



MANATŪ HAUORA

# Equipment and Modification Services

## Housing Modifications Manual



## ABOUT THIS MANUAL

This manual provides the guidelines for Ministry of Health (Ministry) funding support for housing modifications for people with disabilities. Housing modifications are any permanent alteration or addition to the home to meet the person's disability related needs. This support is part of the Ministry's Equipment and Modification Services (EMS), which also includes funding for equipment, vehicle purchase and vehicle modifications.

This manual is for:

- occupational therapists who are EMS Assessors and who are accredited to complete assessments and requests for housing modifications for people with disabilities
- people with disabilities and their family, whānau and support people who wish to understand more about this service.

The Housing Modifications Manual covers the Ministry's **Funding Guidelines** and includes:

- an overview of EMS
- assessment, eligibility and access criteria
- types of housing modifications
- roles and responsibilities of all relevant parties

The **operational processes** which have been developed and are administered by the Ministry's contracted providers of EMS are available on the EMS Providers' websites.

This manual, forms and templates and any updates to operational policy are available on the Ministry's website and can be accessed through the web addresses opposite.

EMS Assessors may be Approved Assessors, Credentialed Assessors or Assessors approved through Service Accreditation. Information on the EMS Assessor Accreditation Framework, under which EMS Assessors submit Service Requests for Ministry funded equipment and housing modifications, can be found at the web address opposite.



Portable ramps and platform lifts are considered to be "permanent" housing modifications, although they can be removed when no longer required.



Throughout this manual the term 'person' refers to the person with a disability.



- [www.enable.co.nz](http://www.enable.co.nz)
- [www.accessable.co.nz](http://www.accessable.co.nz)



- [www.disabilityfunding.co.nz/ems-assessors](http://www.disabilityfunding.co.nz/ems-assessors)



An EMS Assessor undertakes an assessment with the person for the consideration of equipment and modifications.

## HOW TO USE THIS MANUAL

The content of the manual is found on the left hand side of each page and is categorised by chapter name and numbered sequentially for easy reference.

### Chapter Name

Content...

This manual is for:

Occupational therapists who are EMS Assessors and who are accredited to complete assessments and Service Requests for housing modifications for people with disabilities.

People with disabilities and their family, whānau and support people who wish to understand more about this service.



Definition



Information



Example



Reference

These icons indicate further explanations to the text contained on the page.

Date page created or amended allowing for accurate version control of this publication.

May 2014





Housing Modifications Manual

2

Housing modifications manual sequentially numbered for faster and easier referencing.

Note: This manual has been formatted for double sided printing.

## Key to symbols used throughout the manual:

Symbol	Meaning	Explanation
	<b>Definition</b>	<i>Definitions of terminology used in the text are explained as well as having a full glossary of terms.</i>
	<b>Information</b>	<i>This icon provides further explanation to the text and also directs readers to associated information in other sections of the manual.</i>
	<b>Example</b>	<i>The content of the text is further illustrated with relevant examples.</i>
	<b>Reference</b>	<i>This icon directs readers to alternate sources of information or relevant websites.</i>

# Contents

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<b>1. OVERVIEW OF EQUIPMENT AND MODIFICATION SERVICES</b>	<b>7</b>
1.1. What are Equipment and Modification Services?	7
1.2. Guiding Principles	7
1.3. What services are provided?	8
<b>2. ASSESSMENT, ELIGIBILITY AND ACCESS CRITERIA</b>	<b>9</b>
2.1. Assessment Process	9
2.1.2. Needs Assessment Service Co-ordination	10
2.2. Eligibility	11
2.2.1. Establishing eligibility	11
2.3. Meeting the Access Criteria for Services	12
2.3.1. Gain Access Into and Move Around Within their Home	12
2.3.2. Remain in, or Return to Their Home	13
2.3.3. Main Carer of a Dependent Person	13
<b>3. PRIORITY OF SERVICES</b>	<b>14</b>
3.1. Prioritisation Tool	14
<b>4. COMPLIANCE WITH THE PRIVACY ACT</b>	<b>16</b>
<b>5. BASIC HOUSING MODIFICATIONS</b>	<b>17</b>
5.1. External Handrails	17
5.2. Internal Handrails	17
5.3. Internal Door Widening	18
5.4. Lever Taps	18
5.5. Threshold Ramps	18
<b>6. COMPLEX HOUSING MODIFICATIONS</b>	<b>19</b>
6.1. Access Modifications	19
6.1.1. Replacement of Access Equipment - Like for Like	21
6.1.2. Replacement of Access Equipment -change in need	21
6.2. Other External Modifications	21
6.3. Internal Modifications	22
6.4. Modifications to support people who have challenging behavior	25
6.5. Construction of new homes	26
<b>7. GENERAL INFORMATION</b>	<b>27</b>
7.1. Housing Advisory Services	27
7.2. Moving to another home	28
7.3. Equipment as part of a Housing Modification	28
7.3.1. Equipment installed permanently	28

7.3.2. Equipment installed on long term loan	29
7.4. Repeat Housing Modifications	29
7.4.1. Genuine and exceptional circumstances for repeat funding	29
7.4.2. Circumstances not covered for repeat funding	30
7.5. Funding in Shared Care Circumstances	30
7.6. Requests for Additional Funding or Variations to Approved Modifications	31
<hr/>	
<b>8. FUNDING</b>	<b>32</b>
8.1. Levels of Funding	32
i. Less than \$200 (GST incl.)	32
ii. Between \$200 (GST incl.) and \$8,076 (GST incl.)	32
iii. Over \$8,076 (GST incl.)	32
iv. Over \$28,750 (GST incl.)	32
8.2. Funding for Access Modifications	32
8.3. Income and Cash Asset Test	33
8.3.1. Indicators for an Income and Cash Asset Test	33
8.3.2. Valuing Modifications for an Income and Cash Asset Test	34
8.4. Part Payment by the Person	34
8.5. Cost Contribution by the Ministry	35
8.5.1. Conditions for a Cost Contribution	35
8.6. Reimbursement/Retrospective Funding	36
<hr/>	
<b>9. HOUSING MODIFICATIONS WHICH ARE NOT FUNDED</b>	<b>38</b>
9.1. In relation to the person's situation and needs	38
9.2. In relation to the person's home	38
9.3. Access Modifications	39
9.4. Other Buildings	39
<hr/>	
<b>10. OTHER FUNDING OPTIONS</b>	<b>40</b>
10.1. Ministry of Health - other supports	40
10.1.1. Long Term Supports - Chronic Health Conditions funding	40
10.2. Accident Compensation Corporation	41
10.3. Ministry of Education	41
10.4. Veterans' Affairs New Zealand	41
<hr/>	
<b>11. ROLES AND RESPONSIBILITIES</b>	<b>42</b>
11.1. The person and their family or whānau:	42
11.2. The property owner	43
11.3. The EMS Assessor	44
11.4. Employers, Supervisors or Professional Leaders of EMS Assessors	47
11.5. EMS Providers	48
11.6. Needs Assessment Service Co-ordination	50
11.7. Work and Income	50
11.8. Designer	50
11.9. Project Manager	51

11.10. Building Contractor	51
11.11. Ministry of Health	53
<hr/>	
<b>12. DECISION-MAKING PROCESSES</b>	<b>54</b>
12.1. Housing modifications not supported by the EMS Assessor	54
12.2. Review of assessment by an EMS Assessor	54
12.3. Review by the Ministry	54
12.3.1. Disability Support Services	54
12.3.2. EMS Review Panel	55
12.3.3. Ministry of Health's Equipment and Modification Services (EMS) Review Panel	56
<hr/>	
<b>13. GLOSSARY</b>	<b>57</b>
13.1. EMS Assessor Accreditation Framework	57
13.2. Basic and Complex housing modifications	58
13.3. Building contractor	58
13.4. Challenging behaviour	58
13.5. Cost Contribution	58
13.6. Dependent person	59
13.7. Designer	59
13.8. EMS Advisor	59
13.9. EMS Assessor	59
13.10.EMS Provider	60
13.11.EMS Prioritisation Tool	60
13.12.Factsheets	60
13.13.Housing Advisor	60
13.14.Housing Advisory Services	60
13.15.Like for Like Replacement	61
13.16.Main Carer	61
13.17.Part Payment	61
13.18.Project Manager	61
13.19.Restraint Minimisation and Safe Practice Guidelines	62
13.20.Shared care	62
13.21.Subcontractors	62
13.22.Website addresses	62
<hr/>	
<b>14. APPENDIX A - Eligibility</b>	<b>63</b>

# 1. OVERVIEW OF EQUIPMENT AND MODIFICATION SERVICES

## 1.1. What are Equipment and Modification Services?

Equipment and Modification Services (EMS) are one of the many services funded by the Ministry through Disability Support Services (DSS).

The purpose of Ministry funded Equipment and Modification Services is to:

- support people with disabilities and their families, to live as independently and safely as possible
- make a significant, consistent and reasonable contribution to enabling people with disabilities to participate (if and when they want to) in activities inside and outside their home, and in their local communities.

## 1.2. Guiding Principles

The Ministry is not able to provide funding for equipment and modifications to meet all of the needs identified by disabled people. To assist with the fair allocation of resources, the following principles guide the provision of Equipment and Modification Services:

- An effective contribution is made towards helping disabled people to live, as far as reasonably possible, as others do in their own homes and communities.
- Decisions represent value for money both now and in the future, and contribute to supporting disabled people of all ages to remain independently and safely in their homes, as is reasonably possible, and not to have to rely more heavily on their families or paid carers or move into residential care.
- Services are allocated fairly through a consistent, principled and equitable approach being taken to the way equipment and modifications are allocated across the diverse range of people the Ministry serves.
- Decisions reflect a long term perspective, recognising that the equipment and modifications that are most appropriate for a person may change over time as people grow, age and develop, and as their circumstances or needs change.



The provision of equipment and modifications needs to be managed within the annual budget allocated to these services by the Ministry.

As demand for services regularly exceeds the annual allocated budget, a prioritisation system is in place to ensure that disabled people who have the greatest need for services and the greatest ability to benefit from equipment and modifications are given first access to the available funding.

### 1.3. What services are provided?

The Ministry currently contracts with two providers, Accessable and Enable New Zealand, to administer and provide Equipment and Modification Services.

Equipment and Modification Services cover:

- Housing modifications

Housing modifications are any permanent alteration or addition to the home to meet a person's disability related needs.

- Equipment

- Vehicle purchase and modifications

This manual contains guidelines for the funding of housing modifications only. Information about funding for equipment and vehicle purchase and modifications can be found in separate manuals.



- [info@accessable.co.nz](mailto:info@accessable.co.nz)

0508 001 002

- [enable@enable.co.nz](mailto:enable@enable.co.nz)

0800 17 19 81



Throughout this manual, the two providers are referred to as the "EMS Providers".



Fixtures which are installed such as handrails; alterations to the property such as door widening, ramp access and level access showers.

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Portable, free-standing or removable items such as bathing, toilet aids and mobile hoists; mobility aids such as walking frames and wheelchairs; assistive devices to help with communication and vision.

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Vehicles, vehicle hoists, hand controls and swivel seats.



## 2. ASSESSMENT, ELIGIBILITY AND ACCESS CRITERIA

### 2.1. Assessment Process

Before funding for housing modifications can be considered, the person needs to have an assessment with an occupational therapist who is an EMS Assessor holding the appropriate level of accreditation.

The EMS Assessor completes an assessment with the person, their family, whānau and support people and, as required, other members of the multidisciplinary team, including Needs Assessment Service Co-ordination (NASC) personnel.

Before housing modifications can be recommended as the most appropriate solution to meet the person's needs, the EMS Assessor needs to consider:

- the availability and viability of a range of options including equipment and support packages (paid support services and unpaid natural supports from others) to meet the person's disability related needs
- the person's essential need for, and their ability to benefit from, a proposed housing modification
- the long term sustainability of the person remaining in their home for at least 2 to 3 years
- the physical features of the home and surroundings, the suitability of the property to meet the person's disability related needs in the long term and the feasibility of any proposed modifications
- the implication of the proposed housing modifications not being provided and how this might affect the person's need for support and/or impact on carer stress
- the most appropriate and cost-effective solution to meet the person's disability related needs when all other factors have been taken into account.

EMS Advisors and Housing Advisors, employed by the EMS Providers, support EMS Assessors to consider a range of intervention options. The EMS Assessor may make a Service Request for funding when:

- the person is eligible to access Ministry funded support, and
- it is agreed that housing modifications are essential to meet their disability related needs, and
- it is expected that the person has the ability to benefit from the housing modifications for the long term, and
- they have consulted with the EMS Advisor (according to the mandatory requirements for such consultation), and



Essential means that there is no other viable or cost-effective alternative available to meet the person's needs related to their disability. Where the person has other viable long term support options available, the request for funding cannot be considered 'essential'.



Equipment solutions should always be considered before housing modifications.



Cost-effective means the most economic and suitable solution to meet the person's needs related to their disability. This may not necessarily mean the least expensive option.



EMS Assessors are encouraged to consult with the EMS Advisors at any stage of the assessment process especially when the person's needs and/or solution are complex in nature. In some circumstances, this consultation is mandatory.



Refer to Section 7.1. for more information on Housing Advisory Services.

- the completion of the Prioritisation Tool indicates that funding is available.

The EMS Assessor will discuss other options with the person and their family or whānau to ensure the person's needs are addressed if:

- the person is not eligible for Ministry funded services
- the person does not meet the access criteria for Ministry funded housing modifications, or
- the Prioritisation Tool indicates that funding is not available.

### 2.1.2. Needs Assessment Service Co-ordination

Needs Assessment Service Co-ordination (NASC) organisations provide a single point of contact to identify a range of support options for disabled people. Such options can include a support package with one or more DSS funded services such as personal care support, household management, respite care, and residential care.

Services provided by NASC organisations include:

- Needs Assessment. This is the process of working with the person and their family, whānau and support people to identify their strengths and goals, priorities and disability support needs. The needs assessment is usually done in the person's home.
- Service Co-ordination. This is a process of developing a support package to meet the person's prioritised assessed needs and goals within the available funding. The support package is developed by the service co-ordinator with input from the person, their family, whānau and support people.

Service co-ordination determines which of the assessed needs can be met by the person's natural supports, which may be met by other government agencies/groups and which are supported through Disability Support Services.

NASC, EMS Assessors and EMS Providers are encouraged to work together to ensure the most appropriate and cost effective supports are provided for the person and their family, whānau and support people. The provision of modifications needs to be considered within the overall support package available to the person.

The principles<sup>1</sup> that guide the relationship between NASC and EMS Assessors and providers are that all:

- interactions are person centred
- interactions are collaborative



Refer to Section 3 for more information on priority of services.



Other options, considered in consultation with NASC, could include personal care support, self-funding, charitable trust funding, or moving to a more suitable property.



Natural supports refers to support from family, whānau, friends, community groups.



For more information on guidelines and processes for working together with NASC, go to: [Practice Guideline: Interface between NASC and EMS Assessors and Providers.](#)



[EMS and NASC Joint Report template.](#)

<sup>1</sup> Ministry of Health Practice Guideline: Interface between NASC and EMS Assessors and Providers

- interactions are based on finding the most cost effective interventions for the person
- services are co-ordinated for the person.

The indicators for liaison between NASC and the EMS Assessor are defined in the Practice Guideline. It is mandatory for the EMS Assessor and the NASC to complete a joint report, using the agreed template, when proposed modifications are high cost and major or for people with behavioural needs who have challenging behaviours.

## 2.2. Eligibility

Eligibility means the right to be considered for publicly funded support services. It is not an entitlement to receive any particular service.

To be eligible for consideration of funding towards the provision of housing modifications, the person must:

- be eligible for publicly funded Health and Disability Services (as set out in the Health and Disability Services Eligibility Direction 2011); and
- have a disability as defined by the Ministry; either physical, intellectual, sensory (vision and/or hearing) or a combination of these, or an age-related disability, which is likely to:
  - remain after the provision of treatment and/or rehabilitation
  - continue for at least six months, and
  - impact on their ability to do some everyday tasks, resulting in a need for ongoing support.

The person generally will not be eligible for cover or entitlement for housing modifications through the Accident Compensation Corporation (ACC) under the Accident Compensation Act 2001.

### 2.2.1. Establishing eligibility

Eligibility for housing modifications will generally be able to be determined by the EMS Assessor. The EMS Assessor may need to liaise with medical personnel to obtain further information about the cause and nature of a person's disability.

People whose eligibility is unlikely to change (eg, New Zealand citizens and permanent residents) can expect to have their eligibility assessed once only by any provider.

If a person does not meet the criteria set out in the Health and Disability Services Eligibility Direction 2011, they are not



For more information about the Health and Disability Services Eligibility Direction 2011, go to: [Eligibility for publicly funded health services](#)



People who have a sole diagnosis of Autism Spectrum Disorder (ASD) are eligible to be considered for EMS funding through Disability Support Services.



The EMS Advisor is available to provide advice and guidance on eligibility for publicly funded services. If further clarification is required, the EMS Advisor can seek advice from the Ministry.

able to receive free or subsidised services and he/she is usually liable for the full costs of the services.

People who are under 65 years of age and who have very high needs requiring ongoing support services as a result of a chronic health condition may be eligible for the provision of services through the Long-Term Supports Chronic Health Conditions (LTS-CHC) funding stream. Access to this funding is determined by the local district health board (DHB) NASC.



For further information on Long Term Support - Chronic Health Conditions (LTS-CHC) refer to Section 10.1.1.

## 2.3. Meeting the Access Criteria for Services

Funding towards housing modifications is considered where it has been established by an EMS Assessor that the eligible person meets agreed access criteria.

The housing modification must be essential to allow the person (independently or with assistance from support people) to do one or more of the following:

- gain access into and move around within the home
- remain in, or return to their home
- be the main carer of a dependent person.

### 2.3.1. Gain Access Into and Move Around Within their Home

Housing modifications to support a person:

- to gain access into the home from where a vehicle can reasonably be parked, so that the person can get into and out of their home safely
- to move safely between levels and around their home enabling them to achieve essential everyday activities of daily living such as personal hygiene (bathing/showering and toileting) and transferring and getting around within the home.

The **home** refers to the place where the person resides (lives and sleeps) for the majority of their time. It includes the environment immediately surrounding the home, including the area around an entrance to the home and to where a vehicle can reasonably be parked.

The person's home could be a privately owned home or a rented property. If the person lives in a rental property, the EMS Assessor will need to ascertain the likelihood of them remaining at that address in the long term. Confirmation from a private landlord that a rental agreement is of a long term nature will be required.



Consideration should be given to the impact of the proposed housing modifications on the services the person is receiving in their support package, or on their anticipated need for services if the modifications were not carried out.



The removal of a wall to provide an accessible toilet may prevent the need for personal care assistance to assist with toileting.



When a person lives in two homes on a regular basis, they can be described as living in shared care. Refer to Section 7.5 for more information.

### 2.3.2. Remain in, or Return to Their Home

Housing modifications to support a person to safely remain in, or return to their home to:

- achieve essential everyday activities of daily living such as personal hygiene (bathing/showering and toileting), transferring and getting around within the home
- allow preparation of food or drinks where the person lives alone or is by themselves for much of the day.

### 2.3.3. Main Carer of a Dependent Person

Housing modifications to support a person to carry out their role as the main or primary carer of a dependent person are considered for funding.

A **main carer** is an unpaid carer who lives with the person and provides the majority of their care.

A main carer may have a disability themselves and require assistance or support to look after a dependent person in their care.

A **dependent person** is a person who requires full time care:

- because the person is a child of 13 years or under, or
- because of their long term health or disability related needs.



A shower may be installed over the bath, with the use of equipment such as a transfer bench or bathboard, overhead ceiling track hoist to assist the main carer to shower the person at home.



Fencing may be required to help a parent to safely care for their child with challenging behaviour.



For the legal definition of a dependent child 13 years or under, go to [Leaving a child without reasonable supervision or care](#)

### 3. PRIORITY OF SERVICES

The provision of equipment and modifications needs to be managed within the annual budget allocated to these services by the Ministry. As demand for services regularly exceeds the annual allocated budget, a prioritisation system is in place to ensure that disabled people who have the greatest need for services and the greatest ability to benefit from equipment and modifications are given first access to the available funding.

#### 3.1. Prioritisation Tool

In order for all requests for equipment and modifications to be considered fairly and consistently and for those people who have the highest priority to receive their housing modifications in a timely way, a Prioritisation Tool has been developed.

The Prioritisation Tool is made up of two parts:

##### **i. Impact on Life questionnaire**

This questionnaire must be completed by the person and allows them to identify the current impact of their disability on their lives. It gives the person, and where appropriate, their family, whānau or key support people, an opportunity to have a “voice” in the assessment process.

##### **ii. EMS Assessor section**

The Prioritisation Tool requires the EMS Assessor to consider:

- the likelihood of the person’s physical or psychosocial status deteriorating if the housing modifications are not provided
- the impact of carer stress and the likelihood that the resilience of the person’s carer will deteriorate if the proposed housing modifications are not provided
- the ability of the proposed housing modifications to benefit the person and/or their family or whānau who care for them. This includes the impact of the person’s disability on their daily life and their ability to remain living in their home for at least 2 to 3 years. The EMS Assessor will consider how the proposed solution is likely to provide benefit to the person in the following areas of their life:
  - independence in daily living
  - safety
  - external roles and responsibilities (eg, employment, study, main carer)
  - primary relationships
  - day to day activities that are important to them.



Documents relating to the EMS Prioritisation Tool can be found on the following link: [EMS Processes and Guidelines](#)

- the likely length of time the proposed housing modifications will offer benefit to the person and/or their family or whānau who care for them
- the likelihood of achieving the benefit taking into account social and environmental factors.

The Prioritisation Tool replaces the P1 and P2 process and determines whether or not funding is available for the proposed housing modifications.

## 4. COMPLIANCE WITH THE PRIVACY ACT

The information provided within the Prioritisation Tool and in a Service Request may be used for the following:

- To assess the need for funding of equipment and modifications by the Ministry. This assists the Ministry with planning and purchasing future services.
- To collect statistical information such as gender, ethnicity and disability type. This data assists the Ministry to develop a clear picture of the needs of disabled people to ensure that access to disability support services is as fair and equitable as possible within existing constraints.
- To provide the Ministry with specific information about EMS services a person has received or has not been able to receive following the outcome of the Prioritisation Tool
- For other such functions as permitted under law.

The provision of information sought for the Impact on Life questionnaire (as part of the Prioritisation Tool) and a Service Request is voluntary for the person but consideration of funding will depend upon all the information being provided.

The person has the right to access the information held about them and to request that corrections be made to this information.

The Health Information Privacy Code (1994) applies to the information collected within any application for Equipment and Modification Services. Adherence to the code ensures all information collected is received and treated in the strictest confidence.



For more information on the Privacy Act and Code, go to: <http://www.privacy.org.nz>



## 5. BASIC HOUSING MODIFICATIONS

Basic housing modifications are low cost, generally under \$2,000 (GST excl.) and do not require significant structural work or building consent.

Basic housing modifications include, but are not limited to, external and internal handrails, internal door widening, lever taps and threshold ramps.

In order to recommend basic housing modifications an EMS Assessor needs to be an occupational therapist who is an Approved Assessor for Housing (Basic) under the EMS Assessor Accreditation Framework.



For more information on the EMS Assessor Accreditation Framework go to: <http://www.disabilityfunding.co.nz/ems-assessors>



Equipment solutions should always be considered before housing modifications.

### 5.1. External Handrails

External handrails are considered where the person is unable to safely use the existing steps to get into or out of their home. White edging to the nosing of the steps and non-slip surfacing may also be required to enhance the person's safety.

Handrails may be provided for one entry/exit point into the home to provide an accessible route from the doorway to the nearest point to where a vehicle can reasonably be parked.

Access modifications are considered to support the person to gain entrance into and out of their home. The Ministry does not provide funding for additional access to other areas such as clotheslines or to letterboxes.

Where there is already one accessible entrance into the home, the Ministry will not generally fund modifications to an alternative access unless there are genuine and exceptional circumstances. This is irrespective of whether the Ministry has funded the existing accessible entrance or not.

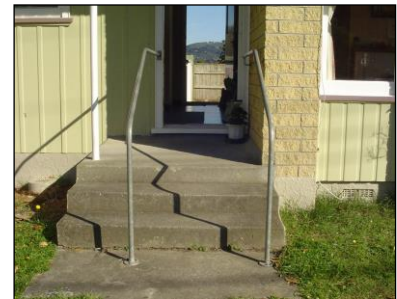


Figure 1: External rails



The New Zealand Building Code requires that houses built after 1992 must have a handrail on at least one side where there are three or more steps.



If a person has moved into a property and there is an existing external railing at the back steps, funding will not be approved for another railing at the front steps unless use of the existing rail is not a viable option.

### 5.2. Internal Handrails

Internal handrails are considered where the person is unable to independently or safely:

- use the existing internal steps or stairs to access essential areas of the home, or
- manage personal hygiene activities (such as showering, toileting or bathing), transfer or mobilise and it is not practical or appropriate to use an equipment item to meet the person's disability related need.

### 5.3. Internal Door Widening

Widening an existing doorway is considered a Basic housing modification where:

- the door is too narrow for the person to access essential rooms within their home, and
- only minor removal or relocation of electrical fittings or wiring is involved. (See 6. Complex Housing Modifications).

### 5.4. Lever Taps

Lever taps are considered where :

- the person is unable to operate the taps and this cannot be achieved by using an off the shelf product (such as tap turners), and
- independent use of the taps will increase the person's independence and reduce the level of funded or natural support they currently receive.

### 5.5. Threshold Ramps

A threshold is a sill to an external door, or the floor under an internal door.

A threshold ramp or wedge ramp, either internal or external, is considered when:

- the person is unable to independently or safely use the existing steps
- the aid of a handrail or a half step (or easy-step) will not meet the person's disability related need
- the entrance has a small step only (usually less than 50mm) and a wedge of up to 450mm in length will provide the person with safe access, and
- safe access cannot be achieved by using an off the shelf product which could be obtained as an equipment item.



Where a person is a wheelchair user, consideration should be given to the width of the wheelchair before changes to door width are recommended. Different makes and models of wheelchairs may have different overall widths for the same seat size.



When a new wheelchair is being considered for a person, the EMS Assessor should liaise with the appropriate service (such as an occupational therapist working in a community health, child development team or specialist assessment service) to ensure the person will be able to get around their home.



Figure 2: Threshold Ramp

## 6. COMPLEX HOUSING MODIFICATIONS

Complex modifications generally cost more than \$2,000 (GST excl.) and involve more significant structural work. They may require building consent.

In order to recommend complex housing modifications an EMS Assessor needs to be an occupational therapist who is a Credentialed Assessor for Housing Modifications (Complex) under the EMS Assessor Accreditation Framework.

Examples of complex modifications include, but are not limited to, the following:

### 6.1. Access Modifications

Easy-steps, ramps and lifts are considered where the person is unable to safely use steps or stairs to get into and out of their home or to move between levels of their home.

- Access modifications provide access from the doorway to the nearest point to where a vehicle can reasonably be parked. Funding is not available to provide access to all parts of the home and property.
- The proposed modification should be the most appropriate and cost-effective solution taking into account environmental features in addition to the location of the driveway and car parking area. Environmental considerations include but are not limited to:
  - the slope of the land
  - the total height from the ground to the doorway threshold
  - any drainage or pipe work which may affect placement of the modification, and
  - any potential restriction of access to neighbouring properties.
- Funding is not generally available for modifications to more than one external entrance.
- Where there is already one accessible entrance which meets the person's essential needs to get into the home, the Ministry will not generally fund modifications to an alternative access. This is irrespective of whether the Ministry funded the existing accessible entrance or not.
- There is a maximum funding limit of \$15,334 (GST incl.) available for modifications to provide access to an entrance to the home, or between different floors within the home.



For more information on the EMS Accreditation Framework refer to:  
<http://www.disabilityfunding.co.nz/ems-assessors>



The New Zealand Building Code's Compliance Document for Access Routes<sup>3</sup> states the maximum rise for an accessible stairway is to be 180 mm per step and the minimum tread is to be 310 mm per step. The riser height and tread depth for all steps in one flight should be the same.



Refer to Section 8.2 for more information on the funding limit for access modifications.

<sup>3</sup> Compliance Document for New Zealand Building Code clause D1 Access Routes - Second Edition. Prepared by the Department of Building and Housing.

### i. Easy-steps

Easy-steps are installed over the top of existing steps. Easy-steps decrease the height or rise of each step and also extend the depth or tread, of each step.

Easy-steps are generally installed to allow a person to safely use a walking aid such as a walking frame on steps.

### ii. Ramps

Ramps can be constructed of wood, concrete or aluminium. Wooden and concrete ramps are regarded as permanent solutions. Aluminium ramps are generally modular and can be removed.

In most cases, ramps for people in their own homes should be specified to NZ Standards 4121:2001<sup>2</sup> with a minimum 1 in 12 gradient.

Where there is uncertainty about the person's ability to remain in their home longer than 2 to 3 years, a modular ramp is generally the preferred solution.

### iii. Low rise platform lifts

Low rise lifts have a platform which the person can walk or wheel directly onto. The platform travels vertically to a maximum height of 1.5 metres. Low rise lifts are generally used for external access into the home and are compatible with wheelchair use.

Low rise lifts have options for straight through or 90 degree entry and exit from them.

Regular and heavy duty lifting capacities are available. A heavy duty lift should be considered if the person is likely to be using a power wheelchair in the near future.

Low rise lifts generally also require a custom made level deck between the lift and the entrance. A set of steps is usually also required to allow people who do not need to use the lift to have access to the home in the usual manner.

### iv. Stair lifts

Stair lifts can be used for internal or external access. They can have:

- a seat which the person transfers onto. The seat travels up/down the stairs on a track which can be curved to suit the direction of the stairs. A wheelchair cannot be used on this type of stair lift.
- a platform that the person can go directly onto. These are also known as incline lifts. The platform



The solution of a lift or a ramp will depend on several factors including the person's ability to mobilise on a ramp and the overall height of the rise between the ground and the door threshold. If a ramp requires a resting platform (due to its length) or more than one change in direction, a low rise lift may be a more cost effective solution.



Modular ramps and low rise vertical platform lifts are owned by the Ministry and are removed, refurbished and reissued when they are no longer required by the person. Refer to Section 7.3.2 for return of equipment.



Where part of a ramp or lift exceeds 1.5 m above the ground, a building consent will be required<sup>4</sup>.

<sup>2</sup> NZS4121:2001 Design for Access and Mobility - Buildings and Associated Facilities.

<sup>4</sup> Department of Building and Housing *A guide to building work that does not require a building consent*

travels up/down the internal stairs in the home at the same angle as the stairs. A wheelchair can be used on this type of stair lift.

#### v. Multi-floor platform lifts

Multi-floor platform lifts are enclosed in a shaft. They have a platform which the person can go directly onto. These lifts travel vertically from one level of the home to the next level and are compatible with wheelchair use.

Multi-floor platform lifts are also known as through floor lifts or domestic passenger lifts.

### 6.1.1. Replacement of Access Equipment - Like for Like

Where a low rise lift or a modular ramp has been installed as part of an access modification and the equipment is assessed by a registered equipment sub-contractor or building contractor as being worn beyond economic repair, a like for like replacement will be considered.

The EMS Assessor needs to confirm that the person has an ongoing requirement for the same access solution (ie, that the person's needs have not changed) and will need to consult with an EMS Advisor before requesting the replacement item.

The full cost of replacement and installation of replacement equipment is **not** assessed against the funding limit of \$15,334 (GST incl.). An Income and Cash Asset Test is **not** required and the Prioritisation Tool does **not** need to be completed.

### 6.1.2. Replacement of Access Equipment - change in need

Where there has been an access modification funded previously and a significant unexpected change in the person's need results in a requirement for a different access modification, a re-assessment from an EMS Assessor will be required.

The full cost of replacement and installation of this equipment is assessed against the funding limit of \$15,334 (GST incl.). An Income and Cash Asset Test is required and the Prioritisation Tool needs to be completed.

## 6.2. Other External Modifications

Other external modifications are considered where there are other barriers, in addition to the entranceway, for the person to get into and out of their home from the nearest point to where a vehicle can reasonably be parked.

#### i. Automatic door openers

Automatic door openers are considered where the person:

- o lives alone or is alone for much of the day



The funding limit of \$15,334 (GST incl.) for access modifications applies for all access modifications including high cost lifts such as multi-floor platform lifts and ceiling track hoists to access different levels within the home.



Like for Like means that the same form and function of the equipment item needs to be sought. It does not indicate that the exact make and model needs to be supplied.



If a person has had a low rise lift installed previously but the weight capacity or other specifications of that lift are now insufficient to elevate the person plus their replacement power wheelchair, a reassessment of the person's needs by an EMS Assessor is required. This is not considered to be a Like for Like replacement.

- is unable to enter and exit their home independently due to the inability to operate the door manually and no other equipment or support options are available.

An automatic garage door opener can be considered when the garage is the most cost-effective access into the home.

Funding is not available for an automatic garage door opener when the primary requirement for this is to allow the person to park a vehicle in the garage.

#### ii. Covered transfer areas

A covered transfer area provides shelter for the person when they are transferring in and out of a vehicle. Covered transfer areas are considered for people who:

- take a considerable time to transfer in and out of their vehicle, including stowing their wheelchair or mobility aid
- are at risk of harm if exposed to adverse weather during the time it takes to transfer in and out of their vehicle.

#### iii. External door widening

Widening an external doorway is considered where the doorway is too narrow to accommodate the person's wheelchair, there is no other way of accessing the home and there are no other options to overcome this barrier.

Some external door modifications require a building consent.

#### iv. External linking rails and modifications to existing paths

The provision of external linking rails and modifications to existing paths are considered to provide an accessible route to the home for the person, from the nearest point to where a vehicle can reasonably be parked.

### 6.3. Internal Modifications


#### i. Internal door widening


Widening an existing internal doorway will be considered where the doorway is too narrow to allow access to essential rooms. Widening internal doorways is considered a complex modification when it is likely to involve several doorways, significant building work or relocation of electrical fittings.


Consideration should be given to other more cost effective modification options, such as "hospital hinges", before internal doorway widening is recommended.


#### ii. Wall removal or minor internal redesign


Removal of walls or alteration to corners of adjoining walls are considered for providing access into and between rooms. Consideration will need to be given to the implications (structural and cost) of removing load bearing walls.

 A garage door opener may be a more cost-effective alternative to modifying another entrance in a situation where a person can access the home through the garage.

 For wheelchair users, consideration should be given to the width of the wheelchair before changes to door width are recommended. Different makes and models of wheelchairs may have different overall widths for the same seat size.

 The existing path from the vehicle car parking to the entrance to the home may be widened where it is too narrow to accommodate a wheelchair.

 "Hospital hinges" are designed to allow a door to swing clear of the opening, allowing the widest possible door opening.

 Walls may be removed between bathrooms and toilets to provide accessible bathrooms.



### iii. Ceiling mounted overhead hoists

Ceiling mounted overhead hoists have a track fixed to the ceiling. The person is lifted using a sling attached to a motor unit which can then be moved along the length of the track.

Ceiling mounted overhead track hoists are considered where:

- the person is dependent on a hoist for all transfers, and
- a mobile wheeled hoist is not viable in the space available or does not meet the needs of the person and their carers.

Similar overhead hoist options which do not need to be mounted to the ceiling (ie, they are equipment items, are removable and able to be refurbished and reissued) should be considered first.

Ceiling track hoists which are required to specifically support a person to access different floor levels within their home are regarded as an access modification and subject to the maximum threshold for access modifications.

### iv. Heating, air conditioning and lighting

Housing modifications for heating, air conditioning and additional or specific lighting may be considered where the person's disability related need is over and above that which is normally expected in the home environment.

### v. Level access showers

A level access shower is considered in one or more of the following situations:

- the person is unable to safely use the existing bathing or showering facilities and the use of a more cost effective option such as equipment (eg, a tub transfer bench or a bathlifter) does not meet the person's identified disability related needs
- a minor modification (eg, rails or a shower over the bath) will not meet the person's long term disability related needs
- the need for regular and thorough washing every day due to behavioural, continence and skin integrity issues cannot be achieved using the existing facilities or by any other means
- support people including family, whānau and carers are unable to safely carry out their role to assist the person with personal cares
- other options such as the provision of personal care support or alternative bathing arrangements (eg, showering as part of attendance at a regular day programme) are not viable and will not meet the person's identified needs
- the person is likely to remain living in the home for at



Figure 3: Ceiling Mounted Overhead Hoist



Ceiling track hoists are installed permanently and are not removed for reissue when no longer required.



Portable heating, air conditioning and lighting need to be excluded as viable options before a housing modification can be considered.



A level access shower is where the shower floor is level with the rest of the bathroom floor. The shower area is generally 1200 mm x 1200 mm and slopes four ways into a floor drain. There is a curtain around the sloped area to contain the water.



Where the modification is high cost or complex, evidence of collaboration with the NASC is required, using the [EMS and NASC joint reporting template](#). This collaboration is to ensure that all support options have been considered and the NASC supports the proposed intervention.

least two to three years.

The modification may result in a reduction in the person's support package for personal cares or prevent escalation of, or the need to introduce personal cares.

#### vi. Vanity units and hand basins

A wheelchair accessible vanity or hand basin is considered where:

- the person can independently use the hand basin
- the person can be supported to use the hand basin.

#### vii. Toilets

Generally, funding is not available for an additional toilet. However, an additional toilet may be considered where it is a more cost-effective option than relocating the existing toilet.

#### viii. Bidets

A bidet fits to an existing toilet pan in place of the seat and lid. It connects to the plumbing supplying water to the pan cistern. A bidet, operated by push buttons beside the toilet, provides a wash and dry function, replacing the need to manually wipe after toileting. A remote control option is available.

Installation of a bidet is considered where it can be shown that:

- provision of a bidet would result in the person being able to use the toilet independently and safely, or
- it will significantly reduce the level of paid or unpaid support the person currently receives.

#### ix. Kitchen modifications

Kitchen modifications are considered for a person who lives alone, is alone for much of the day, or is the main carer of a dependent person where:

- the modifications are essential to allow the person to be independent when preparing food and drink, and
- there are no other viable options to meet their disability related needs.

The EMS Assessor, in consultation with the NASC, needs to consider whether kitchen modifications would result in a change to the person's need for support for paid home support. Where there are other family members or support available in the home, consideration needs to be given to the assistance that others can provide with meal preparation.

#### x. Room extensions

Extensions to a bedroom or bathroom are considered where they can be accommodated within the existing structural footprint of the home and no other suitable options are available to meet the person's needs.



Bidets are installed permanently and are not removed and returned when no longer required.



Kitchen modifications include lowering a bench top or providing access to the kitchen sink.



The person's partner or other family or whānau member may be able to assist with the preparation of meals. However, an accessible area may be required to allow the person to prepare snacks and drinks if they are alone for much of the day.



Room extensions may include:

- converting a laundry to a bathroom with a level access shower



Generally, funding is not available for:

- additional rooms outside the existing footprint of the home
- additional bedrooms to a property where this requirement is due to a social need (eg, the number of occupants of the house exceeds recommended bedroom space).

- extending the external wall of a bathroom to accommodate a larger sized level access shower when a person needs to lie on a shower trolley.

#### 6.4. Modifications to support people who have challenging behavior

Housing modifications are considered for people whose challenging behaviour impacts on their safety, placing them or others at risk of harm.

Collaboration is needed to provide a management plan to meet the person's needs. An inter-agency team includes the key people who engage with the person. The team is likely to include therapists, psychologists, behaviour support teams and support agencies such as NASC.

The recommendation for housing modifications must be considered in conjunction with other strategies and interventions to ensure the person is provided with the most cost effective resources to support them in all environments. Strategies such as parent education, respite options and behavioural support programmes need to be considered before solutions based on restricting a person's environment.

For all requests for housing modifications for people with challenging behaviours the Ministry's agreed pathway for the consideration of equipment and housing modifications must be followed.

Typical modifications include, but are not limited to:

- external fencing where the need for fencing is over and above that which is normally required for a person of that age. Fencing can be considered for a small outdoor play area which is visible from the commonly used areas of the home to provide adequate supervision.
- safety glass, where there is a high risk of injury to the person, to windows and glass doors of rooms which are essential for the person to use
- security or stable doors where it is essential to keep the person in a safe environment and/or to maintain their social inclusion and interaction
- reinforcement of walls where the person's behaviour places their personal safety at risk
- window restrainers where it is essential to prevent the person leaving the house unsupervised.



Strengthening Families is an example of a support agency which coordinates support for families/whānau when more than one community support organisation or government service is or could be required. It is set up so families/whānau “tell their story” once to relevant people at the same time.



Where the modification is needed due to challenging behaviour, evidence of collaboration with the EMS Advisor and the NASC is mandatory, using the [EMS and NASC joint reporting template](#)



Construction of barriers to rooms and fencing to the property should not be used as forms of “restraint” to manage challenging behaviour. These modifications can be considered only after less restrictive interventions have been attempted and found to be inadequate.

Locks can be considered when they have been considered within a multi-disciplinary team approach and adhere to the restraint minimisation standards. Funding for locks to internal doors within a home which result in the restraint or seclusion of a person within the room is not available, eg bedroom door.

## 6.5. Construction of new homes

Where a new home is being constructed consideration will be given to contributing towards the additional costs required to accommodate the person's disability related needs where these are over and above standard features. This funding is provided as a Cost Contribution.

The costs need to be itemised to show the comparison between the standard cost and the additional costs related specifically to the person's disability.

Funding is not available for the provision of extra space in the new home as this is considered to be part of the planning a person, or their family or whānau would normally undertake for a new home, for example, allowing for wider hallways or providing additional storage.

New buildings incorporating universal design features, such as level entry into a home and doors of a suitable width, allow homes to be used by all people irrespective of their ability. Built into the initial design, these features will incur minimal, if any, additional cost.



See [New Zealand Standard: Restraint Minimisation and Safe Practice](#)



The difference in cost between standard vinyl and non-slip vinyl will be considered.



For more information on Cost Contribution refer to Section 8.5.



For more information on universal and accessible design go to:

[Lifemark Design Standards](#)

Also refer to BRANZ publication "Homes Without Barriers - A Guide to Accessible Housing"  
<http://www.branz.co.nz>

## 7. GENERAL INFORMATION

Ministry funding for housing modifications is considered where eligibility and access criteria for services have been met. There must be an essential need for and an ability to benefit from the modification and it must be evident that the person is likely to remain living in the home in the long term for at least 2 to 3 years.

The Prioritisation Tool must be completed by the EMS Assessor before either Basic or Complex housing modifications can be confirmed. The outcome of the Prioritisation Tool must be that “Funding is available” before a Service Request can be submitted to the EMS Provider.

All housing modifications for people aged 16 years and over are subject to the outcome of an Income and Cash Asset Test where it is estimated that modifications will cost more than \$8,076 (including GST). This figure includes the cost of any previous modifications funded by the Ministry after the person has turned 16 years of age.

Housing modifications funded by the Ministry are considered to be a permanent alteration to the home unless the modification includes equipment such as a modular ramp which is easily removable and able to be reissued.

All insurance, repairs, maintenance, replacement or ‘removal’ of housing modifications become the responsibility of the property owner.

### 7.1. Housing Advisory Services

Housing Advisory Services, provided by the Ministry’s contracted EMS Providers, offer:

- assistance in exploring all possible options with the EMS Assessor and the person, their family, whānau and support people or agencies as appropriate
- technical support with the scoping design process from a Housing Advisor
- a visiting service in various locations to provide Housing On-Site Visits (at the person’s home) with the EMS Assessor.

Housing Outreach Clinics or On-Site Visits are set up by the EMS Provider in response to one or more of the following:

- the complexities or challenges of the disabled person’s home environment
- complexities in relation to the person’s family or whānau situation
- complexities relating to their disability related needs and impact of their disability on them and their family or whānau (including the likely long-term



Referrals to the Housing Advisory Service can be made by the EMS Assessor at: [housingoutreach@enable.co.nz](mailto:housingoutreach@enable.co.nz) or [emsadvice@accessible.co.nz](mailto:emsadvice@accessible.co.nz)

sustainability of them remaining living in their home).

Housing Advisory Services can provide advice and support in response to an individual request from an EMS Assessor on a case by case basis in the form of Housing On-site Visits.

Where the EMS Assessor requests comprehensive advice and support from the Housing Advisory Service, and a Housing On-Site visit is agreed by the EMS Provider and the EMS Assessor, a visit to the person's home can be arranged with all key parties to facilitate the progression of the most suitable services and supports for the person. Relevant key parties can include, for example, the person's family or whānau, NASC, Behaviour Support personnel, and property owners such as Housing New Zealand.

Housing Outreach Clinics are facilitated by EMS Advisors or Housing Advisors in key centres on a regular basis and in other centres when requested.

The advice and support available through Housing Advisory Services is provided before the decision is made to proceed with a request for housing modifications.

## 7.2. Moving to another home

When choosing to move to another home the person and their family or whānau should, as far as practical and reasonable, choose a house that is already suitable or requires only minimal modifications to meet the person's disability related needs.

Consideration should be given to the likelihood of the person's needs changing in the future.

The Ministry will not consider funding towards modifications to a newly purchased or rented home where the person has knowingly chosen a property unsuited to their disability related needs.

Recommended accessible design features to consider when purchasing a new home include:

- flat section with drive on access
- level entry/minimal steps into the home
- bedroom, bathroom and main living areas on ground level.

## 7.3. Equipment as part of a Housing Modification

Equipment items funded by the Ministry as part of a housing modification can be installed either permanently or on long term loan, depending on the nature of the equipment.

### 7.3.1. Equipment installed permanently

All equipment items that are funded by the Ministry which are



Where a person with a disability is considering purchasing a new home, completing renovations to their existing home or moving to a rental property, it is recommended they consult an occupational therapist for advice before they confirm their decision.



If a person who uses a wheelchair chooses to move into a property which is multi-level, funding will not be available towards the purchase and installation of a lift to transport the person between levels of the home.

fixed permanently to the home as part of a housing modification become a chattel of the home once installed.

Equipment installed permanently includes, for example:

- stair lifts
- multi floor platform lifts
- bidets
- ceiling track hoists.

These equipment items are not removed by the Ministry if or when they are no longer required by the person. All insurance, repairs, maintenance, replacement and removal of this equipment are the responsibility of the person or property owner.

### 7.3.2. Equipment installed on long term loan

All equipment items that are funded by the Ministry and are easily removable and able to be refurbished and reissued to another person remain the property of the Ministry. This equipment is provided on long term loan to the person for as long as they need it. Equipment installed on long term loan includes:

- low rise lifts (up to 1.5 m rise)
- modular ramps

Repairs and maintenance of this equipment is the responsibility of the EMS Provider, but can only be carried out on equipment for the person for whom the item was approved, and at the address at which it was installed. To move or remove equipment which has been installed as part of a housing modification, prior approval from the EMS Provider is required.

When the item is no longer required by the person, it needs to be returned to the EMS Provider. The costs of removal of any equipment components of a modification and to make the area safe are met by the Ministry.

## 7.4. Repeat Housing Modifications

Where the person has already received Ministry funding for housing modifications, they will generally be unable to receive further funding for the same or similar housing modifications in that property or in a new home unless there are genuine and exceptional circumstances.

### 7.4.1. Genuine and exceptional circumstances for repeat funding

Further funding will be considered on a case by case basis in genuine and exceptional circumstances. Examples include, but are not limited to:

- a significant change in the person's disability status



Equipment which remains the property of the Ministry is asset labeled for identification and tracking.



For repairs and maintenance, removal and collection of equipment no longer required contact:

- [info@accessible.co.nz](mailto:info@accessible.co.nz)  
0508 001 002
- [enable@enable.co.nz](mailto:enable@enable.co.nz)  
0800 17 19 81

which has resulted in an unexpected change in their disability related needs

- divorce/change in marital or relationship status that has resulted in the family home being sold as part of a matrimonial or other settlement
- blended families
- forced eviction or relocation from a private rental property following a directive from the property owner
- domestic violence, protection orders or significant threat to personal safety resulting in the person needing to relocate
- natural disaster resulting in the person needing to relocate
- a job change due to company redeployment or redundancy resulting in a confirmed offer of employment in another location
- death or a change of health status of the main carer resulting in a need to relocate
- young adults leaving their parents' or guardian's home for the first time to move into a long term living situation so that they can live as independently as possible
- move to be closer to care, either paid or unpaid.

Advice from Housing Advisory Services is required in such circumstances.

#### 7.4.2. Circumstances not covered for repeat funding

Funding for repeat modifications is generally not considered when a person has moved home for reasons including, but not limited to a move:

- due to personal preference
- for social reasons
- to a smaller home requiring less maintenance or for downsizing purposes
- due to forced eviction from a private rental property where they have been evicted due to willful neglect or damage to a rental property
- to a home that is not suitable to meet their disability related needs.

#### 7.5. Funding in Shared Care Circumstances

Where a dependent person is living in two homes on a regular basis, they can be described as living in shared care. This situation may occur where:

- a child is regularly living in the homes of separated parents



An example of a change in disability status is where a person who had previous funding for easy-steps has now become a wheelchair user resulting in a changed need and a requirement for a ramp to allow wheelchair access to their home.



An elderly parent moving to live with family as an alternative to residential care.



A move due to personal preference includes moving to a bigger home to accommodate the number of people living in the home.



Funding is not available for access modifications to a new home where the person has purchased a multi-level property with the knowledge that they have a progressive mobility impairment.



Examples of living in two homes on a regular basis include where a person is living 3-4 days per week in each home or alternate weeks in each home, as a long term arrangement.

- there is a foster care arrangement
- an elderly relative is living with different family members who provide care.

Requests for housing modifications to two properties in a shared care situation are considered on a case by case basis to support the person, their families, whānau and caregivers in both homes. Advice from an EMS Advisor is required in such circumstances.

Consideration should be given to the sustainability of the shared care arrangement to clarify that it is likely to be of a long term nature lasting 2 to 3 years or more.

### 7.6. Requests for Additional Funding or Variations to Approved Modifications

Additional funding and/or variations to approved modifications are considered by the EMS Provider on a case by case basis.

- Requests need to be made in writing to the EMS Provider, itemised clearly with supporting rationale and an estimate of costs.
- The EMS Assessor needs to confirm that the changes are appropriate and that they will meet the person's essential disability related needs.
- The person and the property owner needs to indicate their agreement to the changes in writing and by initialising revised plans and specifications.
- Where variations are cost neutral and are supported by the EMS Assessor, the variation is likely to be approved by the EMS Provider.
- Where variations lead to an increase in the estimated cost of the modifications, there may need to be a re-assessment of the financial assistance the Ministry is able to provide. This may involve the need for an Income and Cash Asset Test.
- If variations to the approved modifications are undertaken without written approval from the EMS Provider or the person is not eligible to access funding for such modifications, these costs will be the responsibility of the contractor, person or property owner.

This does not include people living in residential care where their living arrangement comprises full-time, ongoing support.



The provision of suitable equipment and other supports to meet the person's disability related need should be considered before housing modifications in both homes.



For further information on Income and Asset Testing refer to Section 8.3.



## 8. FUNDING

### 8.1. Levels of Funding

Ministry funded housing modifications, subject to the outcome of the Prioritisation Tool being that funding is available, are provided according to the following levels of funding :

**i. Less than \$200 (GST incl.)**

Funding is not provided for housing modifications which cost less than \$200 (GST incl.).

**ii. Between \$200 (GST incl.) and \$8,076 (GST incl.)**

Housing modifications which cost between \$200 (GST incl.) and \$8,076 (GST incl.) are considered for eligible people and an Income and Cash Asset Test is not required. Included in this estimated cost is the value of any previous Ministry funding provided to the person for housing modifications, either in their current or a previous home, after they have turned 16 years of age.

**iii. Over \$8,076 (GST incl.)**

Housing modifications which are likely to cost more than \$8,076 (GST incl.) are considered for eligible people. The level of funding available from the Ministry is subject to the outcome of an Income and Cash Asset Test, administered by Work and Income, where the person is 16 years of age and over.

Included in this estimated cost is the value of any previous Ministry funding provided to the person for housing modifications, either in their current or a previous home, after they have turned 16 years of age.

**iv. Over \$28,750 (GST incl.)**

The Ministry's EMS Review Panel is required to review all proposals where housing modifications costing more than \$28,750 (GST incl.) [\$25,000 (GST excl.)] are being considered. This amount includes the cost of any previous modifications to the person's current or previous home which have been funded by the Ministry.

These proposals will be reviewed by the Panel before the Prioritisation Tool has been completed and before a Service Request is submitted to the EMS Provider.

### 8.2. Funding for Access Modifications

Funding to a maximum threshold of \$15,334 (GST incl.) is available for access modifications to enable a person to get into and move between levels of their home.

- This maximum threshold applies to all requests,



Funding for all housing modifications is only provided when the outcome of the Prioritisation Tool determines that funding is available.



For more information on the EMS Review Panel, refer to Section 12.



irrespective of the person's age.

- The maximum threshold only relates to access modifications; it does not apply to other types of internal modifications to a person's home such as widening internal doorways or bathroom modifications.
- The costs included within the \$15,334 (GST incl.) maximum threshold are:
  - the value of any previous Ministry funding for access modifications for the person at their current residence.
  - all building and installation costs
  - any associated building consent fees.
- The value of an equipment item such as a low rise lift and modular ramp is **not** included as a cost within the maximum threshold as it can be removed, refurbished and reissued when it is no longer required.
- Where the total cost of the access modifications exceeds \$15,334 (GST incl.), the agreed maximum amount will be paid by the Ministry as a Cost Contribution.
- The level of funding available is subject to the outcome of an Income and Cash Asset Test, administered by Work and Income, where the person is 16 years or over and the modification is estimated to cost more than \$8,076 (GST incl.). This figure includes the cost of previous modifications which have been completed after the person has turned 16 years of age.
- For access modifications, the Income and Cash Asset Test establishes the amount of funding, if any, the person may receive for the amount between \$8,076 (GST incl.), and \$15,334 (GST incl.). The value of equipment that can be reissued is not included in the value of the modifications for the Income and Cash Asset Test.



Examples of access modifications to get into the home or move between levels of the home include:

- railings beside steps and stairs
- ramps
- low rise lifts (up to 1.5 m rise)
- stair lifts
- through-floor lifts.



A building consent is approval granted by the building consent authority (usually the local Council) to a property owner undertaking building work to ensure all work complies with relevant building codes.



Refer to Section 8.5 for more information on Cost Contribution.

### 8.3. Income and Cash Asset Test

An Income and Cash Asset Test is an assessment of the income, cash assets and expenses of:

- the person; and
- their spouse or partner; and
- the property owners (when they share the same property and live with the person).

#### 8.3.1. Indicators for an Income and Cash Asset Test

The person is required to have an Income and Cash Asset Test to determine the level of funding, if any, they may be able to receive where:

- the total estimated cost of the housing modifications, including the value of any previous modifications, is more than \$8,076 (GST incl.), which have been completed after the person has turned 16 years of age, and
- the person is 16 years of age or over.

The requirement for an Income and Cash Asset Test will be established by the EMS Provider, after they have received a Service Request. The requirements for the Test must be completed by the person to allow the request for housing modifications to progress.

If a person chooses not to have an Income and Cash Asset Test they will need to inform the EMS Provider, in writing, of their decision. In this case, Ministry funding towards the cost of the housing modifications would be limited to a maximum of \$8,076 (GST incl.). Where the person does not agree, in writing, to be responsible for any additional costs, the Service Request cannot proceed.

### 8.3.2. Valuing Modifications for an Income and Cash Asset Test

For the purposes of estimating the value of housing modifications for an Income and Cash Asset Test, the following costs are included:

- the value of any previous Ministry funding provided to the person for housing modifications, either in their current or a previous home, after they have turned 16 years of age
- the estimated cost of the proposed modifications
- any associated building consent fees
- any associated consultant fees
- the cost of installing any equipment which is part of the housing modification (whether the equipment is able to be removed or is to be installed permanently).



Refer to Section 7.3 for more information on equipment installed as part of modifications.

### 8.4. Part Payment by the Person

Where Ministry funding for the full cost of the housing modifications is not available, the person, their family or whānau will be responsible for payment of the balance. This is referred to as a Part Payment by the person and may occur where:



A Part Payment is the amount it has been agreed that the person will pay towards the cost of the housing modifications. This part payment forms a separate private contract between the person and the contractor.

- the outcome of an Income and Cash Asset Test indicates that the level of funding they can receive is less than the estimated total cost of the housing modifications, or
- the person chooses not to have an Income and Cash Asset Test and the cost of the housing modifications, including the cost of any previous modifications, is greater than \$8,076 (GST incl.).

Where a Part Payment is required, the person must agree, in writing, to cover this cost before the modifications can proceed. The person will be responsible for paying the balance directly to the contractor. This will be done as an agreed contractual arrangement with the contractor.

The Ministry and EMS Provider are not responsible for the resolution of any disputes between the person and their contractor related to the balance of the Part Payment owed by the person.

### 8.5. Cost Contribution by the Ministry

A Cost Contribution is an amount the Ministry has agreed to pay towards part of the total cost of a housing modification when the property owner wishes to do one of the following:

- Undertake additional work on their property over and above the extent of the modifications which have been recommended by the EMS Assessor as being essential to meet the person's disability related needs.
- Use their own building contractor, who is not contracted by an EMS Provider, to complete the modifications. In some circumstances the property owner may be a qualified tradesperson who wishes to undertake the work themselves.
- Renovate or build a new home incorporating certain features to meet the person's disability related needs.

The level of the Cost Contribution from the Ministry is based on the costs associated with the approved solution to meet the person's disability related needs, as recommended by the EMS Assessor. The Cost Contribution amount is based on standard industry rates for materials and labour.

#### 8.5.1. Conditions for a Cost Contribution

- The total value of the modification must be greater than \$1,000 (excl. GST).
- The agreed Cost Contribution can only be used for the housing modifications which have been recommended by an EMS Assessor.
- Where the property owner wishes to use their own design and specifications, the plans and information on what the property owner intends to use the Cost



Additional work may be remedial or cosmetic work or installation of new fixtures or fittings which are not essential to meet the person's disability related needs (eg, a bath in a bathroom where a level access shower is proposed and there is space for a bath without compromising the design and use of the shower).



When the Cost Contribution is being used towards a newly built home, the amount of the Cost Contribution is based on the cost difference between standard materials or design and what is required to meet the person's disability related need (eg, standard vinyl vs non slip vinyl). There is often minimal cost difference.

Contribution towards must be provided to the EMS Provider. The EMS Assessor needs to confirm that the property owner's preferred solution will meet the long term needs of the person and their support people.

- The person is required to have an Income and Cash Asset Test where they are 16 years of age or over and the estimated value of the proposed housing modifications is over \$8,076 (GST incl.). This includes the sum of any previous Ministry funded housing modifications provided to the person after they have turned 16 years of age.
- After the level of Cost Contribution has been calculated by the EMS Provider, the property owner is offered this amount of funding. They must accept the Cost Contribution offer in writing before the modification can proceed.
- The property owner is responsible for all contractors they engage and has full responsibility for the project management of the housing modification. This includes the drawing of plans, specifications, building consent (for the additional work), building work, inspections, payment of costs and management of disputes.
- The agreed contribution from the Ministry will be paid to the property owner following completion of the work and on receipt of:
  - declaration from the person stating the work has been completed
  - the Consent Compliance Certificate (if relevant)
  - declaration from the EMS Assessor that the modifications have been completed as agreed and meet the person's identified disability related needs.
- The entire Cost Contribution may not be paid if only part of the approved solution is completed.



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The EMS Assessor needs to discuss with the property owner the option of Cost Contribution before a request is made for funding. If the property owner wishes to follow the Cost Contribution process, this must be indicated when the Service Request is submitted to the EMS Provider. It is generally not possible for a person to request the Cost Contribution process after plans and specifications have been drawn and the job has been quoted.

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## 8.6. Reimbursement

Reimbursement for the cost of housing modifications will be considered by the Ministry's EMS Review Panel on a case by case basis.

The Ministry does not generally provide reimbursement for housing modifications which have been paid for by the person, their family or whānau before a Service Request has been processed and confirmed by the EMS Provider.

However, reimbursement for services which have already been purchased, commenced or completed by a person, their family or whānau before a Service Request has been made to the relevant EMS Provider can be considered in genuine and exceptional circumstances when **all** of the following requirements have been met:

- the person meets the eligibility and access criteria for Ministry funding
- the person's needs have been assessed by an Approved or suitably Credentialed EMS Assessor
- the solution, either fully or in part, has been confirmed by an EMS Assessor as being essential and cost-effective in meeting the person's disability related needs and the outcome of the Prioritisation Tool (if required) is that Ministry funding would be available, and
- the departure from the usual processes for the consideration and provision of the equipment or modifications has resulted in improved long term outcomes for the person and or their family, whānau and support people.
- The usual requirements for Income and Cash Asset Testing (if required) have been met
- All relevant building standards have been met, including meeting the requirements set by territorial local authorities.

If a solution can only be partly supported by the EMS Assessor, the essential and cost-effective elements of the solution will be costed following agreement between the EMS Provider and the EMS Assessor and any reimbursement will only cover the components of the equipment or modifications that they agree to support.

## 9. HOUSING MODIFICATIONS WHICH ARE NOT FUNDED

### 9.1. In relation to the person's situation and needs

Funding for housing modifications is not available through the Ministry for a person where:

- they do not have an essential need for, or ability to benefit from, modifications as assessed by an appropriately Approved or Credentialed EMS Assessor
- the outcome of the Prioritisation Tool is that funding is not available
- they do not meet the criteria for accessing housing modifications as defined in this manual
- they are unlikely to remain in the home that is proposing to be modified in the long-term, for at least 2 to 3 years
- their needs arise primarily from:
  - a disability or condition that is unlikely to last more than six months (eg, short term needs pre or post-surgery)
  - conditions in the palliative stage
  - social or economic reasons (e.g. overcrowding)
  - a chronic health condition, unless the person is eligible for funding under Long Term Supports – Chronic Health Conditions.



Refer to Section 10.1.1 for further information on Long Term Supports - Chronic Health Conditions.

### 9.2. In relation to the person's home

Funding for housing modifications will not be considered in circumstances where:

- the proposed modifications are minor and it is anticipated their cost is likely to be less than \$200 (GST incl.)
- it is not considered cost effective to proceed because alternative support options or relocation to a more suitable home would be more appropriate
- the long term sustainability of the person remaining living in their home for at least 2-3 years cannot be supported
- rectification work is required to allow the housing modifications to be undertaken or completed. Rectification or remedial work is the responsibility of the property owner and must be completed before funding can be made available
- the modifications are intended to provide:
  - therapy facilities or to enable treatment, management or relief of a medical or surgical condition



For example, replacement of rotten or water damaged floorboards, upgrading of plumbing facilities to accommodate installation of a tempering valve



Housing modifications for therapeutic purposes would include access to a bath for the person to be immersed in water, in order to manage chronic pain or skin

- basic amenities or services that would be expected in a standard home, such as running water, changes to water temperature or pressure, plumbing, electricity or an indoor toilet
- soft furnishing or fittings to a home that would be expected in a standard home, such as curtains, light fittings, oven, heating, etc.
- additional storage or cupboards.
- a property does not meet Building Code or does not have a permit (where a building consent is required to complete the modifications). The registered property owner is responsible for complying with the relevant Building Code and to have the necessary building permits.

### 9.3. Access Modifications

Funding for access modifications is not available for:

- covered areas for an external ramp, low rise lift or car parking area, including garaging or a car port
- the creation of or concreting of driveways or paths
- modifications to shared or common land which is not wholly owned by the property owner.

### 9.4. Other Buildings

Funding is not available for modifications to the following:

- a work place, including modifications to enable the person to undertake self-employment based in their home
- educational settings
- rest homes, private hospitals, community homes and other residential care settings
- public buildings and facilities such as schools, public hospitals and community recreation facilities
- properties where the person has a 'licence to occupy' (within a Rest Home or Retirement Village or similar complex) or similar agreement which restricts the conditions of future sale within a retirement village or similar complex.

conditions.



Where it has been necessary to remove a cupboard, consideration will be given to replacement of storage space on a same or similar basis.



Where the most cost effective way of installing a level access shower means removing an existing bath which the property owner wishes to retain, the property owner is responsible for any additional costs incurred in relocating or retaining the bath.



In some circumstances funding may be available for a covered transfer area. Refer to Section 6.2.



Common or shared land includes Council land or communal land such as shared driveways.



A licence to occupy is an agreement between a person and a residential care provider which generally requires the person to pay a lump-sum payment for the right to occupy a specific unit or apartment, additional monthly payments for communal expenses and services received and also includes termination conditions.



Council, Housing New Zealand or Kaumatua homes are sometimes designed and built to meet the specific needs of tenants. Housing modifications will not generally be provided for such houses.



## 10. OTHER FUNDING OPTIONS

### 10.1. Ministry of Health - other supports

Equipment and modifications are one of many support options funded by the Ministry. Provision of equipment or modifications should be considered along with the availability of other funded and non-funded supports that make up a person's support package.

#### 10.1.1. Long Term Supports - Chronic Health Conditions funding

Long Term Supports – Chronic Health Conditions (LTS-CHC) funding, managed by DHBs, funds long term support services for eligible people under 65 years of age and needing ongoing support services as a result of **chronic health conditions**. People eligible for LTS-CHC are neither eligible for the Ministry's Disability Support Services nor for other DHB funded long term supports (eg, for older people). This funding is targeted towards people with very high needs.

A chronic health condition is:

- either a progressive health condition where the person has a functional impairment that is expected to last for at least six months or to increase over time as a direct result of the condition
- or a health condition lasting at least six months where the person's level of functional impairment can be ameliorated by periodic or ongoing treatment (drugs, therapy, surgery, etc)
- and the impairment resulting in the need for support does not meet the Ministry funder's definition of a disability.

**Very high needs** is where the person requires assistance with activities of daily living at least daily to remain safely in their own home or needs residential care. The person's wellbeing and functional status is deteriorating, their needs are increasing and safety issues are becoming apparent. They have limited opportunity to participate in age appropriate activities.

The person with very high needs is assessed as requiring support daily but some or most of the support may be provided by family, whānau or friends. The LTS-CHC funding would provide any additional formal supports if these were not being supplied through other means.

To access funding for housing modifications through LTS-CHC, the person needs to have:

- been identified by their local DHB NASC as being eligible for LTS-CHC funding, and
- had an assessment by an EMS Assessor who has



A support package is developed by the Needs Assessment and Service Co-ordination (NASC) (See Section 2.1.2) organisation with input from the person, their family, whānau and support people and may include personal care support, home support, carer support, or respite care.



LTS-CHC funding is targeted towards people who have very high needs for long term support services. The majority of people who meet the criteria will have more than one chronic health condition.



identified that the person has an essential need for, and ability to benefit from, the modification, and the outcome of the Prioritisation Tool has indicated that funding is available.

Requests for equipment and modifications for eligible people under the LTS-CHC funding stream are considered in the same manner as other requests for equipment and modifications.

The recommendation for modifications needs to be considered within the person's overall support package, in consultation with DHB NASC personnel. The EMS Assessor will need to obtain written documentation from the DHB NASC service confirming that the person is eligible to access funding through LTS-CHC before a request for housing modifications can be made from this funding stream.

### 10.2. Accident Compensation Corporation

Accident Compensation Corporation (ACC) provides housing modifications, equipment and services for people who are entitled under the Accident Compensation Act 2001.

### 10.3. Ministry of Education

Modifications to educational facilities to meet the educational needs of students in compulsory education are the responsibility of the Ministry of Education.

### 10.4. Veterans' Affairs New Zealand

Veterans' Affairs New Zealand provides advice and facilitates the delivery of a range of services to veterans and their families. Case managers connect veterans and their families to appropriate existing publicly funded health and disability services within the community that best address their needs and assist with improving and maintaining their quality of life.

The case manager will facilitate access to the entitlements that are available through the social assistance and war pensions' framework and also make recommendations for the use of Veterans' Affairs New Zealand funding in situations where the need is urgent and no other service is available.



EMS Assessors need to clearly identify on a Service Request if a person is eligible for funding for EMS services under LTS-CHC funding.



For further information contact regional branch offices or:  
Call Free: 0800 101 996 (claim enquiries)  
Website: [www.acc.co.nz](http://www.acc.co.nz)



Refer to <http://www.moh.govt.nz>  
Search for therapy and assistive technology/equipment operational protocols



Where a person may need to contribute towards the cost of the housing modifications, Veterans' Affairs may consider paying these costs on behalf of the person.



Phone: 0800 4 VETERAN (4838372)  
Email: [veterans@xtra.co.nz](mailto:veterans@xtra.co.nz) or [www.veteransaffairs.mil.nz](http://www.veteransaffairs.mil.nz)

## 11. ROLES AND RESPONSIBILITIES

The consideration and provision of housing modifications involves a number of different people and agencies. Their responsibilities are outlined below.

### 11.1. The person and their family or whānau:

The person, their family or whānau will:

#### i. During the assessment

- Participate in an assessment with an EMS Assessor.
- Consider, with the EMS Assessor, a range of options to determine the most appropriate and cost effective solution to meet their disability related needs.
- Work together with the EMS Assessor (and the EMS Advisor or Housing Advisor and other key people where required) to agree on a possible solution to meet the identified disability needs if it is determined that a housing modification is the most appropriate option.
- Complete the Impact on Life questionnaire as part of the EMS Prioritisation Tool and give to the EMS Assessor.
- Discuss the proposed modifications, as indicated on the concept sketches drawn by the EMS Assessor, with the property owner if the person is not the owner of the property. Seek written permission from the property owner (if residing in a private rental property) for the proposed modifications to be carried out.
- Read, complete, sign and return any forms, plans or additional documentation required (for example, regarding Part Payment or Cost Contribution) in order for the request for funding to progress. Seek clarification from the EMS Assessor if necessary.
- Choose to undertake an Income and Cash Asset Test, if required, and complete the documentation required for this process.
- Contact the EMS Assessor, their service manager or supervisor if dissatisfied with any part of the assessment process.



Other options may include different ways of doing activities, using equipment, getting support from another person (paid or unpaid) or considering moving to a more suitable home.



The Impact on Life questionnaire is a key part of the EMS Prioritisation Tool that the person is required to complete. This asks the person to answer 5 questions about the current impact of their disability on their life and forms part of the Prioritisation Tool which determines whether funding is available or not for the proposed housing modifications.

If the person is unable to complete the questionnaire on their own a family or whānau member or other key support person may assist them to do this.

#### ii. During and on completion of the modifications

- Liaise with the consultant or building contractor to agree access to the home and to arrange a start date, the schedule and time frame of the work.
- Make arrangements for alternative accommodation if this is required while the modifications are in progress. The NASC may be able to assist the person and their family or whānau with making these

arrangements.

- Inform the consultant, building contractor or EMS Assessor of any issues or concerns with the work in progress or when it is completed. If these issues cannot be resolved, contact the EMS Provider directly.
- Discuss the outcome of the completed modifications with the EMS Assessor, participating in a reassessment of needs for further services or support if required.
- Complete any documentation required on completion of the modifications, (for example, if there has been a Part Payment or Cost Contribution agreement).

## 11.2. The property owner

The property owner may be the person with a disability, their family or whānau, a foster family, a private landlord, Housing New Zealand Corporation (HNZC), the local council or an organisation such as a charitable trust.

### The property owner will:

#### i. During consideration of the modifications

- Review and discuss the plans and specifications of the proposed housing modifications with the person (where the person is not the property owner), their family or whānau and the EMS Assessor as required. Ensure a clear understanding of the scope of works and the process involved, seeking clarification as needed.
- Provide written agreement for the proposed housing modifications to be carried out.
- Discuss and agree with the building contractor, before the start of the housing modifications, the method of construction and disposal of any fixtures, fitting or materials that will be removed during the course of the modifications.
- Confirm with the building contractor any items they wish to retain, that will need to be removed during construction.
- Agree with the building contractor the extent to which they will 'make good' the immediate areas where fixtures, fittings, walls, floors, etc, surrounding the modifications have been affected.
- Discuss with the building contractor any issues identified regarding potential rectification work required before the modifications.
- Agree in writing to be responsible for managing the building process and costs where a Cost Contribution from the Ministry has been agreed upon.
- Negotiate and agree a separate contract with the



The property owner is the person registered on the local authority rates invoice.



Where there are multiple owners, such as Trusts, Body Corporate or cross lease arrangements, all parties (or a legal agent who is appointed to sign on their behalf), must be aware of and agree to the proposed modifications. Confirmation of agreement must be provided in writing before the modifications can be confirmed.



HNZC will confirm in writing its agreement to modifications being undertaken in properties it owns. The EMS assessor will be responsible for obtaining property owner approval from HNZC using the approved pathway and using the approved form.

building contractor in circumstances where a Part Payment by the person or Cost Contribution from the Ministry applies.

## ii. During the modifications

- Complete any rectification work, at their own expense, to allow the housing modifications to proceed or progress (for repairs that are uncovered during the housing modifications). This may include but not be limited to:
  - replacement of rotten framing or lining
  - upgrading electrical, plumbing, water or sewerage systems
  - work required to bring the building to a minimum Building Code standard.
- Be responsible for insurance, repairs (after the maintenance period has expired), maintenance and replacement of the housing modifications or equipment items where these have been permanently fixed to the property.

The maintenance period is a 3 month time frame which allows for identification of any defects in materials or workmanship of the completed modifications.

- Be responsible for any of the additional costs associated with redecorating the surrounding area over and above 'make good'. If engaging the building contractor to carry out further work, this will need to be a separate, private contract.

## iii. On completion of the modifications

- For any modifications requiring a building consent, ensure that all requirements are met to enable the Consent Compliance Certificate to be obtained (eg, provision of a smoke detector).

## 11.3. The EMS Assessor

### The EMS Assessor will:

- Be responsible for participating in training and development activities, as available and as appropriate, to ensure they have the skills and knowledge to competently carry out assessments for, and recommend, housing modifications funded by the Ministry.
- Meet the requirements of the EMS Assessor Accreditation Framework to attain the appropriate level of accreditation to complete assessments and requests for housing modifications.



During the maintenance period, the building contractor will be given the opportunity to remedy any defects. The maintenance period starts from the date of completion of the modifications.



'Make good' means the cost-effective repair and finishing of the work to the pre-existing standard. For example, where a doorway has been widened, the new door frame will be painted and the surrounding wallpaper or paint work will be repaired to match existing as far as reasonable.



A Consent Compliance Certificate is issued by the local authority after a final inspection has been completed by a Building Inspector to certify the work complies with the NZ Building Code. A Consent Compliance Certificate can only be issued when a Building Consent has been issued.



Service Requests for housing modifications will only be accepted from an EMS Assessor who holds the relevant category of accreditation or credentialing.

**i. During the assessment**

- Work with the person, their family, whānau and relevant support people to assess the person's functional abilities, limitations, disability related needs to determine the desired outcomes for them in their home environment.
- Discuss with the person, their family, whānau and relevant support people a range of options (including equipment, paid and unpaid natural support and moving to a more suitable home) to determine the most cost effective solution to meet their essential disability related needs.
- Determine whether the person meets eligibility and criteria to access Ministry funded housing modifications, if this is considered to be the most appropriate solution to meet their needs.
- Collaborate with the NASC to:
  - achieve an alignment between the person's needs and goals and the services provided
  - jointly discuss the appropriateness and cost effectiveness of the different options as described in the Practice Guideline
  - identify instances where collaboration with the NASC is mandatory or flexible and complete the EMS and NASC Joint Report where appropriate
  - identify instances where the person may be eligible to access funding through LTS-CHC.
- Discuss the EMS Prioritisation Tool with the person, their family, whānau and relevant support people as appropriate and introduce the Impact on Life questionnaire.
- Ensure the person and other relevant people are fully informed regarding:
  - the Ministry's eligibility for services, criteria for accessing services, funding levels and options, including payment by the person and funding contributions by the Ministry
  - the Ministry's requirement for the most cost effective solution to meet the person's needs related to their disability to be recommended
  - the agreed solution identified to meet the person's essential disability related needs
  - the process for considering Ministry funding for housing modifications and the prioritisation of services, including the requirements for income and cash asset testing
  - other options if the person is unable to access



For information about the EMS Assessor Accreditation Framework see the glossary or go to: [www.disabilityfunding.co.nz/ems-assessors](http://www.disabilityfunding.co.nz/ems-assessors)



Consultation with an EMS Advisor is mandatory in certain circumstances. This consultation should occur during the consideration of solutions, **before:**

- the final decision has been made about the most appropriate solution
- the EMS Prioritisation Tool has been completed, and (if funding is available)
- a Service Request has been submitted to the EMS Provider



Refer to: [Practice Guideline: Interface between NASC and EMS Assessors and Providers](#)



For the EMS and NASC Joint Report Form go to: [Enable New Zealand - Forms](#) or [Accessible - Forms](#)

funding support from the Ministry

- how the proposed housing modifications will work and how the changes will affect all members of the person's household.

## ii. During the consideration of housing modifications

- Seek advice, guidance and support from the EMS Advisors and Housing Advisors where the modifications are complex or specific issues are present. This could involve referral to a Housing Outreach Clinic which may include an onsite visit to the person's home to explore all options and solutions.
- Seek peer review from colleagues to ensure the consistency and quality of decisions and recommendations.
- When the decision has been made to progress with housing modifications, complete the requirements to request the housing modification, following the processes outlined by the EMS Provider.
- Complete the EMS Prioritisation Tool which will determine whether funding is available or not for the proposed solution.
- Complete concept sketches and schedules, as required by the EMS Provider, which accurately reflect the existing environment and the proposed modifications.
- Assist the person with obtaining approval from the property owner for the proposed modifications to proceed if necessary (eg, approval from family member, private landlord, Housing New Zealand or local Council).
- Agree on the detailed specifications with the building contractor (for Basic Housing Modifications), the person and property owner.
- Consider the potential impact of the proposed modifications on the home environment.
- Confirm in writing that the person's own preferred design or specifications will meet their assessed needs related to their disability in situations where people are seeking a Cost Contribution from the Ministry because they are:
  - completing their own housing modifications, renovations or a new build, or
  - using their own building contractor.



In certain circumstances consultation with an EMS Advisor is considered mandatory.



Where the EMS Assessor is unable to support a housing modification that the person, their family or whānau, wants this needs to be discussed with the EMS Advisor. The EMS Assessor may:

- arrange an on-site visit, or
- work with the EMS Advisor to facilitate a Housing Outreach Clinic with all key stakeholders



Concept sketch plans indicate the extent of the proposed work based on the person's needs identified by the EMS Assessor. A floor plan showing the existing layout and a floor plan showing the proposed new layout, with dimensions, are required. These plans are not expected to be scale drawings, however a sense of proportion assists with visualising the proposal.



### iii. During the modifications and when they have been completed

- Liaise with the person, family, whānau, caregivers, support people, property owner, building contractor or consultant as required. Confirm specifications as requested to ensure the person's individual needs will be met.
- Complete an onsite visit while the modifications are in progress where it is practical and reasonable to do so.
- Complete a final inspection of the housing modifications and confirm that the person's disability related needs have been met. Review the need for any further services or support.
- Provide written confirmation to the EMS Provider that the person's disability related needs have been met where there has been a Cost Contribution.
- Ensure the person, their family, whānau and/or support people are informed about all aspects of the housing modifications. This includes the operation and maintenance of any equipment included in the modifications and the process for return of any equipment items when/if they are no longer required by the person.



Further needs or support could include a shower chair to use in a newly completed level access shower or a referral to NASC to confirm a reduced need for personal care support.

## 11.4. Employers, Supervisors or Professional Leaders of EMS Assessors

### Employers, Supervisors or Professional Leaders of EMS Assessors will:

- Support training and learning opportunities for the EMS Assessor to gain the knowledge, skills and experience to attain competence and accreditation as an EMS Assessor for housing modifications.
- Verify that the EMS Assessor has the appropriate accreditation or credentialing status to undertake assessments for and submit Service Requests for housing modifications.
- Support peer review processes to ensure appropriateness, consistency and quality of assessments and recommendations made by EMS Assessors.
- Arrange for a second opinion/assessment from another EMS Assessor where this has been requested by the person, their family or whānau.
- Follow up where concerns have been raised by an EMS Provider about the quality of specific or successive Service Requests submitted by an EMS Assessor.



## 11.5. EMS Providers

### The EMS Providers will:

- Provide education and advice to EMS Assessors to support their overall professional and skill development.
- Provide feedback to EMS Assessors and their supervisors regarding their utilisation of Ministry funded housing modifications and follow up with those EMS Assessors whose service utilisation is above the average of their peers.
- Administer Ministry funding within allocated budgets and in a way that ensures that people who have the greatest need and ability to benefit from the equipment or modifications have access to services first.

#### i. During the consideration of housing modifications

- Provide support and education to EMS Assessors through Housing Advisory Services including, but not limited to:
  - advice on the Ministry's operational policy, funding guidelines, and eligibility and access criteria
  - technical advice on potential solutions to meet a person's needs related to their disability
  - information and advice to guide their decision-making and clinical reasoning when considering the intervention/s that would be the most appropriate to meet the person's needs. This may include the facilitation of Housing Outreach Clinics or on-site visits to the person's home in complex situations.
- Engage a building consultant where complex modifications are being considered and a higher level of technical input is required to inform decision-making.
- Refer individual proposals to the Ministry's EMS Review Panel for a decision where:
  - the estimated cost of the proposed housing modifications is over \$25,000 (excl. GST)
  - clarification of the Ministry's policy is required, or
  - a person is seeking reimbursement for services they have already completed.

#### ii. Following Receipt of a Service Request

- Acknowledge receipt of Service Requests to EMS Assessors within 3 working days of receiving them.



Note that it is a mandatory requirement for EMS Assessors to consult with EMS Advisors or Housing Advisors during the consideration of most complex housing modifications.



Proposals will be sent to the EMS Review Panel before the Prioritisation Tool is completed and before a Service Request is submitted by the EMS Assessor to the EMS Provider

- Review the technical aspects of the proposed housing modifications and engage expert input and advice from a consultant where this is indicated. This may include a request for detailed plans and specifications for the modifications to fulfill local authority consent processes.
- Consult with the EMS Assessor if any technical challenges are identified with the proposed housing modifications which could interfere with their ability to be completed.
- Facilitate the Income and Cash Asset Testing process if this is required.
- Confirm in writing with the person the amount of Ministry funding that they are able to receive towards the cost of the housing modifications where they are completing their own renovations or new build, or using their own building contractor.
- Engage a building contractor to complete the work.
- Respond to complaints using the organisation's complaints processes.
- Maintain up to date records of housing modifications for each person.

### iii. During the building work

- Respond to any issues which arise during the building process, facilitating resolution where a dispute has arisen.

### iv. On completion of the modifications

- Notify the EMS Assessor when the work has been completed.
- Process the Cost Contribution payment to the person on receipt of the necessary documentation in accordance with best business practice.

### v. Management of building contractors and consultants

- Maintain a list of approved building contractors and consultants and undertake quality monitoring and review of housing modifications completed by them.
- Engage a consultant, where necessary, to provide expert advice on the feasibility of proposed plans as recommended by the EMS Assessor and to prepare detailed plans and specifications for the housing modifications.
- Engage a building contractor to undertake the housing modifications as soon as possible after the all aspects of the Service Request have been confirmed.



Plans and specifications drawn by the EMS Assessor are expected to be a "concept sketch" drawing showing the existing area, the proposed housing modification solution plus a schedule of work. The extent to which detailed plans and specifications are required from a designer will depend on the complexity of the proposed housing modifications and whether or not a building consent is required.



Technical challenges could include:

- Unconsented buildings
- Property ownership or boundary issues.



Consultants may be engaged by the EMS Provider to provide technical advice and complete the drawings for housing modifications which require a building consent application. A consultant may be an architect, architectural designer, draughtsperson, engineer or quantity surveyor.

- Undertake audits of housing modifications as required by the Ministry or where concerns have been raised by the person, or the EMS Assessor.

### 11.6. Needs Assessment Service Co-ordination

- Collaborate with the person, their family or whānau, the EMS Assessor and the EMS Advisor to ensure that there is an alignment between the person's identified needs and goals and the support package and services provided.
- Jointly discuss with the EMS Assessor the appropriateness and cost effectiveness of the different options to meet the person's disability related needs, as described in the Practice Guideline.
- Identify instances where collaboration with the EMS Assessor is 'mandatory' or 'flexible' and complete EMS and NASC Joint Report where appropriate.



Refer to Section 2.1 for more information on collaboration with the EMS Assessor.



Refer to: [Practice Guideline: Interface between NASC and EMS Service Assessors and Providers](#)



For the Joint Report EMS/NASC Form go to: [Enable New Zealand - Joint Form](#) or [Accessible - Joint Form](#)

### 11.7. Work and Income

- Conduct an Income and Cash Asset Test when requested by an EMS Provider, where the sum total of the person's past and current requests for housing modifications exceeds \$8,076 (GST incl.).
- When an Income and Cash Asset Test has been completed, notify the relevant EMS Provider in writing of the amount of funding, if any, the person is able to receive towards the cost of the proposed housing modifications
- Follow up with the person, their family or whānau any queries relating to the Income and Cash Asset Test, undertaking a review if requested by the person.



For information on The Income and Cash Asset Test, go to [Work and Income](#)

### 11.8. Designer

#### i. Before the modifications commence

- On request from the EMS Provider, prepare detailed plans and specifications of the proposed housing modifications and options for consideration.
- Submit all plans and specifications for approval to the EMS Provider, with a copy to the EMS Assessor as required.
- Advise the EMS Provider if there is any variation in the plans and specifications from the recommendations which were originally supplied by the EMS Assessor and the reasons for these.



Designers are engaged by the EMS Provider to complete the drawings for housing modifications which require a building consent application. A designer may be an architect, architectural designer, or a draughtsperson.



Plans and specifications may be co-ordinated through a Project Manager.

## 11.9. Project Manager

### i. Before the modifications commence

- Provide advice to the EMS Assessor and work together with them, the person and their family or whānau, to determine the most cost effective solution which meets the person's identified needs when complex modifications or situations are evident.



Project Managers are engaged by the EMS Provider. A consultant may be a building contractor, engineer, project manager or quantity surveyor.

### ii. Project management

- Provide options for scopes of work and estimates when requested by the EMS Provider.
- Obtain fixed price quotes based on the approved plans and specifications when requested by the EMS Provider.
- Facilitate a tender process where relevant and advise building contractors of the outcome of this process.
- Arrange the necessary building consent at the start of the building process and the Consent Compliance Certificate for the property owner on completion of the work.
- Negotiate a timetable of the approved work between the person, the property owner and the building contractor and advise the EMS Assessor.
- Follow the processes set by the EMS Provider and provide documentation as required.
- Monitor and inspect the building work as it progresses and ensure that any documentation required is completed at the conclusion of the work and quality standards are met.
- Where applicable, assist in the resolution of any disputes between the person and the building contractor.



Project management may be required due to the complexity of construction or other specific circumstance. It may include the provision of technical advice, facilitating tenders or quotes, supervision of the building work, gaining building consent and verifying that the work has been completed to specification.

## 11.10. Building Contractor

- Act in accordance with relevant codes of conduct and good business practice in all dealings with the person, their family, whānau and support people.
- Ensure that at all times any information regarding the person, their family, whānau and support people is held in the strictest confidence and their privacy is maintained.
- Make no approach to the person, their family, whānau or support people for the purpose of obtaining additional work.
- Liaise with the EMS Provider as required.



The EMS Provider maintains a list of building contractors who are approved to provide housing modifications within a set standard of work and to agreed specifications.

### **i. Before the modifications commence**

- Discuss with the property owner, person, and/or their family or whānau the specifications of the proposed modifications. Ensure all people are aware of any potential impacts the proposed modifications may have on the surrounding environment or on their responsibility to upgrade existing facilities.
- Provide itemised quotations based on the proposed plans and specifications.
- Discuss and agree with the property owner before the start of the housing modifications the disposal of any fixtures, fitting or materials that will be removed during the course of the modifications.
- Confirm with the person, their family or whānau any items they wish to retain that need to be removed during construction.
- Agree with the property owner, the extent to which they will 'make good' the immediate areas where fixtures, fittings, walls, floors, etc surrounding the modifications have been affected.
- Discuss with the property owner any issues identified regarding potential rectification work required before the start of the modifications and retain a written record of this.
- Inform the EMS Assessor and the EMS Provider of any additional and or private work requested by the person. Additional work constitutes a separate contract between the person and the building contractor.
- Engage in a separate contract of work with the person, their family or whānau directly where a Part Payment is required by the person towards the cost of their modifications.

### **ii. During the modifications**

- Negotiate a start time and schedule of work with the person, their support person, family or whānau and advise the EMS Assessor of these time frames. The start time will be negotiated with the consultant if relevant.
- Commence work within ten working days of receiving written notification from the EMS Provider of the Service Request being confirmed.
- Inform the person and the EMS Provider of any likely time delays in completing the work.
- Liaise with the EMS Assessor regarding certain specifications where it has been documented that these specifications were to be determined on site



Potential impacts may include:

- The need to upgrade an existing plumbing and hot water system to enable a tempering valve to be installed.
- The impact of the positioning of a low rise lift on pedestrian access to the home.
- The need to replace rotten or uneven flooring in a bathroom before a level access shower can be installed.



'Make good' means the cost-effective repair and finishing of the area affected by the modification, to the pre-existing standard. For example, where a doorway has been widened, the new door frame will be painted and the surrounding wallpaper or paint work will be repaired to match existing as far as reasonable.



Liaison on site may be required for the exact positioning of a handrail or to determine the wheelchair clearance height required under a handbasin.

with the EMS Assessor.

- Complete the housing modifications in accordance with the specifications as provided by the EMS Assessor and a designer or project manager (as applicable) and any relevant building code regulations and product specifications. Where any deviation from the agreed plan is required, inform the EMS Assessor and the EMS Provider.
- Undertake all work in a safe manner, complying with applicable regulations, standards, legislation, building codes and by-laws.
- Take full responsibility for all sub-contractors' work and ensure they act in a professional manner including the requirement to act in accordance with their relevant codes of conduct.
- Ensure that any disruption and restricted access to essential facilities (eg, showers, toilets and kitchens) is kept to a minimum.

### iii. On completion of the modifications

- Arrange the final inspection and complete the required documentation.
- Obtain and send a copy of the building consent (if necessary) and Consent Compliance Certificate to the property owner and the EMS Provider.
- Ensure that instructions for the care, use and operation of equipment included in housing modifications, such as a low rise lift, are provided to the person, their family or whānau or their carers and support people.
- Remedy all defects arising from defective materials or workmanship which have been identified before the end of the maintenance period.



Sub-contractors include other trades people required to complete the housing modifications work (eg, plumbers, electricians and plasterers).



The maintenance period is a three month time frame which allows for identification of any defects in materials or workmanship of the completed modifications. During the maintenance period, the building contractor will be given the opportunity to remedy any defects. The maintenance period starts from the date of completion of the modifications.

## 11.11. Ministry of Health

- Develop and communicate operational policy and funding guidelines for the provision of Equipment and Modification Services.
- Manage and monitor the contracts with the contracted EMS Providers, to ensure that quality services are provided in a timely, fair and efficient manner and administered within allocated annual budgets.
- Review relevant individual proposals through the EMS Review Panel and communicate decisions to the EMS Providers within 10 working days of receipt of the Review Panel template.



Refer to Ministry of Health - EMS Review Panel. See Section 12.



## 12. DECISION-MAKING PROCESSES

### 12.1. Housing modifications not supported by the EMS Assessor

- Where the EMS Assessor does not support (fully or in part) a person's preference for housing modifications, the EMS Assessor should consult with an EMS Advisor to work through what interventions could best meet the person's needs.
- When housing modifications are being considered, this may require a Housing Clinic or On-site Visit to be facilitated by the EMS Advisor and engagement with other parties such as NASC, Housing New Zealand, behaviour support specialists, etc.
- If the outcome of this process confirms that housing modifications are not considered to be the most appropriate solution to meet the person's needs the EMS Assessor cannot submit a request for housing modifications.
- The EMS Assessor should work with the person and their family or whānau to establish other support options or services that would better meet the person's needs.

### 12.2. Review of assessment by an EMS Assessor

The person may seek a second opinion or re-assessment from another EMS Assessor if they are not satisfied with the service they have received. This would need to be arranged by the person, their family or whānau. They could do this by:

- contacting the EMS Assessor's Service Manager or supervisor to request a second opinion
- contacting Enable New Zealand (Phone 0800 17 1981) for a list of EMS Assessors who have the required accreditation or credential to carry out the assessment
- contacting their local NASC organisation
- contacting another EMS Assessor for a privately funded assessment by another occupational therapist.



For more information on the NASC, go to [Ministry of Health NASCs](#) or the DHB websites for NASCs supporting people 65 years and over.



If the person wishes to have an assessment done privately they will have to pay the costs associated with this.

### 12.3. Review by the Ministry

#### 12.3.1. Disability Support Services

If a person is not satisfied with or does not accept the outcome of the Prioritisation Tool, ie funding is not available for equipment or modifications, and they wish to take this further, they should be advised to contact:



## Disability Support Services

- Freephone: 0800 373 664
- Website: <http://www.health.govt.nz/our-work/disability-services>
- Email: [dsdcomplaints@moh.govt.nz](mailto:dsdcomplaints@moh.govt.nz)

If the person needs support and information to do this they can contact the Health and Disability Advocacy Service on:

- Freephone: **0800 555 050**
- Website: <http://advocacy.hdc.org.nz/>
- Email: [advocacy@hdc.org.nz](mailto:advocacy@hdc.org.nz)

### 12.3.2. EMS Review Panel

The Ministry's EMS Review Panel (the Panel) reviews proposals for equipment and modifications in the following situations:

- Services are estimated to cost over \$25,000 (GST excl.).
- Clarification of the Ministry's operational policy is required.
- Equipment or modifications are being sought due to a person's genuine and exceptional circumstances.

The objectives of the Panel are to ensure that all decisions regarding proposals are:

- considered in a nationally consistent way
- transparent and fair, and
- are based on the Ministry's agreed eligibility requirements and the funding criteria for accessing specific services.

The Panel will inform the relevant EMS Provider of its recommendation within 10 working days of receipt of a proposed request. The EMS Provider will then advise the person and EMS Assessor of the Panel's recommendation. Only proposals forwarded by the EMS Providers will be considered by the Panel.



The review by the Panel will be undertaken before a Service Request has been submitted to the EMS Providers.



The EMS Providers may share relevant information about individual proposals that are submitted to the Panel in order to seek national consistency of decision-making.

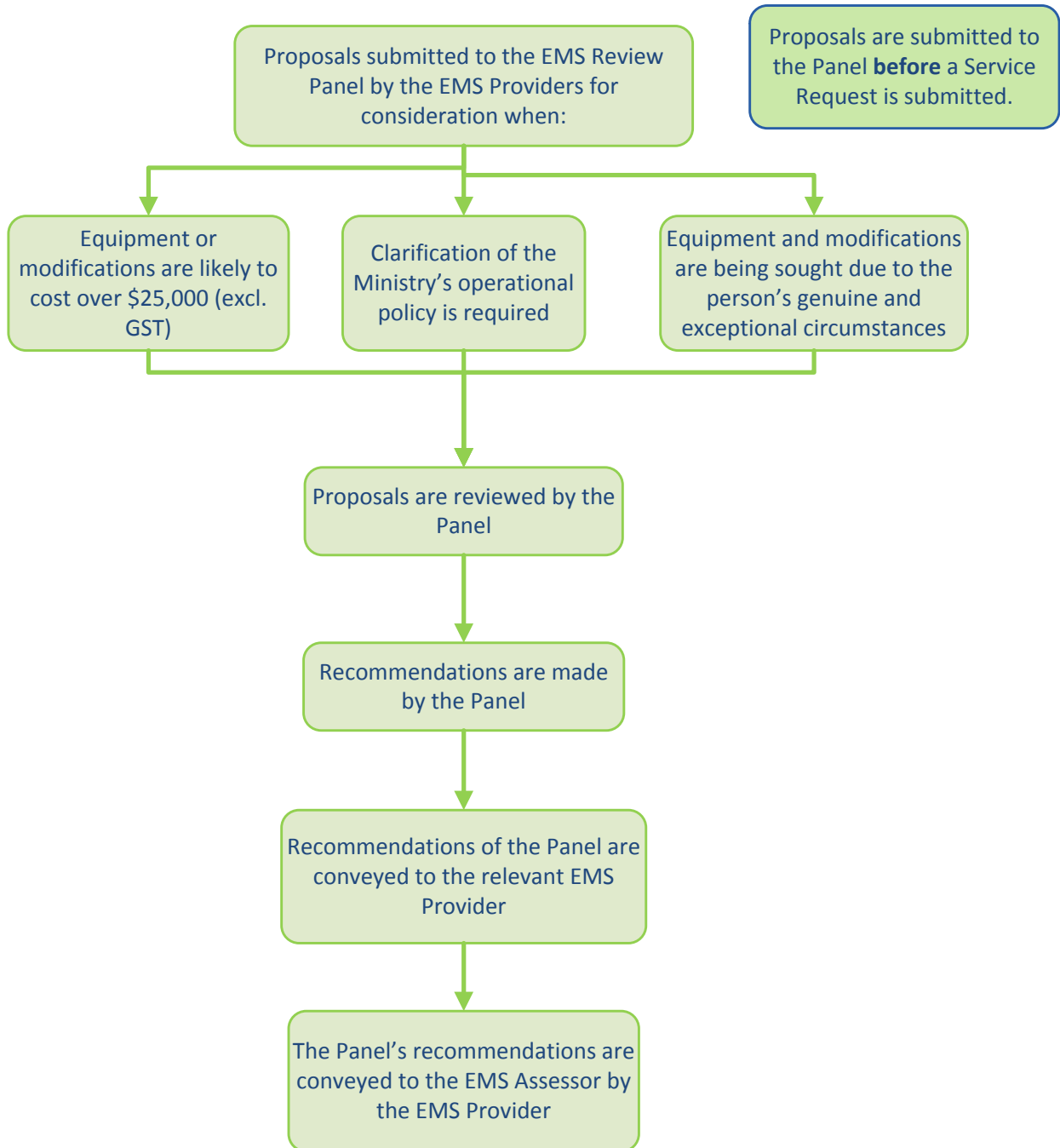


The EMS Assessor is advised when a proposal is being referred to the Panel.



The Panel may request further information from the EMS Assessor if necessary.

### 12.3.3. Ministry of Health's Equipment and Modification Services (EMS) Review Panel



## 13. GLOSSARY

### 13.1. EMS Assessor Accreditation Framework

The EMS Assessor Accreditation Framework has been established by the Ministry for health professionals undertaking assessments that may result in requests for equipment or modification services for eligible disabled people.

The Framework has three levels of accreditation for access to Ministry funded equipment and modifications:

1. **Approved Categories** of Accreditation. Specified allied health professionals whose existing graduate level training is considered sufficient to assess for and recommend some Ministry funded equipment and basic housing modifications may apply for Approved Assessor category of accreditation.
2. **Credentialed Categories** of Accreditation. Where additional training requirements are necessary before clinicians can recommend more specialised equipment or modifications, allied health professionals may obtain further training and skills and apply for Credentialed Assessor category of accreditation for that specialty area.
3. **Service Accreditation**. Specific service areas, primarily community health services, can be accredited to allow district health board staff (or contractors to DHBs) to undertake assessments and recommend certain equipment items, for example low cost, low risk and high volume equipment such as shower stools and over toilet frames.

To undertake assessments and submit applications for Ministry funding for housing modifications, EMS Assessors require accreditation at either:

- an Approved level (for basic modifications), or
- a Credentialed level (for complex modifications).

#### Provisional Accreditation

An EMS Assessor who is working towards attaining the appropriate credential in housing modifications will need to have Service Requests endorsed and counter-signed by an EMS Assessor who holds the appropriate level of credential. This provisional process can remain in place for a maximum of twelve months from the date of receipt of the first Service Request by the EMS Assessor who has provisional accreditation. The supervisor who has endorsed the Service Request will take overall responsibility for the Service Request.

It is the employer's responsibility to ensure that EMS Assessors are competent to perform this role and that a robust peer review is undertaken by each provisional EMS Assessor's supervisor.



For further information about the EMS Assessor Accreditation Framework go to:

<http://www.disabilityfunding.co.nz/ems-assessors>



For more information about provisional accreditation, go to:

[Provisional accreditation](#)

## 13.2. Basic and Complex housing modifications

Two levels, Basic and Complex, are used to guide consideration for housing modifications. The levels refer to the complexity of the solution, and associated costs, to meet a person's disability related needs.

EMS Assessors require approval or credentialing at the relevant level of the EMS Assessor Accreditation Framework in order to be able to recommend housing modifications.

**Basic** housing modifications include internal and external handrails, straight forward internal door widening and threshold ramps.

**Complex** housing modifications include, but are not limited to, ramps, lifts, level access showers, external door widening and fencing.

## 13.3. Building contractor

A suitably qualified tradesman who is contracted to the Provider and who is responsible for the co-ordination and completion of building works following receipt of a Service Request for housing modifications for a person.

Building contractors who provide housing modifications which are to be funded by the Ministry must be approved by and registered with the EMS Provider who maintains a list of approved building contractors.

## 13.4. Challenging behaviour

Behaviour can be described as challenging when it is of such an intensity, frequency or duration as to threaten the quality of life and/or the physical safety of the individual or others and is likely to lead to responses that are restrictive, aversive or result in exclusion.<sup>5</sup>

## 13.5. Cost Contribution

A Cost Contribution is a funding contribution that the Ministry has agreed to pay towards part, but not all, of the total cost of a housing modification when the property owner wishes to:

- undertake additional work on their property over and above the extent of the modifications which have been recommended by the EMS Assessor as being



EMS Assessors need to be an Approved Assessor to recommend Basic Housing Modifications.



EMS Assessors need to hold a Housing Modifications Credential in order to recommend Complex Housing Modifications.

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<sup>5</sup> Royal College of Psychiatrists, British Psychological Society and Royal College of Speech and Language Therapists: 2007

essential to meet the person's need related to their disability

- use their own building contractors, who are not contracted by the EMS Provider, to complete the modification. In some circumstances some property owners may be qualified tradespeople who wish to undertake the work themselves.
- renovate or build a new home incorporating certain features to meet the person's disability related needs.

### 13.6. Dependent person

A dependent person is a person who requires full time care because:

- they are a child of 13 years or under (ie, age dependency)
- of the impact of their long term health or disability related needs.

### 13.7. Designer

An architect, architectural draughtsperson or designer; a suitably qualified person who is engaged by the Provider and who is responsible for the completion of detailed plans and specifications following receipt of a Service Request for complex housing modifications for a person.

### 13.8. EMS Advisor

An EMS Advisor is a suitably qualified and experienced person employed by the Ministry's contracted EMS Provider, who provides advice to EMS Assessors to support their consideration of the most appropriate and cost-effective interventions, including equipment and modifications, to meet a person's disability related needs.



EMS Advisors were previously known as Professional Advisors

### 13.9. EMS Assessor

An EMS Assessor is a person who is approved as an assessor under the EMS Assessor Accreditation Framework published by the Ministry. EMS Assessors hold certain areas of accreditation which relate to their qualifications and experience within that specialty. The areas of accreditation refer to the types of equipment or modifications that the EMS Assessor is able to recommend.



Mail correspondence from the EMS Providers will be sent to the address the EMS Assessor has registered on EMS Assessor Accreditation Framework.



EMS Assessors can receive regular updates / information via email. This can be arranged by contacting Enable New Zealand. Work email addresses only should be provided - Hotmail and Gmail addresses cannot be used for this email communication.

The EMS Assessor is responsible for maintaining their accreditation registration on the EMS Assessor Accreditation Framework, which is administered by the Ministry's contracted provider, Enable New Zealand. EMS Assessor status is required to be regularly updated according to EMS Assessor's work situation and the type of work they are undertaking.

The EMS Assessor must advise Enable New Zealand of any change in their accreditation area, employer, type of work being undertaken, registration or practicing status or contact details.

### **13.10. EMS Provider**

The contracted service provider that administers Equipment and Modification Services on behalf of the Ministry. The Ministry currently contracts with two providers, Accessable and Enable New Zealand, to administer EMS nationally:

- Accessable; covers the Northern DHB region (Auckland and Northland)
- Enable New Zealand; covers the rest of New Zealand south of the Bombay Hills.

### **13.11. EMS Prioritisation Tool**

The EMS Prioritisation Tool determines the availability of Ministry funding for eligible people. Access to funding is prioritised based on the person's current need and their ability to benefit from the equipment or modification which has been recommended by an EMS Assessor following an assessment of their needs. The person, or their family and whānau, participate in the process through completion of an Impact on Life questionnaire.

### **13.12. Factsheets**

The Ministry provides informative fact sheets in plain English for consumers. Some factsheets are available in large print and other languages.

### **13.13. Housing Advisor**

A Housing Advisor is a suitably experienced person, generally a builder with a relevant qualification. The Housing Advisor is employed by the EMS Provider and provides technical advice to EMS Assessors to support the consideration of the most appropriate and cost-effective housing modifications, to meet a person's disability-related needs.

### **13.14. Housing Advisory Services**

Housing Outreach Clinics are scheduled clinics held by the EMS Providers in key centres which aim to provide support, education and advice to EMS Assessors and other relevant parties, on the most appropriate interventions (which may include housing modifications) to meet the needs of eligible people. The clinics are facilitated by the EMS Advisor and may be also attended by the Housing Advisor. This advice and support is provided before the decision has been made to

proceed with housing modifications which are complex in nature.

On-site Visits may also be included as part of the Housing Outreach Clinic. Visits are confirmed following agreement between the EMS Advisor and the EMS Assessor, to discuss options when considering modifications to the person's home. These meetings are attended by the EMS Advisor and/or the Housing Advisor, the EMS Assessor, the person's family or whānau and other relevant parties where appropriate. Such meetings are held before the decision has been made to proceed with housing modifications which are complex in nature.

### 13.15. Like for Like Replacement

Like for Like replacement is provided when an equipment item being used by a person continues to meet their needs is considered to be beyond economic repair and a replacement is requested either by the person or the EMS Assessor.

Like for Like replacement means that the same form and function of the equipment item needs to be sought – it does not indicate that the exact make and model needs to be supplied.

If the equipment item has been determined as being beyond economic repair but it no longer met the person's needs, a reassessment from an EMS Assessor is required, and the Prioritisation Tool must be completed (for Band 2 and Band 3 Equipment) before a replacement item can be provided.

### 13.16. Main Carer

A main carer is an unpaid carer who lives with the person and provides the majority of their care. A main carer may have a disability themselves and require assistance or support to care for a dependent person in their care.

### 13.17. Part Payment

A Part Payment is the amount it has been agreed that the person will pay towards the cost of the housing modifications. Such payments are generally made when the outcome of an Income and Cash Asset Test indicates that full funding for the cost of the proposed modifications is not available through the Ministry.

### 13.18. Project Manager

A building consultant or project manager; a suitably qualified person who is contracted to the Provider and who is responsible for the overall project management of the modification process following receipt of a Service Request



for Complex housing modifications for a Service User.

A Project Manager may be engaged to project manage a building project, including supervision of the building work and gaining building consent.

Project management may be required due to the complexity of construction of the housing modifications or other extenuating circumstance. Where the person or property owner is completing the housing modification with a Cost Contribution, they will be required to arrange project management of the work themselves.

### **13.19. Restraint Minimisation and Safe Practice Guidelines**

NZS 8134.2:2008 Health and Disability Services (Restraint Minimisation and Safe Practice) Standard Guidelines aims to reduce the use of restraint in all its forms and to encourage the use of least restrictive practices.

### **13.20. Shared care**

Where a dependent person is living in two homes on a regular basis, they can be described as living in shared care. This situation may occur where:

- a child is regularly living in the homes of separated parents
- there is a foster care arrangement
- an elderly relative is living with different family members who provide care.

### **13.21. Subcontractors**

Subcontractors include other tradespeople required to complete housing modifications. For example, plumbers, drain layers and plasterers. The building contractor is responsible for the engagement and quality of work of subcontractors.

### **13.22. Website addresses**

Enable New Zealand - [www.enable.co.nz](http://www.enable.co.nz)

Disability Funding - [www.disabilityfunding.co.nz](http://www.disabilityfunding.co.nz)

Accessable – [www.accessable.co.nz](http://www.accessable.co.nz)

Lifetime Design - [www.lifemark.co.nz/lifetime-design.aspx](http://www.lifemark.co.nz/lifetime-design.aspx)

BRANZ - [www.branz.co.nz](http://www.branz.co.nz)

Ministry of Health - [www.health.govt.nz](http://www.health.govt.nz)

Veterans' Affairs - [www.veteransaffairs.mil.nz/](http://www.veteransaffairs.mil.nz/)

## 14. APPENDIX A - Eligibility

Eligibility criteria for publicly funded Health and Disability Services are set out in the Health and Disability Services Eligibility Direction 2011. The Direction is issued by the Minister of Health under the New Zealand Public Health and Disability Act 2000. This information is correct as at April 2012.



See [Eligibility Direction](#) for more information.

To be fully eligible means a person whom meets the eligibility criteria for *any* publicly-funded health service as per the Eligibility Direction (2011), and must meet at least one of the following:

- i.** Is a New Zealand citizen.
- ii.** Holds a resident visa or permanent resident visa (includes residence permits issued before December 2010) .
- iii.** Is a Australian citizen or Australian permanent resident AND able to show that he/she has been in New Zealand or intends to stay in New Zealand for at least 2 consecutive years.
- iv.** Has a work visa and is able to show that he/she is able to be in New Zealand for at least 2 Years (including visas/permits held immediately beforehand).
- v.** Is an interim visa holder who was eligible for publicly funded health services immediately before his/her interim visa started.
- vi.** Is a refugee or protected person OR is in the process of applying for, or appealing to the Immigration and Protection Tribunal for refugee or protection status OR is the victim or suspended victim of a people trafficking offence.
- vii.** Is under 18 and in the care and control of a parent/legal guardian/adopting parent who meets one criterion in i-vi above.
- viii.** Is 18 or 19 years old and can demonstrate that, on 15 April 2011, he/she was the dependent of an eligible work visa/permit holder (visa must be still valid).
- ix.** Is a New Zealand Aid Programme student studying in New Zealand and receiving Official Development Assistance Funding (or their partner or child under 18).
- x.** Is participating in the Ministry of Education Foreign Language Teaching Assistantship scheme.
- xi.** Is a Commonwealth scholarship holder studying in New Zealand and receiving funding from a New Zealand university under the Commonwealth Scholarship and Fellowship Fund.