



Direct Health Support of People with Disability Guideline

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1 Intent

The Direct Health Support of People with a Disability Guideline is to be read in conjunction with the Direct Health Support of People with Disability Policy. The Guideline aims to assist agencies and their support worker personnel to plan and deliver health support to people with disability, including those with complex health needs. The guideline outlines assessment indicators, registered nurse (RN) involvement, as well as support worker competencies and training requirements.

2 Terminology

The Glossary of Terms has been developed to ensure all individuals involved in the provision and receipt of health support within community settings have an understanding of the training and competency-based assessment model.

Agency Support Plan

Clients within the disability services sector may have an individual support plan that documents the steps to be undertaken by a support worker in providing support to the client. This plan usually relates to various aspects of the client's life domains and activities. The plan is usually developed by the provider agency or case manager (broker) in consultation with the client and their support networks.

Assessment

Refers to the collection of relevant client information related to their health support needs and the undertaking of an environmental assessment to determine the client's actual and potential health needs, and the predictability of their health status into the future.

The provider agency or case manager (broker) must ensure all health assessments are undertaken by an RN who is familiar with the Direct Health Support of People with a Disability Policy and Guideline, and who has an appropriate level of competency and expertise in the area of care.

Case Manager (Broker)

Case manager (broker) refers to the role undertaken by agencies who allocate funding (purchase services) to provider agencies for individual clients. If a broker takes on a direct service provision role, then they must adhere to the service provider agency requirements in accordance with the Direct Health Support of People with Disability Policy.

Competency-Based Assessment

Refers to the assessment of demonstrated understanding of, and an appropriate level of skill, knowledge, ability, attitude and value base that enables support workers to perform tasks within the scope and limitations of their role and responsibility.

Complex Health Support

Within the context of these guidelines 'Complex Health Support' is used to differentiate the support levels, with particular reference to Level 3 support.

Delegation

Delegation of care, consistent with the Nurses Board Standards (South Australia), refers to circumstances when the RN has any specific knowledge of, professional relationship with, or obligation to, the client. Aspects of delegation are, but not limited to:

- an RN/client relationship is established
- the task to be performed is within the professional scope of practice of the RN
- the task to be performed requires an assessment of client needs to individualise and/or interpret care for an individual client
- the RN determines that the support worker is capable of carrying out the health support task.

Environmental Assessment

Within the context of assessment, an Environmental Assessment refers to the consideration given to the location where the client is to receive support. The following issues would be considered in an Environmental Assessment:

- proximity to emergency and tertiary health services
- access to general practitioner (GP) services
- physical layout and equipment resources
- staff skill mix required against actual sustainable availability
- agency line management and evidence of effective supervision.

Health Care Plan

Health Care Plans form part of a support plan for a client. They provide information on the detailed management of specific health issues (eg epilepsy or asthma) for clients requiring Level 2 or Level 3 support. Health Care Plans are developed by medical and allied health professionals for use in a range of settings. For clients requiring Level 3 health support, this may form part of the Health Plan developed by the RN.

Health Plan

The Health Plan is developed by an RN. It provides all of the relevant information and steps to be undertaken by a support worker providing support to an individual client. Clients requiring Level 3 health support will have an individualised Health Plan that can only be used for that client. The composition of the Health Plan may address any number of health issues, which includes detailed steps for the delivery of support by the trained support worker. It may also incorporate various Health Care Plans.

Provider Agency

Refers to any government, non-government or private agency that receives funding/grants from the government for the purpose of providing direct care to people with a disability. These agencies are required to provide services consistent with relevant standards and legislation.

Registered Nurse (RN)

The RN providing training in health support must have current registration with the Nurses Board of South Australia (NBSA) and maintain competency in relation to clinical skills. It is desirable that the RN has (or is working towards) a Certificate IV in Training and Assessment or equivalent.

Registered Training Organisation (RTO)

RTO refers to any training organisation registered in accordance with the Australian Recognition Framework to conduct training and/or assessment services. This may include organisations such as TAFE colleges/institutes, private commercial providers, community providers, schools, higher education institutions, enterprises, firms and industry bodies.

Supervision

Supervision is the responsibility of the provider agency, or case manager (broker) and may be both direct and indirect depending on the client's health status and the level of risk assessed. Supervision requires evidence of reporting and recording of all aspects of intervention by both the support worker and provider agency or case manager (broker) subsequent to a referral of the client to the RN/relevant health professional. For RN supervision, see Delegation.

Support Worker

A support worker is a person who provides personal care assistance, activities of daily living assistance, community access support and/or aspects of health support. The support worker is an employee or volunteer contracted to an agency, or a self employed contractor.

Support workers are not licensed to practice nursing, medicine or any other health occupation requiring a license in South Australia and are therefore, not subject to any statutory regulation. Support workers are subject to the same civil and criminal law sanctions, accountability for negligence, and competency measures, as the sector in which they are employed, as well as their employer. Support workers are subject to the vicarious liability of their employer or, if self employed, are required to maintain appropriate indemnity insurance.

3 Levels of Health Support

There are generally three levels of support provided to people with a disability as follows:

Support Level	Client Need	Support Worker Qualifications	Educator Qualifications	Risk Assessment
Level 1	Client has no health support needs.	General support worker competencies.	Educator accredited Registered Training Organisation or qualified health professional.	Low
Level 2	<p>Client has health support needs that require the use of Health Care Plans developed by the client's health professional, eg general practitioner (GP), medical specialist, etc.</p> <p>Level 2 health support is when it is safe for a support worker to follow existing Health Care Plans, without the need for client or support worker assessment by an RN. In general, these are situations when:</p> <ul style="list-style-type: none"> • Medical documentation obtained enables the support needs to be clearly understood. • Medical documentation obtained indicates that the condition is stable and outcomes predictable. • The Support Worker is required to exercise judgment only within their standard trained competency. • The task is straightforward. 	General support worker competencies and competencies dictated by client health care need.	Educator accredited Registered Training Organisation or qualified health professional.	Low-Moderate

Support Level	Client Need	Support Worker Qualifications	Educator Qualifications	Risk Assessment
<p>Level 3</p>	<p>Client has health support needs that require a comprehensive individualised Health Plan (developed by a RN). The support worker and the client require ongoing access to support from a health professional.</p> <p>This level of support indicates that involvement of an RN is required as it is necessary to provide the support worker with additional competencies outside the standard training competencies. The role of the RN is not only to train and competency assess a support worker to enable them to provide health support, but also to provide ongoing updates to the health plan. Generally this level of support is required in situations where a client has:</p> <ul style="list-style-type: none"> • Support needs that are unclear to the provider agency. • Episodic illness or is recovering from hospitalisation. • Health support needs that require comprehensive health planning. • Acquired additional health support needs over and above support levels 1 and 2. • A change in, or multiple support environment(s). • Anniversary or pre-determined date for re-assessment of support needs. <p>Support of this nature will be in accordance with a documented Health Plan specific to the individual's needs. A support worker will require training and assessment of their competency by an RN to perform the health support tasks required.</p> <p>Level 3 health supports to meet individual needs will be underpinned by an RN assessment that will be documented in the Health Plan to be followed by the support worker.</p>	<p>Training and competency-based assessment by an RN.</p>	<p>RN preferably with Certificate IV in Training and Assessment or equivalent.</p>	<p>Moderate-High</p>

4 Steps in the Planning and Delivery of Health Support

4.1 Upon Referral or Review

The **provider agency or delegated case manager (broker)** is required to undertake the following regarding the intake of new clients and/or the setting up of new services for clients. They will:

4.1.1 Liaise with the client and/or their carer/family

- Routinely interview them to determine the client's needs in relation to the service being provided or sought.
- Determine whether they have an understanding of the level of health support that they expect a support worker of the agency to be able to provide without any additional or specialised training.
- Remind them to inform the agency/manager if the client's needs change. If the client has no health support needs, the client/family/carer must be informed of the need to advise the provider agency or case manager (broker) immediately should this situation change. A copy of the agency's policy in relation to health support should be offered.

4.1.2 Clarify whether the client has any health support needs

- If a client has no health support needs, they have no known first aid or health support needs. This is Level 1 health support and no further action is required.
- If a client has additional health support needs, they will have Level 2 or Level 3 health support needs. Further action is required in clarifying their support needs (go to 4.1.3).

4.1.3 Clarify whether the health support needs are Level 2 or Level 3

- Undertake a Health Support Risk Assessment.
- Utilise definitions of Level 2 and Level 3 health support.
- Gather any relevant medical information in order to clarify the nature of the client's health support needs.
- Liaise with the client, family and/or health professionals to obtain current medical information in relation to the client's health support needs. If the client is already involved with a disability or education service provider (who is required to provide health support) there may be a Health Plan/Health Care Plan in place that can be used as the basis for developing support arrangements within the new service.

4.1.4 Clients requiring Level 2 health support

For clients requiring Level 2 health support, undertake the following:

- Clearly document identified health support needs and the rationale underpinning why the decision was made for Level 2 or Level 3 health support.

- Ensure the development of a Health Care Plan.
- Undertake an Environmental Assessment if required.
- Monitor and review the client's health support needs, medical documentation and support worker competency so as to ensure that identified needs remain within the assessed health support level and that support provided is appropriate.
- Ensure that all key stakeholders are in agreement with the support to be provided.

4.1.5 Clients requiring Level 3 health support

For clients requiring Level 3 health support, undertake the following:

- Undertake steps identified in 4.1.4.
- Engage RN for the development of a Health Plan and the training, support and competency-based assessment of support workers.
- Undertake other requirements stipulated in the Roles and Responsibilities section of this guideline.

4.2 Supervision, Monitoring and Review of Level 3 Client Needs

The ongoing and continuous process of supervision, monitoring and review of client health status and support worker competency by the provider agency or case manager (broker) may involve support from a health professional or RN. It is the responsibility of the provider agency and staff providing support to alert the appropriate health professional where changes in the client's health status are observed.

4.3 Indicators for Re-assessment

All health support arrangements require regular monitoring and review. However, there are some events that indicate that a client's health support needs require immediate review, such as:

- An incident occurs in relation to a client's health support.
- Change in support environment.
- Client becomes ill or recovering from hospitalisation.
- Health needs change/new health needs acquired.
- Any party requests re-assessment.

In reviewing a client's health support needs, provider agencies or case managers should work through the same process as for an initial referral.

4.4 Contingency Planning and Interim Arrangements

It is recognised that in some circumstances urgent or immediate support is required without adequate time for planning. Under such circumstances the provider agency or case manager (broker) will need to conduct a Health Support Risk Assessment and identify suitably competent support workers to provide the support.

It is recommended that where the health support risk is unclear that contingency strategies and support is determined in consultation with appropriate health care professionals and/or RNs in the first instance. Examples may include:

- Access to 24 hour professional support via phone-line or call centre.
- A relevant RN or local health professional on call.
- Specific instructions when to call emergency services.
- Options for or with family involvement.
- Options outside the support worker model.

If contingency strategies and supports cannot be negotiated the provider agency may need to consider referral of the client onto an appropriate provider agency.

Such assessment should be informed by the agency's:

- knowledge of the client's health support needs and the environments in which support has been provided previously
- the availability of existing trained/competent staff.

4.5 Communication

Communication between the provider agency or the case manager (broker), the support workers, the clients, families and/or carers, the health professional(s), and the RN, are vital to the effective delivery of health supports to people with a disability.

The ongoing provision of supervision, monitoring and review of client health status and support worker competency is a shared responsibility between the provider agency and the supporting RN.

The RN will ensure that contact details are provided to support worker/client/families and/or carers for ongoing support related to the Health Plan or changing health status. The provider agency or case manager (broker) can also access support through the RN agency.

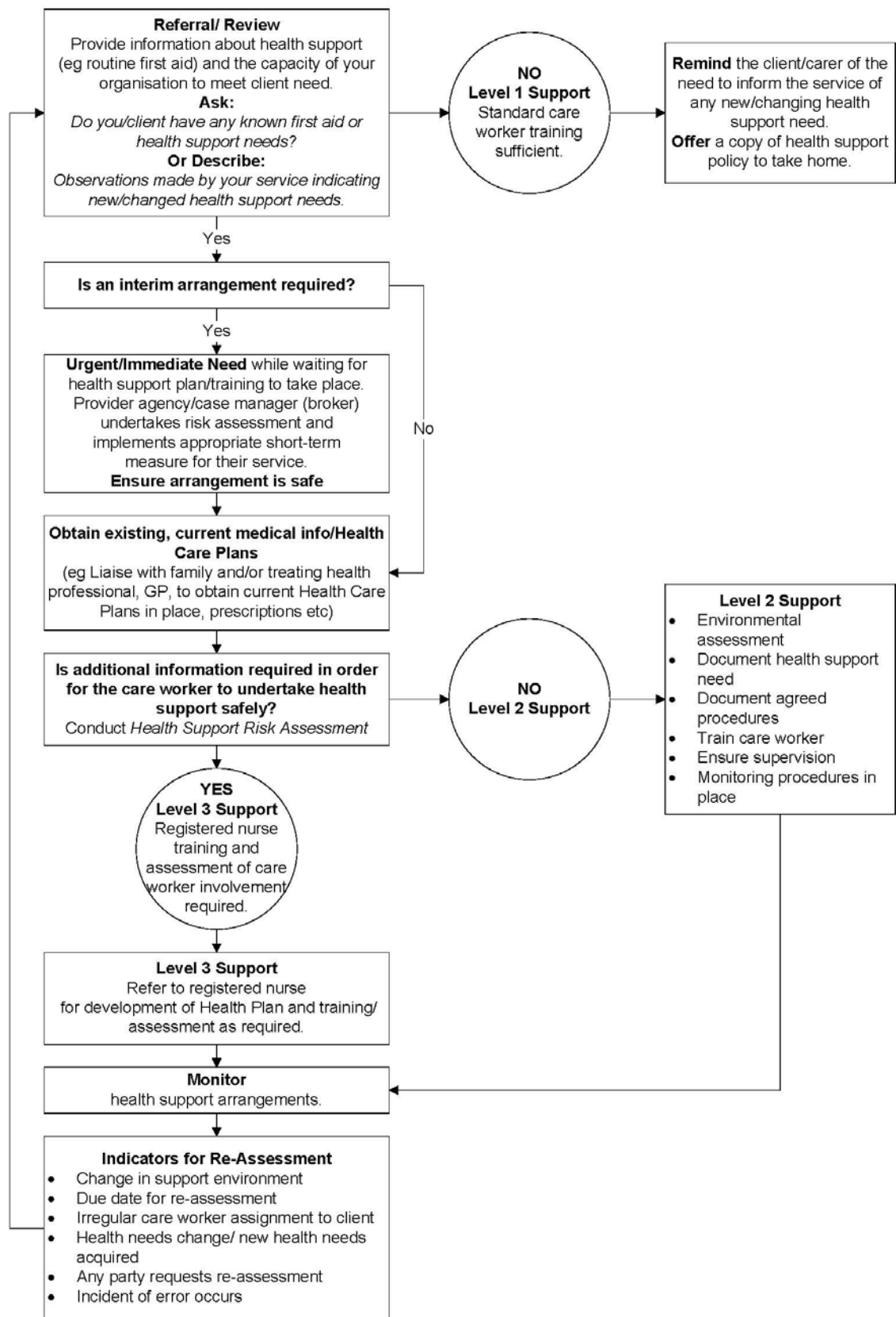
4.6 Lead Agency and Portability of Health Plan (Level 3 Only)

Clients, families and/or carers will have a designated RN assigned to them to take the lead to negotiate and collaborate with all provider agencies on the client's behalf. This is particularly relevant to clients who may require support in more than one setting.

Duplication of services and the involvement of multiple RNs will be minimised to provide least disruption to the client, families and/or carers involved.

The RN agencies will ensure the interface discussions and negotiations occur to meet the needs of individual clients 'behind the scenes' whilst the lead RN communicates with the client, family and/or carer concerned on a regular basis throughout the course of service delivery.

4.7 Steps in the Planning and Delivery of Disability Health Support for Provider Agency Managers and Case Managers (Brokers)



5 Health Support Risk Assessment

Most clients are likely to fit into the Level 1 or Level 2 areas of health support. For example, a person may have epilepsy, asthma or require support with medication. Agencies will be able to support such individuals with the development of a Health Care Plan, developed by their GP/medical specialist and having support workers trained in key health related areas.

A small number of clients will have health needs that determine that they require additional support at Level 3, which includes the development of a Health Plan by an RN. Staff will need additional training, support and supervision from an RN in order to safely meet the client's health support needs.

The chart below will assist in determining if the health support needs of clients are Level 3 or whether the advice of an RN is needed to assist in determining the level.

All the ticks need to be in the 'Yes' box to proceed without RN advice. Any 'No' or 'Unsure' ticks indicate that the support needs are Level 2 or 3 and will need RN advice or referral.

Indicators	Yes	No (Refer to RN)	Unsure (Note why and seek clarification)
Support needs are clear and documented.			
Medical condition is stable and predictable.			
Support required can be undertaken by a support worker with generic training and competencies.			
When undertaking the procedure, support worker is required to exercise judgment only within their generic competency and responsibility.			
The supervisor can provide evidence the support worker is deemed competent and able to undertake the task.			
The task is generic and non-invasive.			
Medical documentation enables the support needs and expected support needs to be clearly understood.			
Documentation to support decision making is relevant/current.			
There is adequate time available to plan the level of support required.			

6 Health Needs Assessment for Clients with Level 3 Needs

The provider agency or case manager (broker) will ensure clients receive, and are encouraged to participate in, a comprehensive health assessment undertaken by an RN as a prerequisite to the delivery of health support to clients identified as requiring Level 3 support.

Upon referral, the RN is required, under the Nurses Board of South Australia (NBSA) standards for delegation, to ensure a 'comprehensive health assessment' is completed. See below aspects pertaining to disability services.

Health Needs Assessments will provide the following:

- Fully documented information relevant to physical, psychological, social, and cultural aspects that influence the health status of the person.
- A multi-disciplinary assessment coordinated by a nominated health case manager (eg community health nurse, GP, primary case manager).
- timeframes appropriate to ensure that health information remains current
- All aspects of health support required by the client. This may involve information obtained from the client's health professionals (eg GP, medical specialist or allied health).

Health Needs Assessments should address the following:

- Key health professionals involved in support.
- Current and long-term implications for health support.
- The client's level of independence/self-determined care.
- Complexity of support and clinical tasks required.
- Indicators of potential health instability and/or degenerating health status.
- Emergency support requirements.
- Personal care requirements where there is a potential for impact on health support.
- Risk management issues relevant to the environment/setting/s in which care will be provided (eg failure of essential equipment).
- Issues that impact upon the support worker's ability to implement the Health Plan.
- Implications for other services/ sectors in which care will be provided.
- Availability of resources to implement care, in the context of health support responsibility assigned to support workers.
- A review period of no longer than 12 months for children (0-18 years) or 24 months for adults, or more frequently as health status changes.

7 Health Plan and Health Care Plans

7.1 Health Care Plans for Level 2 Clients

The provider agency or case manager (broker) will ensure clients have a current Health Care Plan. Health Care Plans are generally developed by the client's GP/Medical Specialist.

Health Care Plans provide information on the detailed management of specific health issues, for example epilepsy or asthma, and are developed by medical and allied health professionals for use in a range of settings. If medication is required as part of the health support plan then a medication authority is also required.

Health Care Plans need to:

- Include all aspects of Level 2 care to be provided by support workers – with a clear indication of specific procedures/tasks.
- Have the health information in a language that is consistent with the scope and limits of care to be performed by the support worker.
- Give clear and concise direction that identifies required actions/steps to be performed.
- List requirements/indications for emergency management and contacting emergency services if appropriate. For example, at what point to call an ambulance if a person is having an epileptic seizure
- Be reviewed if there is a change in client health support need or as a minimum every 12 months in the case of children (0-18 years), and every 2 years for adults.
- If a client has an existing support plan, the agency/broker will conduct an environmental check to ascertain if the plan can be used in the environment in which support will be provided.

If a client requires support with medication only they are considered to have Level 2 support needs but may not require a Health Care Plan. In such situations the agency needs to have a medication procedure in place that offers clear instructions for staff to follow, including emergency procedures.

There are a range of generic proformas available to agencies to assist health professionals develop the Health Support Plan in a format that is suitable for a support worker to implement and for multiple setting use.

7.2 Health Plans for Level 3 Clients

The provider agency or case manager (broker) will ensure clients receiving health support have a current Health Plan documented by an RN as a prerequisite to the delivery of health support to clients identified as requiring Level 3 support. Summary documentation of the Health Plan will be forwarded to the relevant provider agency(s) or case manager(s) (broker) by the relevant RN agency. Where clients have more than one nursing agency involved, a lead nurse is then identified to work with the client.

Health Plans need to:

- Address all support issues across the client's life.
- Include all aspects of Level 3 care to be provided by support workers, with a clear indication of specific procedures/tasks.
- Have links to a health assessment process.
- Be completed in a timely manner related to risk management and holistic problem solving strategies.
- Include name and contact details of the RN agency responsible for developing the plan.
- Identify the provider agency(s) case manager(s) (broker) for which the plan was developed.
- Have the signature of the RN and client/parent/guardian.
- Include only health information that is relevant to the identified specific procedure/tasks performed by the support worker.
- Be relevant to the environment/settings in which action/care is to be performed.
- Have the health information in a language that is consistent with the scope and limits of care to be performed by the support worker.
- Give clear and concise direction that identifies required actions/steps to be performed, which includes strategies for trouble shooting.
- List strategies for support worker access to professional health support i.e. call centre, other community health services.
- List requirements/indications for emergency management and contacting emergency services.
- List requirements for reporting to the RN.
- Have an appropriate review timeframe (maximum of 12 months for children (0-18 years) or 2 years for adults) or as health status changes.

Use of Existing Health Plans

It is important to recognise that health support strategies may differ across settings. Where a provider agency/case manager is using a Health Plan developed by an RN, for use in other settings, it is important that an environmental assessment is carried out to determine how that Health Plan can be applied and followed within the current setting.

8 Case Examples of Clients with Support Levels 2 and 3

8.1 Case Example: Support Level 3 Client

An eleven year old child with a disability living at home with their parents and sibling attends a local primary school and uses centre based respite one weekend per month. They have Spina Bifida, a history of recurrent chest infections secondary to gastro-oesophageal reflux, asthma, nutrition via gastrostomy, hydrocephalus that is managed by a ventricular-peritoneal (VP) shunt, have poor weight gain, and epilepsy.

Health Assessment

The RN receives a referral from the respite agency notifying them of a new client with probable Level 3 health support needs. The RN liaises with the family and reviews the child's existing plans, evaluating the applicability of the plans to the respite setting. This involves a review of the client's existing Health Plan, as well as including any Level 1 and 2 Health Care Plans (Department of Education and Children's Services (DECS)) developed by their paediatrician, GP or allied health professional.

The RN undertakes both a health support and environmental assessment to determine the support needs and risk management required during respite. Liaison with allied health specialists/health professionals is undertaken as necessary and as an outcome of the assessment, whereby the client requires Level 3 support, the Health Plan is revised and expanded – specific to the client needs within the respite service environment.

The RN notifies the outcome of the assessment to the referring agency, including:

- Support needs and appropriateness of current support provided by the support worker, and any training and competency assessments required.
- Environmental considerations.
- Additional support needs such as the requirement of the client to use a Webster Pack for medication management.
- Advice that an oral eating and drinking plan needs to be developed by the child's speech pathologist.

Education and Training

The RN receives a request from the respite agency to conduct competency-based training and assessment of three support worker staff who work weekends at a respite service. The support workers all have their required pre-employment requisites including the relevant current First Aid Certificate/Competencies, and training outlined in 10.1.

The RN conducts education and training regarding the following:

- Identifying signs of aspiration / blocked shunt and reporting.
- Nutrition via gastrostomy.

The training is completed by the RN utilising competency-based assessments for the following health support tasks:

- Nutrition via gastrostomy.
- Assisted medication administration via gastrostomy.

All training is related to the RN Health Plan and the client's individual needs. The RN advises the provider agency and its support workers of the outcome of the competency-based assessment. Based on the assessment, only staff deemed competent by the RN are able to support the client in relation to the health support tasks that are individual to the client eg:

- Nutrition via gastrostomy.
- Assisted medication administration via gastrostomy.

Written copies of all health related procedures are provided to the support workers and they are instructed to follow procedures without deviation. Contingency planning, including trouble shooting strategies are documented in the client's Health Plan, and the support worker is orientated to this plan.

Supervision

The respite service coordinates their trained staff to be on shift for the planned respite weekends for this client. It is expected that all care will be provided in accordance with training received and as per the Health Plan document. The respite service will have an identified 'manager' who will be available to support workers should they need support on matters of policy and procedure. Additionally, the support worker will also have knowledge of appropriate community resources to assist with health support trouble shooting.

The respite agency will have an ongoing relationship with the client and their parents/guardians to ensure effective and timely communication regarding support requirements. The client/family/guardians will be aware of the importance of contacting the respite service should the support needs of their child change, or if they have any concerns or comments about the health support provided.

In the event that the respite service becomes aware of a change in support needs, this should be notified to the RN via a request to review the Health Plan earlier than the planned review date (eg suspected increased episodes of reflux).

On receipt of this request, the RN would undertake a health support assessment that may include seeking advice from the treating dietician. The RN amends the Health Plan to include recommended actions for this child (eg continuous nutrition via pump) and provides a summary of the outcome of assessment including the additional training needs of staff.

The respite service would subsequently be advised of the amended Health Plan and the need to re-orientate staff to the changes and engage the registered nurse for any additional training needs of staff.

In the event that a support worker makes a procedural or health support related error this must be reported to the respite service 'manager'. If it is deemed that further training of the support worker is required, a training request should then be forwarded to the RN.

Accountability

The RN remains accountable for the assessment, consultation and the development of the Health Plan. The RN retains accountability for all training and individual competency assessments provided to support workers. The RN also remains accountable for notifying the referring agency of training and assessment outcomes and is responsible for ensuring effective and timely communication.

In this case scenario, the respite service remains accountable for the health support service provided. The service is accountable for the staff employed and the outcomes of all support provided. The respite service is also responsible for ensuring that this client has a current Health Plan and that all changes to support requirements are referred to an appropriate health professional.

Delegation

An RN is accountable for their own decisions and actions in relation to delegation of health care support to a support worker. Under these guidelines and policy, the RN is responsible and accountable for undertaking a risk assessment in the planning and implementation of care. The RN is accountable for their role in the delegation process – refer to NBSA Delegation by a Registered Nurse or Midwife to an unlicensed Health Care Worker – Standards 2005.

Note

The above case scenario assumes that the support level was categorised as Level 3 and that health support could be managed in the community by a trained support worker with appropriate systems in place. There currently are no guidelines for clients deemed to have health support needs assessed to be greater than support Level 3. (Supporting these clients has been assessed by the RN as beyond the scope of a support worker.)

There should be processes in place by the service provider/case manager to address the needs of clients after being advised by the health professional that:

- The client's health support needs are not stable and consistent management strategies cannot be predicted.
- The training requirements sit outside of the ability of a support worker's practice (eg too complex and involve some assessment component).
- The training requirements sit outside of the RN's scope of practice.
- The environment in which health support is to be provided is high risk (eg remote location).

8.2 Case Example: Support Level 2 Client

A client is referred by Disability Services to a respite agency for centre based respite for one weekend per month. The client has an intellectual disability, is fully ambulant, independent, and has epilepsy. The client takes anticonvulsant medication for their epilepsy.

When a service provider determines a client's health support requirements to be Level 2 there will be minimal, if any involvement by an RN using these guidelines. An RN may be consulted and requested to undertake a health support assessment/advice when the provider agency is unsure about such a classification.

Provider agencies should be aware that potential incorrect classification of support levels may occur if a thorough health support risk assessment is not conducted.

Level 2 or Level 3?

In this instance, the initial assessment of the client appears to indicate that they can be supported by support workers who possess a current First Aid Certificate with the relevant competencies, have medication training, and disability awareness. It may be decided by the referred agency that the client requires Level 2 health care support, therefore does not require a Health Plan to be developed by the RN but rather requires a health care plan/s developed by another health professional (eg a GP).

The client is accepted into the respite service; however, the agency later discovers that the client now has complex multiple seizures that require a unique management strategy. Reliant only on their first aid knowledge, the support worker providing support is unaware of the need to administer a specific medication to control the client's seizure.

This change in health status requires an RN assessment. The RN will work with the service provider to ensure the client's newly identified health care needs are met. This in turn may result in the client being assessed as having Level 3 support requirements.

When in doubt, or if there is an observed change in the health status, agencies must seek advice to ensure the client can be safely supported. There are several instances when there is more likely to be a change in health status, for example, a child may have a growth spurt that can effect their epilepsy management, even if it is short-term, or the client may have a degenerative condition.

9 Role and Responsibilities

There are shared professional accountabilities by the various stakeholders associated with the Direct Health Support of People with Disability Policy. The roles and responsibilities of the respective stakeholders are outlined below.

9.1 Disability Services Provider Panel

Disability services that are funded by the Department for Communities and Social Inclusion (DCSI), and that employ their own registered nurses, will be required to provide health support in accordance with this policy framework and the relevant guidelines.

Agencies funding their own registered nurses, will be expected to continue to do so, and will need to ensure that their Service Activity Agreements reflect the provision of this service. Any changes to existing arrangements need to be negotiated with DCSI, under the Disability Services Provider Panel arrangements.

9.2 Provider Agency

The provider agency:

- Has vicarious liability and concurrent accountability with the RN who trains, assesses competency and/or delegates healthcare task(s) to a support worker. Where the RN is employed in the same organisation, the employer also has vicarious liability for the RN.
- Is accountable for ensuring that where any health support is to be provided there exists an appropriately resourced, quality environment of service delivery.
- Is responsible for ensuring appropriate policies and protocols, staffing patterns, delivery systems, clarification of roles, accountability and responsibilities and delegation and supervision protocols are in place.
- Is accountable for ensuring appropriate Health Support Plans for Level 2 clients are developed and support workers have the skills to implement the plans.
- Is accountable for ensuring that when Level 3 Health Support is required, communication, record keeping of Health Plan development and review, initial (and anniversary) training and assessment occurs between the agency and designated RN.
- Is accountable for the decisions, actions and performance of a support worker in the event they have breached their responsibility.

Though the RN has accountability for assessing the competencies required in relation to the healthcare task(s) assigned to the support worker, the provider agency has concurrent and corresponding accountability for the overall appropriate supervision of the support worker, including any and all of their responsibilities.

9.3 Provider Agency or Case Manager (Broker)

The case manager (broker) has a duty of care to ensure that the provider agency has the capacity to meet the client's health support needs. If the case manager (broker) takes on a care provider role, then they must adhere to the provider agency requirements.

The case manager (broker) has particular responsibility for ensuring they engage services from agencies listed on the Disability Services Provider Panel only. They are responsible for ensuring that the agencies they engage comply with the Direct Health Support of People with Disability Policy and associated Guideline. The case manager (broker) must provide pertinent information to the agencies they engage to meet the needs of each particular client, including a preliminary risk assessment.

The provider agency has a duty of care to the client whilst in receipt of support from the agency. The agency or manager must ensure that the support workers they employ understand the scope of their role and are appropriately skilled to provide the level of support required by the client.

The provider agencies and case managers (brokers) need to establish protocol agreements with a registered nurse agency(s). This aims to ensure suitable and agreed processes for the referral of clients and support workers.

The agency/manager also has a duty of care to ensure that the health professionals and/or RNs providing health support advice, training and competency-based assessment to the agency's clients and support workers are qualified to do so.

It is recommended that nursing agencies do not engage in delegation activities with provider agencies unless the following responsibilities have been undertaken. The provider agency is responsible for undertaking to:

- Communicate in a timely fashion (to be identified in inter-agency protocols).
- Ensure that appropriate sharing of information is undertaken with all agencies/service providers involved in an individual client's management/care in accordance with the National Privacy Principles contained within the Privacy Act 1988.
- Ensure that a documented incident reporting and documentation process is in place and that all staff are trained in the process.
- Monitor and review incidents, conduct staff performance reviews and address staff training needs on a regular basis.
- Ensure staff are trained and competent to provide health support.
- Ensure support workers have their required pre-employment requisites including the relevant current First Aid Certificate/Competencies, as well as training outlined in 10.1.
- Collaborate and support the health assessment, training and competency-based assessment processes.
- Address/facilitate referral to a health professional and/or RN when the need is identified.
- Ensure open communication between client, carer workers and RN.

9.3.1 With regard to the client

- Ensure and evidence that a health support risk assessment is conducted for each client referred and that appropriate documentation is completed for each client.
- Ensure and evidence that a referral is made to an RN based on the determination of Level 3 support in the course of a risk assessment.
- Ensure that all clients receiving Level 3 health support have a current Health Plan completed by the RN as a pre-requisite to the delivery of health support to clients identified as requiring Level 3 support.

9.3.2 With regard to the support worker

- Ensure that the scope and responsibilities of the support worker's role are clearly defined and understood by the support worker.

- Ensure that the support worker assigned/rostered to the client is competent to implement the Health Plan.
- Ensure that the support worker does not undertake complex health support for clients that they have not been assessed by an RN as being competent to work with.
- Ensure that a competency-based assessment for training and review is documented for each support worker and undertaken in a timely fashion.

9.3.3 With regard to the RN agency(ies)

Ensure a protocol agreement is in place prescribing the respective processes for the referral of clients and support workers and other operational aspects of the relationship between their agency and the relevant RN agency.

9.3.4 With regard to the RN

- Ensure that the RN advises the provider agency or case manager (broker) of the outcomes of the competency-based assessment for individual support workers and the next review date.
- Ensure that all health assessments are undertaken by an RN who is familiar with the Direct Health Support of People with Disability Policy and Guideline, with the appropriate level of competency and expertise in the area of care.

9.3.5 With regard to the management of the Health Plan

- Communicate with the client and support worker to identify, negotiate and plan appropriate health support relevant to the client's daily environments, lifestyle choices, etc.
- Incorporate the Health Plan into the client's file and ensure the current version is available to the support worker.
- Ensure that any superseded documents are withdrawn, archived or disposed of in accordance with agency policy and legislation.
- Communicate any change in health support needs that will impact on the support worker's ability to follow the Health Plan, to a health professional and/or RN.
- Ensure that Health Support Risk Assessments are reviewed at a minimum of every 12 months in the case of children (0-18 years) and every 2 years for adults.

9.4 Registered Nurse Agencies

RN agencies may also be 'approved providers' for access by other private agencies in other sectors that may elect to purchase health support training and competency-based assessments on a fee-for-service basis for their support workers. The setting of fees in this context will be at the discretion of these agencies.

9.5 Registered Nurse

The RN has a duty of care to the client receiving health support to ensure the assigned support worker(s) are competent to implement appropriate components of the client's Health Plan. They also have a duty of care with respect to the advice and support provided to the client and the support worker in regard to the delivery of health support and the ongoing assessment of the client's health needs.

The RN remains responsible and accountable for the competency-based training and assessment of support workers providing the health support, plus ongoing health advice. RNs involved in the competency-based training and assessment of support workers are required to have current NBSA registration.

Roles and responsibilities of the RNs are detailed below at the various stages of training and competency-based assessment of support workers.

9.5.1 Upon referral

- Accept a referral, consult with the client/carer, identified medical and allied health professionals to gather the information relevant to the client and undertake a health needs assessment.
- Determine whether particular tasks fall within the acceptable scope of practice of a support worker. RNs will take into account whether tasks/procedure:
 - is considered as appropriate, safe and routine for the individual client for whom it is being performed
 - meets the relevant professional practice standards
 - can be performed against an appropriate risk management assessment and with predictable outcomes
 - does not require reactive health assessment by the RN as part of service delivery
 - is assessed as being safe to perform within the environment/setting.
- Provide feedback on skill mix required to support client.
- Provide feedback to the agency on the outcome of the Health Support Assessment.
- Develop and supply a Health Plan for each client assessed as requiring Level 3 support to the agency.
- Develop appropriate training, assess competency of individual support workers (for a client identified as requiring Level 3 support).
- Provide feedback on outcomes of the support worker assessment to the agency.
- The RN will provide training in accordance with the following guidelines:
 - the aim of training will be to develop the support worker's understanding and capacity to undertake the specific task(s)

- the training will be followed by the RNs observation and supervision of the support worker undertaking the task(s) within the context of the client's Health Plan
- clients may or may not be involved in the observation and supervision component depending on individual circumstances
- when necessary, a support worker may be assessed in several environments or work sites specific to the client and the health support tasks required.

9.5.2 Upon completion of training

- Endorse the competency of a support worker where they demonstrate an understanding and appropriate level of skill, knowledge, ability, attitude and value base that enables them to perform tasks within the scope of their role.
- Advise (in writing) the respective provider agency or case manager/broker of the outcomes of competency-based assessment for individual support workers and the next review date.
- Provide ongoing support and advice to the support worker and the client on health related support.
- Be responsible for re-assessment of competency of support workers, once engaged by the provider agency or case manager (broker).
- Exercise discretion when determining the review date of competencies for experienced support workers undertaking the same tasks with the same client over significant periods of time.
- Document the competencies for a support worker to enable that support worker to work across and within different agencies.
- Participate when requested in the process of monitoring and reviewing incidents where there may be implications for the training and competencies of the support workers.

The provider agency accepts accountability for fully documenting training, performance evaluation and competency-based assessments relevant to the provision of identified tasks/procedure or actions undertaken by the support worker. The provider agency is then supported by the RN as necessary.

9.6 Client/Parent/Unpaid Carer

Parents and unpaid carers primarily responsible for the health and wellbeing of clients, and clients are responsible for the following:

- Providing relevant health care information to the provider agency or case manager (broker).
- Liaising with RN or allied health professionals to develop Health Plans or Health Care Plans.
- Assisting clients (children or adults) to self-manage, as much as is safe and practical, their health and personal support needs.

9.7 Support Worker

The support worker has a duty of care to follow the client's Health Plan and/or Health Care Plan in a timely and disciplined manner and gaining advice and support from their manager if a query or issue arises in the first instance.

The following responsibilities rest with the support worker under the supervision and direction of a manager:

- Work only within the scope of documented support worker responsibilities and competencies.
- Follow the Health Plan effectively and without deviation in accordance with the training.
- Follow the Health Care Plan effectively and without deviation in accordance with the training.
- Refer any queries with respect to their own competency or performance to their manager in the first instance and/or the RN.
- Alert the manager to any issues relevant to the delivery of health support or in relation to the health needs of an individual client that impact on their ability to follow the Health Plan or Health Care Plan.
- Ensure they only support Level 3 clients that an RN has deemed them competent to support, following a competency-based assessment.
- Report any incidents promptly and in accordance with the provider agency or manager (broker) policies and procedures.
- Ensure that they have a working knowledge of their employer agency's policy and procedures with regard to client management.
- Ensure that they undertake to review and update competencies as directed by the provider agency.
- Support provider agencies and case managers (brokers) through liaison with the RN agency.
- Engage in the development of contingency strategies regarding health support when necessary.

10 Support Worker Training

10.1 Support Worker Training for Health Support Levels

Training Requirements	Level 1	Level 2	Level 3
Current accredited First Aid that includes: <ul style="list-style-type: none"> • Cardio pulmonary resuscitation • Routine asthma management (including puffers, spacers, nebulisers) • Management of choking • Basic seizure management (including intra-nasal midazolam). 	✓	✓	✓

Training Requirements	Level 1	Level 2	Level 3
If support workers are assisting/supporting clients prescribed intra-nasal midazolam for emergency seizure management then they must have successfully undertaken first aid intra-nasal midazolam training.	Not applicable as Level 2 requirement	✓	✓
If not already completed support workers must begin to undertake the following Certificate III level subjects or equivalent within four months of employment and complete within two years of employment. <ul style="list-style-type: none"> • CHCCS411C: Work effectively in the community sector • CHCDIS301C: Work effectively with people with disability and one of the following units: <ul style="list-style-type: none"> • HLTWHS300A: Contribute to WHS processes or • CHCWHS312A: Follow safety procedures for direct care work 	Desirable	✓	✓
Certificate III in Disability Work or equivalent such as Certificate III in Aged Care Work or begin to undertake the training within 4 months of employment and to be completed within 2 years.	Desirable	Desirable	✓
If support workers are assisting/supporting clients with medication they must have successfully undertaken one of the following subjects or equivalent: <ul style="list-style-type: none"> • CHCCS305C: Assist clients with medication (note pre-requisite HLTAP301B). • HLTAP301B: Recognise healthy body systems in a health care context. • Demonstrated vocational competencies to this level. 	Not applicable as Level 2 support requirement	✓	✓

10.2 Exemptions from Training

There may be instances whereby 'special circumstances' warrant that staff undertaking health support have not successfully completed the training identified in 10.1. There is no discretion for exemption for the first aid requirements.

Examples of instances where exemptions may be warranted include:

- When cultural factors impact on the appropriateness of the competencies (eg Aboriginal or Torres Strait islander clients).
- When the support worker is providing limited client support/hours of work across the sector, where the prescribed competencies are not required.
- When the support worker is supporting only one client and full orientation to the client's need has occurred and is regularly reviewed by the provider agency.

Decisions regarding exemptions rest with the respective agency executive/manager/broker responsible for providing care in the particular situation. Where an exemption is made, the executives/managers/brokers need to ensure there is regular monitoring and review of the situation. Additionally, completion of a Health Support Risk Assessment should be undertaken and the development of strategies to provide training in appropriate timeframes should occur in instances when access to training is problematic.

10.3 Additional Support Worker Competencies for Complex (Level 3) Health Support

The RN support worker training and individual competency assessment is linked to the client's Health Plan. The role of the RN is not only to train and assess a support worker to enable him/her to provide health support but also to provide ongoing support and health advice to the client and the support worker.

The ongoing and continuous process of supervision, monitoring and review of client health status and support worker competency by the provider agency or case manager (broker) must be evidenced to occur with support from a health professional or RN.

10.4 Pre-Planning Timeframes to Support Level 3 Clients

Lead-in time is required to train and/or assess competency of support workers prior to the support worker being assigned to support clients with Level 3 health support needs. The timeframes will vary according to the complexity of each client's needs and the environments in which the support is to be provided. Agencies will need to liaise with RNs to confirm the timeframe to be allocated to support workers for training and competency-based assessment in the lead up to the provision of support. Additionally, the RN will not be pressured to rush training to meet the demands of service delivery.

10.5 Maintenance and Re-Assessment of Support Worker Competency (All Support Levels)

All provider agencies or case managers (brokers) providing supports to clients with a disability are required to maintain records of support worker training and competency-based assessment. It is the care provider agency's or the case manager's (broker's) responsibility to ensure support worker competencies are maintained to enable them to support individual's needs safely and competently.

Training on generic competencies is recommended for support workers as new modules or concepts emerge. Training should be linked to agency incident data or contemporary trends.

Re-assessment of competencies is indicated when:

- An incident or error occurs linked to support worker competency.
- A request is made by the support worker.
- A request is made by the client and/or family.
- A request is made by the line manager if performance issues relative to the task are in question.

- There is a change in the client’s health status necessitating change.
- There is a change in the client’s service venue, accommodation or supportive environment that may impact on the support worker’s ability to perform the health support task(s).
- There is limited opportunity for the support worker to practice and consolidate their health support skills (eg casual or irregular episodic assignment to the client concerned).
- It has been deemed necessary by the RN.

10.6 Maintenance and Re-Assessment of Support Worker Competency (Level 3 Only)

For clients with Level 3 health support needs, the designated RN is responsible for re-assessment of competency of support workers. The RN may exercise discretion when determining the review date of competencies for experienced support workers undertaking the same tasks with the same client over significant periods of time.

Examples of review dates include:

- 6-8 months for novice support workers.
- 6-12 months for complex health support tasks or emergency procedures not routinely practiced.
- 1-2 years for experienced support workers undertaking the same tasks with the same client over significant periods of time.

11 Guideline Approval

Content Author:	Policy Custodian:	Delegated Authority:
Date: June 2014	Date: June 2014	Date: June 2014
Position: Principal Policy Officer Disability Strategy Disability SA	Position: Director Disability Strategy Disability SA	Position: Executive Director Disability SA