

THERAPY ACT SERVICE DELIVERY MODELS

KEY PRINCIPLES UNDERPINNING SERVICE DELIVERY

1. Client and Family Focused Services

Therapy ACT:-

- Considers each person holistically in the context of their lives.
- Works in partnership with families/ caregivers, as well as other significant people in the person's life.
- Supports clients and their families/ caregivers to identify their concerns and priorities, to recognise their strengths, and to make informed decisions.
- Is flexible and responsive to the client's and family/ caregiver's concerns and priorities.
- Is responsive to changes in life stages, family changes, and transitions in education and employment.

2. Valuing and Respecting the rights and needs of clients

Therapy ACT:-

- Aims to support individuals to achieve their maximum potential as members of the community.
- Values diversity and respects the cultures of all people accessing the service.
- Provides services on a needs basis. Clients with higher priority needs are given priority.
- Provides additional support to access services to vulnerable people.
- Practices in accordance with ethical values, which support the principles of empowerment, self-determination, autonomy and dignity.

3. Working in Partnership

Therapy ACT:-

- Works collaboratively with other agencies to enhance outcomes for clients.
- Demonstrates mutual respect for the capacity and capabilities of other agencies and recognises their limitations.
- Takes responsibility for ensuring the maintenance of positive relationships.
- Demonstrates trust, openness and transparency of communication and process.

4. Continuous Improvement

Therapy ACT:-

- Provides services which are based on evidence and reflect current best practice.
- Is committed to continuous improvement through evaluating current practice/ services and listening to client feedback.
- Staff are committed to maintaining their professional knowledge and are supported to do so.

5. Efficient and Effective Service Delivery

Therapy ACT:-

- Acknowledges that there are resource constraints which limit the level of service that can be provided.
- Strives to meet the demand for services within the budget limitations by maximising service effectiveness.
- Continuously seeks to make administrative and business processes more efficient.
- Meets all of its accountability and compliance obligations.

THERAPY ACT SERVICE TYPES

Therapy ACT provides the following services:-

- Direct Client Services (see below)
- Consultation services to other professionals and agencies in relation to individual clients.
- Professional Development to other professionals including teachers, learning assistants and disability support workers
- Community Education on issues that effect the quality of life of children with developmental delays and people with developmental disabilities.

Direct Client Service Delivery

Referral/ Re-Referral

Clients may be referred to the service in the following ways:

- Intake: Clients may refer themselves or be referred by another individual or agency with parental/ guardian consent.
- Drop-In Clinics: Children may attend a consultation at physiotherapy and/ or speech pathology Drop-In Clinics accompanied by a parent, guardian or caregiver.
- Equipment Clinic. People may attend to review current equipment needs.

Assessment Phase

Clients are streamed into one of the following assessment options:

- Single Discipline – One of the following disciplines assesses the client: physiotherapy, occupational therapy, speech pathology, psychology or social work.
- Multidisciplinary Assessment: when two or more disciplines assess together.

Intervention Plan

A plan is developed with the client/ parents/ caregivers and therapists. For clients who are being provided with services from more than one discipline a single Intervention Plan will be developed. The Intervention Plan is used to guide services and enable priorities and concerns to be discussed, with goals and actions identified.

Active Intervention Phase

Based on the assessment of clinical need and vulnerability clients are allocated to one of four Streams:-

- A. Ongoing services for those with high and complex needs
- B. Episodic: Non-limited
- C. Episodic: Usually limited episodes within a set time period
- D. Single issue intervention

Clients may be in different streams for different professional services.

Clinical Pathways have been developed which describe the service types and levels that are offered for each stream and in each profession.

Clinical Pathways may incorporate a number of the following elements:-

- Individual intervention
- Group programs
- Partnerships with carers, teachers and significant others to develop and implement programs in the person's natural environment allowing for generalisation of skills and practice opportunities.
- Assessment, loan and recommendation of equipment and environmental modifications.
- Provision of information documents such as reports.
- Education and support for caregivers or other relevant stakeholders involved with the client.
- Liaison and collaboration with relevant government and non-government agencies to provide coordinated approach to client care.

- Referral to other relevant service providers
- Home programs
- Monitoring

Where the usual Clinical Pathway does not suit the needs of a particular client of family situation the therapist can seek a review from a Senior Professional who will advise of service options.

Services are provided in various settings, including:

- Therapy ACT sites
- Specialised clinics
- Client homes/ residences
- Childcare settings
- Educational settings
- Workplaces
- Other community settings

Review and Case Closure

The primary therapist or Case Coordinator for multi disciplinary clients, reviews progress against the Intervention Plans at milestone times:-

- When the current Intervention Plan is completed
- When there is a significant change in the client or families need
- At least annually.

A new Intervention Plan is negotiated if necessary or the case is closed and the client advised that they may re refer if further needs arise.

Consultation, Development and Education

In addition to client specific service delivery, Therapy ACT provides:

- Education to government and non government agencies, community organisations on a range of topics relevant to issues faced by clients.
- Acting as a resource to these agencies and the community.
- Working in partnerships with training bodies and professional organisations to contribute to both undergraduate programs and the development of health professions.
- Health promotion activities to raise the awareness of the community.

THERAPY ACT'S TEAMS

Early Childhood

Early Childhood Teams provide assessment and intervention services to children from birth until the end of their Kindergarten year. Evidence supports the theory that the early years are critical for brain development and that quality early intervention programs can significantly improve the outcomes for young children as they grow, especially for those who are at risk of developmental delays. Early intervention programs from birth onwards are essential if children with disabilities and developmental delays are to achieve their full potential. Intervention is direct with families, eg. individual intervention but may also include other models of service such as groups or services provided in other settings, eg. the education setting. There is flexibility around the nature of intervention, including how the active and indirect intervention phases are structured for the client.

School Aged

School Aged Teams work with children and young people from 5 - 18 years. This age group has many transition phases as children develop their social and functional independence. The school aged teams work to foster this independence and uses a variety of service delivery options, including consultation to significant people/ environments for the client. Intervention options may be more collaborative and consultative than the Early Childhood Team models. Acknowledging the importance of the Education environment for this age group becomes increasingly important, as children and young people in this age group spend significant amounts of time in this setting. A primary focus therefore, often involves developing partnerships with parents and the education setting. This includes the sharing and exchanging of knowledge and skills and aiming to embed intervention goals into the client's everyday routines and school curriculum.

Adult

The Adult Team model has the underpinning principle of enabling people with disabilities to achieve their maximum potential as members of the community. The team provides intervention that is collaborative and consultative in nature, taking into account the client, their family, caregivers and other agencies that work with them. Much of the intervention involves partnerships with other agencies, such as Disability ACT, Community Services and Housing ACT. Training of caregivers and other agencies and involvement in specialist clinics (eg Positive Behaviour Support and Communication), comprises a significant amount of this collaborative practice. Intervention may take place in a variety of settings, including the client's home, workplace, educational setting, day placement or in the clinic.

Autism Service

The team provides standardised diagnostic assessments for people aged 2-65 years who are suspected of having Autism Spectrum Disorders. They offer a holistic multidisciplinary assessment that looks at all aspects of the person's development. The team also provides a family support service for families where there is a child who has been diagnosed with an autism spectrum disorder within the last 18 months. Intervention Services are offered to children aged under 8 years utilising a multidisciplinary service approach.

Equipment Service

The team undertakes assessment, trial, loan and prescription of complex (level 2 & 3) equipment for clients. Equipment needs that are associated with home modification and/or transport issues are also managed by the Equipment Services team. The team also provides a consultancy service for therapists in other teams in relation to equipment, transport and home modifications. An Occupational Therapist position located in the team undertakes housing and home modification assessments for Housing ACT.

The Equipment Services Team incorporates the Children and Young Peoples Equipment Loan Service (CAYPELS).

SERVICE DEVELOPMENT

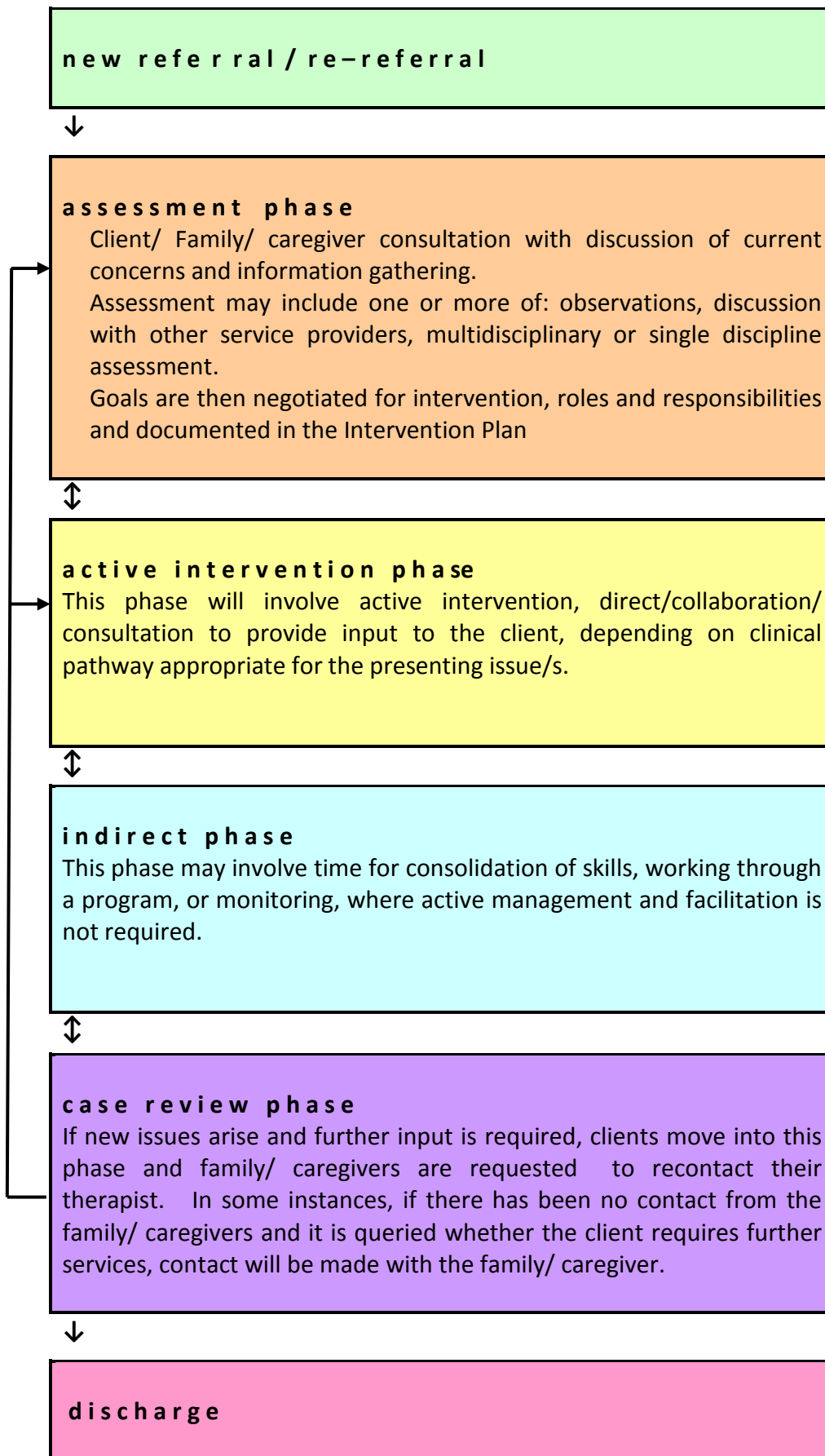
Therapy ACT contributes towards Continuous Quality Improvement by:

- Identifying and addressing professional development needs of staff to maintain current knowledge base and skill level.
- Incorporating quality improvement principles and activities in daily work.
- Utilising ongoing service evaluation and planning to identify service gaps and address needs in the population of people who are aged 0-65 who have delays in their development or developmental disabilities.

| <u>Date</u> | <u>Version</u> | <u>Comments</u> | <u>Officer</u> |
|--------------------|-----------------------|------------------------|-----------------------|
| 15 Feb 2010 | | Reviewed | R. Hayes |

Model of Client Specific Service Delivery

Appendix 1



Early Childhood clients with complex issues may have an episode of care which lasts for a long period and involves active intervention phases with only short indirect phases between.

Clients are often given a "review reminder" document when they enter the indirect phase and asked to contact for a review if they require further input. Once they contact they move into the case review phase to determine further needs and if further input is required.

Once a client is discharged, they require a new referral to re-enter the service, which has associated waiting times. Waiting times are influenced by prioritisation of the presenting issues.