Commonwealth Continuity of Support (CoS) Programme – Specialist Disability Services for Older People

CoS Client Handbook
Your guide to being a client of the Commonwealth CoS Programme - Version 2 - February 2018
Introduction

This handbook aims to help you understand the Commonwealth Continuity of Support (CoS) Programme. It has four sections:

- **Accessing CoS** – This is about who is eligible, when CoS starts and what you need to do.
- **CoS services and supports** – This covers services you can and cannot access under CoS.
- **Changing needs and leaving CoS** – This is about reviewing your supports and getting the services you need.
- **Support and more information** – This covers the types of support such as advocacy programs and other resources and information that can help you.

This handbook is based on the Commonwealth CoS Programme Manual developed for service providers. The manual received input from state and territory governments and a wide range of disability and aged care peak bodies including consumer advocacy organisations.

This handbook also received comment from individuals and aged and disability peak organisations.

Summary

- The CoS Programme (CoS) aims to help older people with disability receiving state-managed specialist disability services who are not eligible for the National Disability Insurance Scheme (NDIS).
- You will receive the same support services you were getting before you moved to CoS.
- The Australian Government Department of Health will manage CoS instead of your state or territory government.
- You will continue to receive your existing services until you move to CoS.
- You do not need to be assessed again to enter CoS.
- You can stay with the same service provider. If the service provider cannot do this, we will help you find a new service provider.
- If you pay a fee for services now, this amount will not change under CoS. If you don’t pay fees, this will not change.
- If this is how you received your supports before, you can remain on an individual budget model under CoS.
- Once you begin as a client under CoS, if your needs change your service provider will undertake (or organise) a review of your supports.
- Depending on the outcome of this review, there are some options where you can stay in CoS and get the extra supports you need.
- However, as was the case when you were receiving state-managed specialist disability services, for other clients whose needs change they will leave CoS and enter aged care services.
- Aged care may offer many clients the services that best match their needs.
- Support is available if you need to leave CoS and access aged care supports.
Accessing CoS

You can access CoS if you meet **all** of the following criteria:

- **Age**
  
  You are aged **65 years and over** when the NDIS starts implementation in your region and have not been assessed as eligible for the NDIS under the Scheme’s “becoming a participant rules;”

  or

  You are an Aboriginal and Torres Strait Islander person aged 50-64 years at the time the NDIS starts implementation in your region and have been assessed as being ineligible for the NDIS.

  and

- **Services you receive**
  
  You are a person with disability receiving **state-managed specialist disability services** when CoS starts in your region. This includes:

  - people with disability who received state-managed services in the 12 months prior to when CoS starts in your region; and
  
  - people with disability who are not getting services yet but have a booking with a service provider at the time CoS starts in your region. This could include where you and the service provider have agreed a set date and time when services will be delivered, even though services may not have commenced.

When the NDIS completes its rollout there will be no new entrants to CoS.

**How do I access CoS?**

- Your service provider will let you know if they are offering CoS and if you are eligible.

- If your service provider cannot deliver support under CoS, we will organise for a different service provider to continue your supports.

**CoS or the NDIS?**

- If you identify as Aboriginal or Torres Strait Islander aged between 50 and 64 years and are receiving specialist disability services, you may be eligible for the NDIS.

- When the NDIS starts in your region, you can apply.

- If you are not eligible for the NDIS, you will be offered support under CoS instead if you are eligible.

**Can I move from CoS to the NDIS?**

- For some people, such as Aboriginal and Torres Strait Islander people **aged under 65 years**, your eligibility for the NDIS may change over time.

- If this is the case, you could leave CoS and apply for the NDIS at a later stage.

**Can I stay in the NDIS as I get older?**

- If you are a person with disability and eligible for the NDIS, you can stay in the NDIS even after you turn 65.

**When does CoS start in my region?**

- CoS started from 1 December 2016 and will be rolled out in stages just like the NDIS. As a result, there will be minimal disruption to services for clients.

- Full roll-out of CoS across all relevant states and territories will occur by 30 June 2020.
Check the CoS website at https://agedcare.health.gov.au to see when CoS will be available in your region.

**When does the NDIS start in my region?**

- The start dates for the NDIS depends on what region you live in for each state and territory.
- Check the NDIS website at http://ndis.gov.au to see when the NDIS will be available in your region.

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**CoS Services and Supports**

**What IS funded under CoS?**

**Accommodation Support**
These are services that meet your basic living needs through providing accommodation and providing support needed to enable you to remain in your existing accommodation.

Accommodation support relates to:
- Large residential/institution (more than 20 places) - 24 hour care
- Small residential/institution (between 7 and 20 places) - 24 hour care
- Hostels—generally not 24 hour care
- Group homes (usually less than 7 places)
- Attendant care/personal care
- In-home accommodation support
- Alternative family placement
- Other accommodation support
**Community Support**
These include supports to improve functional abilities, education in behaviour support and team-based resources that support you to maximise your independence.

Community support relates to:
- Therapy support for individuals
- Behaviour/specialist intervention
- Counselling (individual/family/group)
- Regional resource and support teams
- Case management, local coordination and development
- Other community support

**Community Access**
These services are designed to provide opportunities for you to participate in your community and enjoy your full potential for social independence.

Community access relates to:
- Learning and life skills development
- Recreation/holiday programs
- Other community access

**Respite**
Respite services are those that provide a positive experience for you and a short-term and time-limited break for your families and other carers while supporting and maintaining the primary care giving relationship.

Respite relates to:
- Own home respite
- Centre-based respite/respite homes
- Host family respite/peer support respite
- Flexible respite
- Other respite

**Individual Support Packages (ISP)**
- If you were receiving individual support packages or individual budgets under state or territory-managed services, you will continue to receive these under CoS.
- These will be called Individual Support Packages (ISP).
- If you are receiving an ISP you are able to purchase all the services listed above as part of your package budget or allocation. You may not use your budget to purchase items listed in the section below “What is NOT funded under CoS?”
- ISP under CoS will be delivered in three different ways:
  - **Service Provider** – where your budget is managed by a service provider who also delivers your supports.
  - **Intermediary** – where your budget is managed by an organisation but they do not deliver your supports.
  - **Direct Funding** – where you receive a budget directly into your nominated bank account and you manage it.
Direct Funding ISP clients

- If you were receiving a direct payment into a nominated bank account from a state or territory government before, we call this direct funding. There will be some changes to this under CoS.
- You will still receive your direct payment but it will come from Community Options Australia, an organisation that the Australian Department of Health has arranged to administer your payments.
- You will still manage your own budget and supports, but report on these to this organisation.
- You should have the capacity to manage your budget and supports. If not, you can nominate a legal representative to do this on your behalf.
- Before you move to CoS, your state or territory government will give you information about the move, including a consent form for providing your contact details to Community Options Australia.
- You will need to sign an ISP Service Agreement with this organisation at least one month before you move to CoS and receive your first direct payment.
- The Service Agreement is the document or plan with your goals and supports, costs and budget each year. This will be a legally binding document.

What is NOT funded under CoS?

- Services aimed at helping you get a job.
- Supports that are the responsibility of a different Australian Government Department or different level of government, such as:
  - Auslan interpreting services which are funded and guided by the Australian Government Department of Social Services’ National Auslan Interpreter Booking and Payment Service (NABS);
  - Australian Disability Enterprises, which is a program managed by the Australian Government Department of Social Services. Further information about this program can be obtained by emailing NDISCoord@dss.gov.au; and
  - services funded by State and Territory Governments (such as state advocacy, information and alternative forms of communication, research and evaluation).
- Buying land.
- Backdated costs.
• Costs of preparing a grant application.
• Major or new construction/capital works.
• Overseas travel.
• Paying immediate family members for your care or support (unless you apply to the Department of Health and an exception is made).
• Services/goods that would generally be purchased from your income or pension (daily living expenses such as buying food).

In addition, if you are a client receiving an ISP you **may not use your budget** to pay for:

• Vehicles.
• Supports bought from a business or other legal entity where you, your carer or a family member has a financial interest.
• Client fees charged for your ISP supports.
• Supports delivered by an immediate family member or family member living at the same residence as you (unless this has already been agreed or the Department of Health agrees to this arrangement).

If you wish to employ a family member to provide your supports, for example if there are very limited choices available about who can deliver your care, you must write to the Department of Health and ask permission for this. If agreed, your Service Agreement should be updated to reflect this.

**How do I access aids and equipment?**

• Aids and equipment, which may include assistive technology, are not a service type funded under CoS.
• State and territory governments fund aids and equipment schemes and have agreed to continue to deliver these supports to older people with disability who are not eligible for the NDIS.
• Ask your state or territory government first if you need equipment supports. There are contact details for state and territory equipment schemes available on the **CoS website** at https://agedcare.health.gov.au/aids-and-equipment.
• If you were receiving aids and equipment under state or territory arrangements **before moving** to CoS, you can continue to do this. For example, for clients on ISP, if you had aids and equipment listed as a support in your previous Service Agreement, you may continue to pay for this with your budget.

**What if I live in a group home with other people who will get the NDIS?**

• If you live in a group home, it is important under CoS that you can still live in the same place. This includes if you are living in a house with people under the age of 65 who will get support from the NDIS. We do not expect your services to change or that you will need to move.

**Can I get services from CoS AND other programs?**

• Your ability to access CoS and another program depends on the eligibility of the program you are in or trying to access in the future.
• A number of detailed examples are provided in **Chapter Four** of the CoS Programme Manual for service providers which is available on the CoS website.
• For example, you can receive CoS supports as well as:
  o **aids and equipment** from state or territory-funded equipment schemes;
  o **residential respite** in an aged care facility;
the wide range of **advisory services**, education and training, support programmes and other services for people with dementia, their families and carers;

- **palliative care** services from your state health system in addition to CoS services, but this should be arranged by your clinician/GP; and
- supports from the Commonwealth Home Support Programme, Home Care Packages or residential aged care if you are **already** receiving these when you transition to CoS.

**What fees will I pay under CoS?**

- You will continue to pay what you were paying before moving to CoS.

**How do I change my provider?**

- If you feel a service provider is not helping you as much as they could, you can change providers without waiting for your annual review of supports.
- You should contact your service provider’s Departmental Grant Manager for advice on how to find a new CoS provider. Their details are available from your service provider and listed in the CoS Programme Manual.
- If you do not feel comfortable doing this, you can contact the Department directly by emailing CommonwealthCoS@health.gov.au
- If the new service provider agrees, you will need to tell your current provider you are moving. Try to tell the Department of Health **at least 6 weeks** before you want to move if possible, so that new arrangements can be organised for you.

**How does CoS involve my carer/advocate/nominee?**

- We encourage you and your service provider to involve your support person so they are involved in important decisions, such as any reviews.
What if I only need CoS services every now and then?

- You can access your CoS supports as you need them.
- You are considered to have left CoS when you have not received any CoS services for a period of 12 months without any supports, or when you leave CoS permanently to receive aged care supports.

Can I suspend my CoS services?

- If you have a leave of support for a short-term period only (defined as a period of under three months), for example due to a stay in hospital, your need for services should be reviewed by your service provider (or third party) after you return.
- Your fee arrangements during this suspension of services should be discussed with your service provider.
- You should provide notice in writing to your service provider of any suspension for a period of over 3 months.
- If you receive an ISP, you should discuss any planned or unplanned absences with your service provider or Direct Funding organisation.

Changing needs and leaving CoS

How and when will my CoS supports be reviewed?

- Every 12 months you will have a review of your supports and/or when your needs change.
- This could be done by your service provider face-to-face or over the telephone where this is appropriate, for example if your needs are relatively stable.
- The aim of the review is to check your supports are helping you achieve the outcomes you are aiming to achieve.
- You can ask a family member, friend or carer to support you during this review.
- If English is not your preferred language, your service provider can get help from the National Translating and Interpreting Service to do the review with you. Visit the CoS website for information on getting support from this service.

What happens when my needs change once I am a CoS client?

Minor changes in supports

- If your needs change just for a short time or you only need a small amount of extra support, additional services may be offered by your provider if this is possible.
- If you are an ISP client you may be able to change the mix of supports within your existing budget to meet your changing needs.
- If neither of these options is possible, your provider can apply to the Department of Health for additional funding. The availability of this, however, is limited.

More significant changes in supports

- If you need a lot more support and over a longer period of time (over three months), your provider may apply to the Department of Health for extra funding.
- If additional funding is not available, there are still options. For example:
If you don’t want to move from the provider you are with, you could remain in CoS on the same level of supports IF other support, such as family, can provide the extra services you need.

Aged care might offer the services that best meet your changing needs. Under aged care there are both options for residential aged care and services to help you stay living at home.

- Your CoS service provider can refer you to aged care or you can access these services yourself through the contact details provided for My Aged Care below.
- Once you start receiving aged care services permanently, you have left CoS.

### What aged care options are available?

You access aged care through My Aged Care. This has a website you can visit and a phone number you can call and will help you access a range of aged care services.

- **Visit the** [My Aged Care website](http://www.myagedcare.gov.au) **at** www.myagedcare.gov.au.
- **Call the My Aged Care contact centre**: 1800 200 422 between 8am and 8pm on weekdays and between 10am and 2pm on Saturdays. The My Aged Care contact centre is closed on Sundays and national public holidays.

If you speak a **language other than English**:

- you can call the [Translating and Interpreting Services](http://www.myagedcare.gov.au) (TIS) on 131 450. TIS covers more than 100 languages and is available 24 hours a day, 7 days a week, for the cost of a local call.
- you can call the My Aged Care contact centre and they will organise an interpreter through TIS to support the contact centre in communicating with you.
- there is information on aged care available on the [My Aged Care website](http://www.myagedcare.gov.au) in other languages.

If you are **deaf or have a hearing or speech impairment**:

- you can contact My Aged Care through the National Relay Service in two easy steps. Step 1 - Visit the [National Relay Service website](http://www.myagedcare.gov.au) to choose your preferred access point and Step 2 - Ask for My Aged Care on 1800 200 422.
Support and more information

**Advocacy services** - The National Disability Advocacy Program gives people with disability of all ages access to disability advocacy that promotes, protects and ensures their full and equal enjoyment of all human rights, enabling community participation.


**Support to enter aged care** - You can contact [My Aged Care](http://www.myagedcare.gov.au/) if you are thinking about moving to aged care by calling 1800 200 422 or visiting the My Aged Care website at [http://www.myagedcare.gov.au/](http://www.myagedcare.gov.au/).

You can also access the [National Aged Care Advocacy Program](http://www.dss.gov.au) for help in accessing some aged care programs by calling the National Aged Care Advocacy line on 1800 700 600 (free call) or emailing NACAP@health.gov.au to contact an advocacy provider in your region.

**Support for carers** - If you do not already receive emergency respite under CoS, you may be able to access this support through [Commonwealth Respite and Carelink Centres](https://www.respite.gov.au) or other services delivered under the Integrated Plan for Carer Support. Carers should contact the [Carer Gateway website](https://www.carergateway.gov.au) for more information.

**National Disability Insurance Scheme** – To access information on the Scheme including the becoming a participant rules visit [https://ndis.gov.au/](https://ndis.gov.au/).

**Complaints** – If you wish to make a complaint about how the CoS Programme is being managed please email CommonwealthCoS@health.gov.au. If you have a complaint about your service provider, please follow the complaint feedback mechanisms advised by your service provider.


You can also contact the Department of Health directly via email at CommonwealthCoS@health.gov.au.

### Questions or concerns

- If you have questions or concerns about your service provider you should speak to them directly.
- You might like to do this with the support of a family member or friend, a carer, advocate or nominee if you have one.
- If you have concerns about how CoS is working for you or want to know how to voice your concerns email us at: CommonwealthCoS@health.gov.au