



Fact Sheet

Making a Positive Difference

Flexible Care Packages

This program assists families to continue to care for a family member in the family home by providing flexible support that is tailored to meet individual family needs.

Short and long term supports include:

- Assisting families to continue to care for their family member using case management and brokerage model of support
- Linking families to services
- Providing advocacy and advice to families
- Advising and assisting families to access funding

Fees and Charges

There are no fees or charges for this service.

Eligibility

To access Flexible Support Options, the person with a disability needs to meet the following criteria:

- be aged from 5 to 64 years
- live in the family home
- be eligible under the Disability Act 2006

Ineligibility

You will be ineligible if the primary diagnosis of the person with a disability is:

- an attention deficit or associated disorder
- a chronic disease
- a psychiatric disability without an additional disability as stated in the Disability Act 2006.

Priority of Access

Those eligible for this service will then be prioritised for service according to need and situation as described in the Disability Act 2006. *Please see over page.*

Making a referral

Anyone can make a referral to this service as long as the family has given consent.

Referrals are lodged through the Connecting Care web site at www.connectingcare.com used by the community services throughout Victoria or by contacting Pinarc directly.

For more information

Phone: (03) 5329 1300 email: admin@pinarc.org.au

www.pinarc.org.au

The Priority Indicators

To assist all disability service providers in making decisions about who gets access to disability services, priority indicators have been developed.

These indicators must be used by all disability service providers in determining who has priority for access to services.

In all circumstances, resource allocation decisions will balance the needs of the person with a disability and their family or carer in relation to the needs of others seeking support and in particular, those with similar needs or circumstances.

Given their finite nature, the allocation of resources must be efficient, equitable and maximise options for people with a disability to create independence and promote their participation in the community.

In all circumstances, disability services are provided:

- To address the identified needs of a person that are directly related to their disability
- In response to needs identified through an individualised planning process
- To enable a person with a disability to participate in their community
- When the identified support required is beyond what is available and accessible in the wider community. (For example, where the disability service system has been identified as the most appropriate response.)

When determining the priority of access to disability services, a disability service provider must consider the following priority indicators:

- The need to strengthen or support the role of the family, carer or person's support network
- The need to provide support to ensure the safety and well being of the person with a disability, their family or carer or the wider community
- The existence of multiple disadvantage within the person with a disability's personal, social or community context
- The immediate and potential benefit of the support to reduce the likelihood for more intensive assistance in the future
- The impact on the individual's wellbeing, living situation and quality of life should the disability service be unavailable
- The presence and availability of informal and generic supports to complement the disability service (For example, a small amount of support such as respite may enable informal networks to continue their caring role.)
- The provision of support is a mandatory requirement (eg: as part of a justice plan or condition of an order)

Source: Disability Services Access Policy July 2007

Program specific Priority Indicators

- Ageing carers;
- Carers with fragile health and high complex support needs;
- People who require brief and timely intervention to prevent or minimise the need for long term high cost support services;
- People who have high or complex support needs (ie. a range of interacting physical, medical, social and emotional needs and require significant assistance to plan and coordinate a package of services to meet their need/s);
- People who experience significant difficulties in accessing community services and require flexible service responses in terms of the type, duration or timing of assistance that is not available within the mainstream service;
- People who demonstrate significant levels of stress and where the family is at risk of breaking down;
- People whose support needs change rapidly and are at risk of moving to supported residential services;
- Any child or young person living at home who is at high risk of family crisis resulting in non-acute hospitalisation or alternative care arrangement due to the difficulty experienced by the family in continuing to meet the high level of ongoing medical care need at home; and/or
- Any child or young person with high medical care needs at risk of remaining in hospital beyond the need for acute care due to the difficulty the family would experience in meeting the support needs in the family home.

For more information

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