropriate Only services pre-approved by icare (as indicated in the referral or as have subsequently been approved) are invoiced

icare

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