	Policy Name	Priority of Access
	Executive Sponsor	GM Quality & Governance
	Approval date:	August 2012
	Effective date:	September 2012
	Authorised by:	DMT
	Review date:	August 2013

1. Policy Purpose

This policy outlines how Dianella prioritises service delivery for its clients.

There are three prioritisation levels:

Priority 1	Urgent
Priority 2	Routine
Priority 3	Low

This policy outlines the prioritisation level (priority 1) for people with the poorest health status and the greatest economic and social need for service.

2. Scope

The policy addresses *population groups* that require a consistent approach from all services in terms of prioritising.

It defines the population health groups that will be given priority of access to Dianella services.

For other population groups, discipline specific screening is undertaken to determine prioritisation (levels 1, 2 & 3) based on clinical needs.

3. Background

Dianella is committed to providing accessible services to the whole of its community. Its strategic plan and existing programs are already targeting groups with specific health needs. Employing the social model of health framework, Dianella understands that service provision needs to be flexible to address the discrepancies in the health status of disadvantaged groups in our community who have significantly lower health standards and health opportunities.

Incorporating the principles of the Demand Management Framework Generic Priority Tool, the Dental Health Services of Victoria funding and policy guidelines and other targeted programs, this policy has been developed to identify the vulnerable community groups who will receive prioritised access to Dianella's services.

4. Role & Responsibility

The **Executive Management Team** will:

- review and modify this policy **annually** in line with the changing needs of the community
- review and modify this policy **as required** by specific elements of funding service agreements (eg the Active Service Model)
- ratify and communicate the policy at the Dianella Management Team Meeting for dissemination to service access staff

All Dianella **service access staff** will adhere to the principles of this policy and offer priority 1 clients the next available appointment. If an appointment is not available, they will be placed on the waiting list for that service.

5. Legislation & Regulations

This policy is, in part, governed by the service agreements of our funding bodies.

6. Policy

The policy contains three key sections:

- Section 1 is a cross-reference matrix of identified vulnerable groups and service applicability.
- Section 2 provides a definition of each vulnerable group.
- Section 3 discusses the linkages between eligibility for services and priority of access.

Section 1 - Vulnerable Group Service Applicability Matrix

Group	Allied Health Service	Dental ¹	Medical ²
People with an immediate risk to their safety or the safety of others	✓		Clinical Triage
Aboriginal & Torres Strait Islanders	✓	✓	
Asylum Seekers	✓	✓	
Refugees	✓	✓	
Clients who are homeless or at risk of homelessness	✓	✓	
Children and young people		✓	
Pregnant women		✓	
Registered clients of mental health and disability services ³		✓	
Clients with multiple complex conditions and complex care needs	✓		

Section 2 - Vulnerable Group Definitions

People with an immediate risk to their safety or the safety of others - clients who present with an immediate risk to their safety or pose a risk to the safety of others. An initial response is required as there is a duty of care to provide support and ensure the safety of clients while awaiting appropriate services. Staff with appropriate skills and qualifications should manage the situation until appropriate care is in place (primarily within Mental Health & Wellbeing service delivery).

Aboriginal & Torres Strait Islanders - an Aboriginal and/or Torres Strait Islander person is defined as a person of Aboriginal and/or Torres Strait Islander descent, who identifies as being Aboriginal and/or Torres Strait Islander.

¹ Governed by the Priority criteria established by Dental Services Victoria. Dental is also supported by an emergency service based on clinical triaging. People with priority access to dental care must be offered the next available appointment for general care and must not be placed on the general care wait list. Where the person has denture needs, they would be offered the next available appointment for denture care or placed on the denture waiting list where applicable.

² Prioritisation is based on clinical needs determined by triage if necessary. Appointments with a GP are usually available within 1-3 days.

³ Supported by a letter of recommendation from their case manager or staff of special developmental schools

Asylum Seeker - a person who has fled their own country and applies to the government of another country for protection as a refugee. As an asylum seeker is not a permanent resident of Australia, they are entitled to a wide range of health benefits. Whilst they are able to access community health services (at zero cost), due to their ineligibility for a Medicare card and as such, access to general practitioners, some hospitals such as the Northern, run special asylum seeker programs to provide access to these and other essential medical services.

Refugees - any person who, owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence, is unable or, owing to such fear, is unwilling to return to it. .

Refugee client referrals are generally valid for a period of five years but will vary from client to client. Whilst a client's refugee "status" may be reviewed after that time and annulled, clinical priority will continue to reflect the client's ongoing care needs. Any such change to a client's refugee status must be recorded in the client's progress notes which must also include the reason the status was removed.

Clients who are homeless or at risk of homelessness - includes any person who is left without a conventional home and who lacks the economic and social supports that a home normally affords. This includes people living in insecure, unsafe or unaffordable housing, who are at risk of homelessness, and people who are in a state or outright homelessness, living in the street, in parks or squats.

People with multiple complex health conditions and complex care needs that require a coordinated team approach⁴ - these people are prioritised to ensure the best client outcomes are achieved and to prevent inefficiencies that occur when services within the agency and partner agencies are not coordinated. These clients are identified on the basis of the complexity of their health conditions **and** the resulting complexity of their care coordination and planning needs in that they require a coordinated team approach to access two or more services.

Appendix 1 shows Priority of Access in the context of Service Coordination.

Section 3 – Priority of Access and Eligibility

Excluding Dental, Medical and other services with no geographical boundaries, Dianella services are funded based on the identified needs of the **local population**. This local population is identified as people living, working or studying in the area of Hume.

From time to time, clients of any population group who do not live, work or study in the Hume LGA may request services from Dianella. Clients will not be refused services but will be **strongly** encouraged to engage with their local service providers.

⁴ The DHS Demand Management Framework specifies this group as those with complex care needs or requiring a care plan for the coordination of multiple services. To facilitate demand, Dianella have identified this group as those with two or more complex *health conditions* requiring a coordinated team approach..

Some may have received services from Dianella in the past and moved outside of the LGA. For service continuity, these clients may choose to continue accessing our services.

7. References and Related Documentation

- Demand Management Framework
- Funding body guidelines including but not limited to Dental Health Services of Victoria and Department of Human Services
- Service Coordination Policy
- Eligibility Policy
- Dental Priority of Access Policy

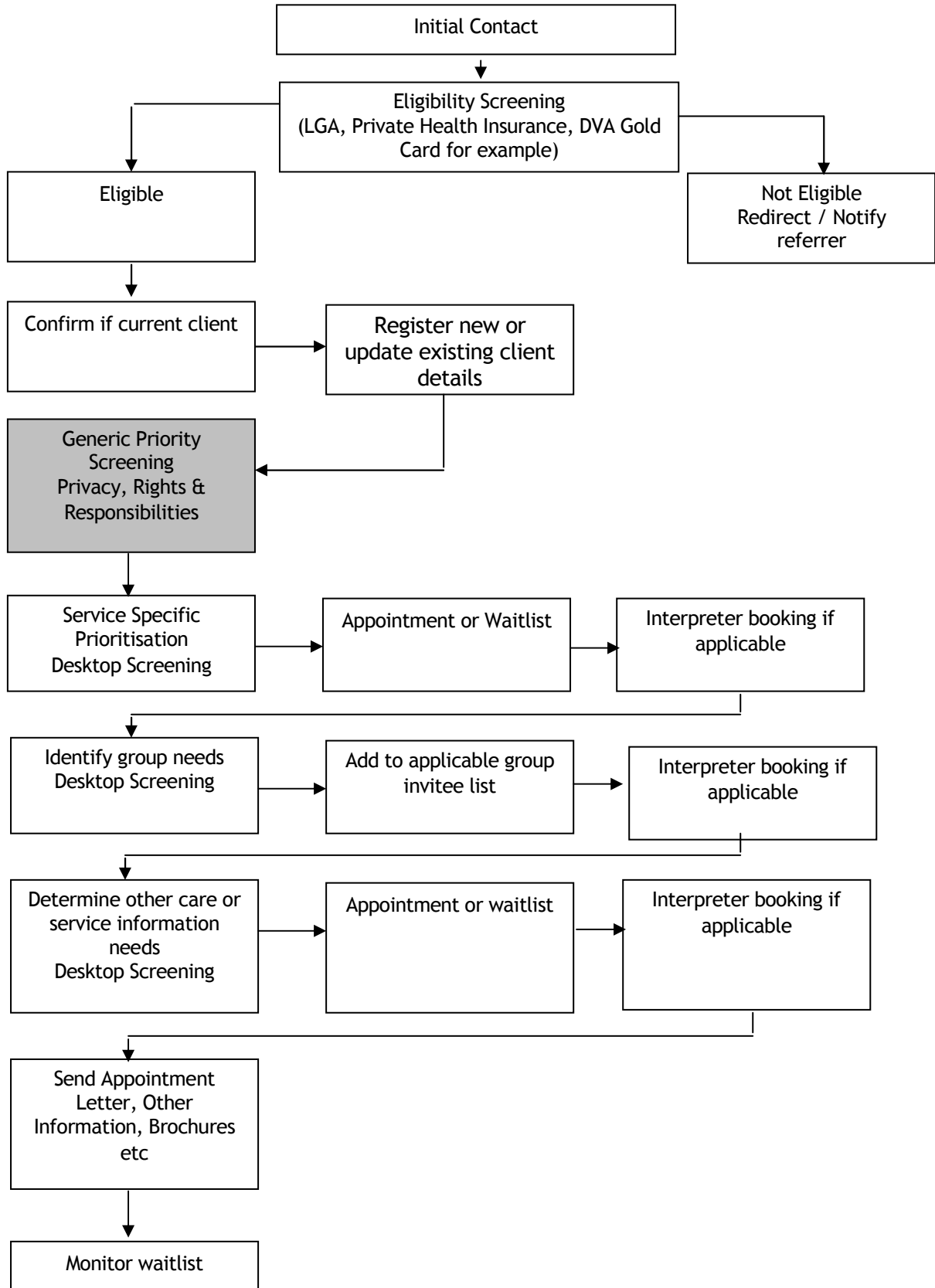
8. Policy Review History

Developed May 2007

Reviewed July 2007

Reviewed August 2012

Appendix 1 - Procedure Summary



All referrals are captured as an 'episode of care'. Whilst all episodes are reviewed by the clinician (desktop screening) upon completion of the Initial Needs Identification, priority 1 clients (as a result of generic or discipline specific screening) are offered an appointment (based on availability) prior to the desktop screening process.