

(* Approval time is after all supporting documentation has been submitted (including care plan and budget)

EQUIPMENT TYPE	SUPPORTING DOCUMENTATION REQUIRED?	WHO CAN MAKE A RECOMMENDATION	ADDITIONAL INFORMATION	APPROVAL TIME (*)
MOBILITY & DEXTERITY				
Adaptive crockery & cutlery Car handy bar Easy turn taps Falls alarm/watch Head protection Reaching appliances	No			1-2 business days
Bed sensor Chair sensor Crash mat GPS tracker Limb - Support Brace Limb - Protectors Sheepskin Slide sheet Traymobile	Yes	Occupational Therapist Physiotherapist Registered Nurse		1-2 business days
Crutches *Exercise pedals *Small exercise equipment(eg small hand weights *Tens **Heat pack	Yes	Physiotherapist Exercise Physiologist	*The equipment is expected to form part of an individually prescribed and monitored exercise /pain management program. **No wheat packs. Health professional to be working within scope of practice.	1-2 business days
Air assisted lifters *Bed pole/Bed stick Bed bars, head and foot panels Electric recliner Manual recliner Electric adjustable bed Mattress / Mattress topper Walking stick Wheelchair - manual Slide board Wheeled walker Walk belt / Pelican belt	Yes	Occupational Therapist Physiotherapist	*Restrictive practices waiver. Health professional to be working within scope of practice. Mattress to be confirmed for pressure relieving needs. Usually single or king single size.	1-2 business days

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MOBILITY & DEXTERITY				
Mechanical car lifter for wheelchair	Yes	Occupational Therapist	Car registration, car insurance, drivers licence. Health professional to be working within scope of practice.	5 business days
*Mobility scooter Mechanical device for lifting Wheelchair - electric	Yes	Occupational Therapist Physiotherapist	* GP/OT clearance for suitability to utilise mobility scooter. Suitable training to be provided. OT assessment and trial report for the specific scooter model. GP Medical Questionnaire required to confirm cognitive and health capacity to manoeuvre the scooter safely. Any accessories need to be recommended by OT. Health professional to be working within scope of practice.	5 business days
*Bed rails Pressure relieving cushion Pressure relieving mattress Air mattress Pressure relieving overlay for bed Recliner chair Hip protectors	Yes	Occupational Therapist Physiotherapist Registered Nurse Podiatrist	*Restrictive practices waiver.	1-2 business days
Custom made shoes Medical grade footwear Foot orthotics Heel & ankle supports	Yes	Physiotherapist Podiatrist	No off-the-shelf footwear. Health professional to be working within scope of practice.	1-2 business days
PERSONAL CARE / ASSISTANCE				
Blood Pressure Monitor	Yes	Registered Nurse General Practitioner	Only if there is no other source of funding.	1-2 business days

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PERSONAL CARE / ASSISTANCE				
Bottom wiper Button hook Jar openers Long handled sponges Long handled dustpan Sock aids Large print calendar Orientation Clock/Calendar Orientation signs Pill dispenser Gloves (PPE) Medication reminders	No			
Bathboard, bench or seat Shower chair/stool Commode chair Mobile shower toilet commode Shower Chair - standard/customised Toilet raise Toilet - coloured seat Pressure care toileting equipment	Yes	Occupational Therapist	Health professional to be working within scope of practice.	1-2 business days
CPAP Machine Nebuliser	Yes	Respiratory Clinic	Specialist to be working within scope of practice.	1-2 business days
Oxygen Therapy	Yes	General Practitioner Respiratory Clinic		1-2 business days
Contenance aids	Yes	Registered Nurse General Practitioner Contenance Nurse	Generally funded by CAPS – HCP fund once CAPS exhausted.	1-2 business days
Compression aids (garments and application aids)	Yes	Occupational Therapist Physiotherapist Registered Nurse General Practitioner Podiatrist	Health professional to be working within scope of practice.	1-2 business days

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PERSONAL CARE / ASSISTANCE				
Vascular Compression Pump (for a diagnosis of lymphoedema)	Yes	Occupational Therapist Physiotherapist Registered Nurse	*RN's, physio's and OT's must hold appropriate post graduate qualifications in lymphoedema treatment. Only if there is no other source of funding (https://www.lymphoedema.org.au/about-lymphoedema/compression-garment-schemes/) Lymphoedema must be negatively impacting their aging processing, eg increased falls, reduced range of movement.	1-2 business days
Bluetooth hearing aid connection	Yes	Audiologist		1-2 business days
Washing machine	Yes	Continence Nurse	Rarely approved -is a general household item.	1-2 business days
HOME MODIFICATIONS				
Easy taps Shower hose/extension Non slip mats	No			1-2 business days
Hand rails - internal *Hand rails - external Grab rails Ramps - fixed & portable Fixed non-slip surfacing	Yes	Occupational Therapist	*Access points of residence.	1-2 business days
Sensor lighting				1-2 business days