ACC7404

Request for a housing modification - grab rail

This form is to be used by ACC claims management staff or an Allied Health professional to request urgent **standard length, off-the-shelf type grab rails only**.

If the client needs customised grab rails to be installed, please use the Minor Housing Modification process instead or talk to your contact at ACC.

If you're an Allied Health professional, please complete Parts A, B and C and send this form to your contact at ACC, who will then contact the relevant grab rail supplier.

If you're an ACC case owner, please complete Parts A, B and C and send the form to our grab rail supplier.

If you're the grab rail supplier, please ask the client to complete Part D and then complete Part E to confirm that the grab rail has been installed and then return this form to the ACC contact person listed below.

Part A – General contact details

1. Client details	
Client name:	Claim number:
Contact number:	Mobile number:
Email address:	
Address where the modifications are to take place (include town/city name):	
Are there any risks to the installer's safety in visiting the client's home? ☐ Yes ☐ No ☐ Don't know	
☐ If yes, please specify:	
Additional information required by the installer to access the property, eg who to contact for a key?	

2. Client's representative (if applicable)	
Representative name:	Relationship to client:
Contact number:	Email address:

3. ACC details	
ACC contact person:	ACC office:
Contact number:	Email address:

Part B – Requestor contact details

4. Requestor details (if applicable)	
Contact name:	Date:
Work phone number:	Mobile number:
Email address:	

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Part C – Grab rails

5. Grab rail details		
External grab rails		
☐ Front door	☐ Back door	☐ Other:
Notes:		
Internal grab rails		
Location of grab rails	How many	Notes. Please provide details such as required coverage of rails, eg 'on shower wall beneath mixer' or 'on right hand side of toilet when seated'.
☐ Bath		
☐ Shower		
☐ Toilet		
☐ Other:		

Grab rails must be installed within either: ☐ 48 hours ☐ 5 working days

Please note:

- **in some circumstances (eg weekends, public holidays, rural locations) it may not be possible to install the grab rails within these timeframes. In these situations the grab rail supplier will be in touch with you so we can make sure the client only returns home once it is safe to do so.**
- **this form is for requesting standard length, off-the-shelf type grab rails only. If the client needs customised handrails to be installed, please use the Minor Housing Modification process instead or talk to your contact at ACC.**

Part D – Client confirmation

6. Grab rail client details	
I confirm that the grab rails specified above have been installed.	
Name:	
Signature:	Date:

Part E – Supplier confirmation

7. Grab rail supplier details	
I confirm that the grab rails specified above have been installed.	
Name:	
Signature:	Date:

When we collect, use and store information, we comply with the Privacy Act 1993 and the Health Information Privacy Code 1994. For further details see ACC's privacy policy, available at www.acc.co.nz. We use the information collected on this form to fulfil the requirements of the Accident Compensation Act 2001.