

Good afternoon ESORT members

You will recall that during the 2018/19 budget brief, information was provided on a proposal to explore Rehabilitation in the Home (RITH).

### Background

In 2018-19 there were almost 8,000 episodes of DVA clients receiving rehabilitation care in hospital, most commonly following orthopaedic surgery or a functional decline (e.g. following an illness).

International and national research indicates rehabilitation can be delivered in the home to appropriate target groups of patients with the same, or better clinical outcomes than when provided on an inpatient/overnight basis.

Home-based rehabilitation programs are now broadly accepted as part of the valid continuum of rehabilitation care. In this context, many private health insurers and public hospitals offer rehabilitation in the home programs as part of their service offering. DVA is seeking to ensure DVA clients have similar access to models of rehabilitation care which are responsive to their needs and individual situation.

### Objectives

The key intended benefits of a DVA RITH program are to:

- increase the choice and flexibility in how and where DVA clients receive services;
- shorten lengths of stay in hospital;
- reduce complications by avoiding hospital (and, for example, the risk of infection); and
- provide DVA clients additional care and support through being in familiar surroundings with closer connection to family, friends and pets.

Ultimately the best clinical treatment model is determined by the treating doctor in partnership with the client, including whether patient-centred rehabilitation care is most appropriately provided in hospital, in the home, or through a combination of hospital and in the home. While many DVA clients will continue to receive their rehabilitation in hospital, RITH will particularly benefit rural patients whose home may be a considerable distance from where the hospital service is being provided, by supporting early discharge.

Modernising models of care which support greater choice and control for DVA patients over their care pathways, including rehabilitation care, is part of DVA's commitment to improving health services for veterans and their families.

### Proposed amendments to the Treatment Principles

In order to implement the RITH Program, an amendment to the Treatment Principles under the *Veterans' Entitlements Act 1986* (VEA) and the *Military Rehabilitation and Compensation Act 2004* (MRCA) would be required.

The proposed amendments will clarify when DVA will accept financial responsibility for RITH services for an entitled person, including the referral arrangements to contracted RITH providers. This is similar to the legislative arrangements for Community Nursing (refer Section 7.3 of the Treatment Principles No.R52/2013).

DVA is to have the legal authority to access a DVA client's RITH care documentation upon request.

The amendments will also make clear that DVA will not accept financial responsibility for any domestic help services or services provided under other existing DVA programs such as the Veterans' Home Care Program. RITH services will be limited to therapy appropriate to restore a DVA client's functional ability following a medical event that has resulted in a loss of normal physical capabilities. Most of this therapy is expected to be delivered by allied health professionals working as a co-ordinated care team, such as physiotherapists and occupational therapists.

### Invitation to Comment

At its meeting on 12 December 2019, the Repatriation Commission and the Military and Rehabilitation and Compensation Commission (the Commissions) approved work to proceed on a possible RITH program, and to release a Request for Information (RFI) in early 2020 to test a proposed model with stakeholders and gain further insight into current practice. The RFI will inform any potential Request for Tender (RFT) and any contract which may be entered into between DVA and RITH providers for the provision of services.

ESORT is invited to provide comment on the proposed arrangements to establish a RITH program generally, and is also invited to provide formal comment by responding to the RFI published on AusTender (ATM ID: RITH01/20) on 31 January 2020 at <https://tenders.gov.au/atm>.

**The closing date for responses to the RFI is 12.00pm (AEST) 2 March 2020.**

Thank you

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