

DOMESTIC ASSISTANCE

This operational instruction must be read in conjunction with the gazetted WorkCover *Guidelines for the Provision of Domestic Assistance*.

The guideline provides detailed information, including:

- (a) eligibility for domestic assistance
- (b) purpose of the provision of domestic assistance
- (c) approval requirements for domestic assistance
- (d) level of domestic assistance that can be approved
- (e) special requirements related to payment of compensation for gratuitous domestic assistance services
- (f) choosing a domestic assistance provider.

Need for a functional assessment

A thorough on-site functional assessment (or functional capacity evaluation) is required prior to a Worker being able to receive domestic assistance, except where the need for the provision of domestic assistance is clearly apparent (eg. after surgery) – and short-term (eg. during a period of recuperation). In this case, medical certification is required as supporting evidence.

The functional assessment must be completed by a relevant professional – eg. occupational therapist – and accompanied by a Medical Certificate that certifies:

- (a) the need for domestic assistance and the functional restrictions limiting the Worker's capacity for performing domestic tasks
- (b) the need for domestic assistance is a direct result of the work Injury
- (c) that domestic assistance is reasonably necessary.

Functional assessment requirements

The functional assessment statement must include the following information:

- (a) Worker's name
- (b) address
- (c) date of birth
- (d) Claim number
- (e) date of Injury
- (f) date of functional assessment
- (g) details of Injury/incapacity, considering the diagnosis, current functional status, limitations and prognosis
- (h) social situation, with details of living arrangements and the Worker's family situation

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- impact of the Injury on completion of domestic tasks ie. a summary of the impact on the Worker's ability to complete domestic responsibilities – including the results of the ADL assessment
- (j) level of impairment, outlining:
 - (i) short-term domestic assistance how short-term domestic assistance will aid the Worker's recovery and rehabilitation, certified by a medical practitioner, or
 - (ii) where the Injury is likely to result in 15 percent or greater whole person impairment
 the Worker's inability to complete their domestic responsibilities or
 - (iii) where the Injury has been assessed as having 15 percent or greater whole person impairment the Worker's inability to complete their domestic responsibilities
- (k) justification for service recommendations, demonstrating:
 - (i) the need for assistance has arisen from the Worker's compensable Injury
 - (ii) a clear link between the Worker's needs, purpose of assistance and likely Benefits
 - (iii) that despite consideration of alternatives there remains a need for domestic assistance, such as adaptive equipment to enable independence, training in work simplification and working towards independence in domestic tasks as part of the rehabilitation program
 - (iv) cost-effectiveness of the proposed intervention, including the likelihood that the intervention will substantially contribute to reducing dependence on further treatment, rehabilitation and Workers Compensation Benefits
- (I) other cultural/social factors, and factors that contribute towards the need for the particular recommendations eg. Were the tasks previously performed by the injured Worker? Have social circumstances changed so that the tasks are now the responsibility of the injured Worker? Consider relevant cultural issues and standards, individual needs, and burden on family members
- (m) recommended services
- (n) recommended service providers, timeframes and cost-effectiveness of the options, including hourly rates, travel, efficiency of using family and friends, loss of income for family and friends, date of functional re-evaluation, and relevant cultural, family and individual circumstances and preferences
- (o) name of provider organisation
- (p) name and signature of the provider undertaking the assessment
- (q) date of assessment and date of report.

References

Workers Compensation Act 1987, section 60AA

Guidelines for the Provision of Domestic Assistance

Deed, Schedule 2, clauses 2.2.5, 2.2.11, 2.3.1, 2.4.2, 2.5

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