



# Office for the Ageing

**November 2007 – Edition 4**

## **From the Director**

This is the fourth special edition, focussing on **Community Care Reform**, including recent national meetings, Access Points in South Australia (SA), Home and Community Care (HACC) Triennial plan consultations, and two national conferences, HACC and Aged Care Assessment Program (ACAP), which will be held in 2008.

## **NATIONAL COMMUNITY CARE MEETINGS**

ACAP Officials, Community and Aged Care Officials (CACO) and HACC Officials met on the 21, 22 and 23 November in Melbourne. Some items of interest to the sector are outlined in this newsletter.

## **SOUTH AUSTRALIAN COMMUNITY CARE ACCESS POINTS**

The Community Care Access Points' reforms in South Australia are progressing in the two demonstration sites in Western Adelaide, Wakefield Gawler areas. The main focus has been in mapping the current client pathways and the business processes that are currently in place and what will be required to move to demonstration by April 2008.

## **SA HACC 2008-11 TRIENNIAL PLAN CONSULTATION**

Consultation sessions are now complete, with a final session held with Government stakeholders. Information gathered is now being collated and analysed. Thank you again to the many people who contributed.

A handwritten signature in blue ink that reads 'Anne Gale'.

Anne Gale,  
**DIRECTOR**  
Office for the Ageing

30 November 2007

## **NATIONAL COMMUNITY CARE MEETINGS**

### **COMMUNITY AND AGED CARE OFFICIALS**

Community and Aged Care Officials are mainly focussed on the common arrangements which were agreed through the renegotiation of the HACC Agreement, and with the reforms determined by the Council of Australian Governments (COAG) in February 2006. In relation to the key areas:

#### **Access**

Work is proceeding in each jurisdiction to identify and establish access point demonstration sites. Various models are being used depending on the sector arrangements and infrastructure in the various states and territories. More information on SA is provided below.

#### **Eligibility**

Eligibility for HACC has remained the same in the Review Agreement as it was under the previous agreement. However, some policy decisions still require resolution, and these will be progressed as the outcomes of the Commonwealth Review of Subsidies and Services become clearer.

#### **Assessment**

Work on intake assessment is progressing well, with the next stage of testing the Australian Community Care Needs Assessment (ACCNA) and the Carer Eligibility Needs Assessment (CENA) due to commence early in 2008. Issues concerning comprehensive assessment and the relationship with the ACAP require further address.

#### **Quality**

Common standards for community care and a National Quality Reporting Framework have been drafted and were made available to the sector for comment. The feedback is now being collated and analysed, and preparations for piloting are underway.

#### **Financial Reporting**

A mapping exercise of current financial reporting across community care programs is now complete. The next step is to develop a consistent approach to financial reporting that can be used across programs.

#### **Fees**

The National Fees Project has included research into current fees policies and practices through a literature review of international and national fees policies and consultations with service providers and peak bodies. The survey is now complete, and the final report is being drafted. This will include principles and a fees framework. Guidelines for determining fees and fee structures will be addressed in the second stage.

### **AGED CARE ASSESSMENT PROGRAM OFFICIALS**

In the September edition of the OFTA Community Care Reform newsletter, national and state initiatives responding to COAG's reform package relating to 'simplifying access to care for older people, people with disabilities and people leaving hospital'. This initiative included improving and strengthening the Aged Care Assessment Program.

A National Review of ACATs has now been completed by Communio. The report presented key findings which include 10 elements found by the consultants in numerous ACATs which they believed were operating effectively and functioning well. Recommendations were made in the areas of:

- Throughput and timeliness;
- Consistent assessment approaches;
- Workforce;
- Quality; and
- Infrastructure.

ACAP Officials discussed the recommendations at their recent meeting. The Report and ACAP Officials response are expected to be released for distribution shortly.

As part of the national ACAP Training Strategy, a national conference 'ACAP into the 21<sup>st</sup> Century' will be held in May 2008. This first national event in many years will provide the opportunity for ACAT members to meet and network with other team members across the country. Participants will share innovative practices, identify needs and priorities, and help shape future directions of the program as it prepares for the changing demographics of an ageing population.

## **HACC OFFICIALS**

The HACC Workforce has been included in the national Aged Care Workforce Census and Survey. The closing date for responses was 31 October. It will be a useful piece of work to build community care workforce strategies. In addition, as part of the work of the national HACC ATSI Reference Group, the workforce mapping project has been completed. This will now be used as the basis of developing a HACC indigenous workforce strategy, with the scope of urban to remote areas.

HACC Officials agreed that it is important to develop a National HACC Research Agenda. The aim is to reduce duplication and maximise impact, and to increase evidence available to inform and improve community care. The agenda will be linked to the national Ageing Research Network and will build on the outcomes of the national HACC Forum '*Promoting Independence*' to be held in February 2008.

There are limited places available for SA for the national HACC Forum '*Promoting Independence*'. Conference presenters, researchers and academics, peak bodies, HACC Reform Reference Group members, larger and Statewide agencies, and related Government stakeholders have been invited to date. Should any invitees not accept their invitation, registrations can be offered to others. Unfortunately, no additional places can be made available. We will need to ensure that the outcomes of the Forum are made available to all interested parties and look for opportunities in SA to build on this work.

For further information about national progress on common arrangements please contact Cath McGee, Manager, Community Care Reform on 8207 0418 or [cath.mcgee@dfc.sa.gov.au](mailto:cath.mcgee@dfc.sa.gov.au)

## **SOUTH AUSTRALIAN COMMUNITY CARE ACCESS POINTS**

The following information has been developed to provide stakeholders with further details on the SA Community Care Access Point Project and opportunities to contribute. Previous OFTA Community Care Newsletters providing background information on the vision, stages of “discovery”, “road testing” to full implementation by mid 2008 can be found on the OFTA website [www.ageing.sa.gov.au](http://www.ageing.sa.gov.au)

As previously outlined in OFTA Newsletters, access to community care in the new SA Community Care Access Point demonstration will be through three main pathways, initially for clients seeking basic care:

- Primarily through Major Access Points, Metro Access Team, part of Domiciliary Care SA for Western Adelaide and Healthlink across the Wakefield Gawler areas;
- Through existing pathways for single, simple care options e.g. meals, home assist; and
- Through other existing pathways offered through NGOS offering multiple services.

### **South Australian Community Care Access Point Regional Service Mapping and Business Modelling**

Significant work is continuing to clarify the elements of the model and set the directions for the Community Care Access Points demonstrations in South Australia and across Australia. This is being informed by extensive work to map the client pathway in accessing care (through the access points), document current business processes and to specify the future functions that need to be in place to ensure that access to care is streamlined.

Evolution Research with Chief Information Office, DFC, are currently undertaking regional service mapping and business modelling with extensive mapping of the major access points, i.e. MAT at Domiciliary Care SA and Healthlink, Country Health SA, including their current and required business processes, with IT and current infrastructure that will support the client care pathways in the two demonstration areas. Evolution Research is also assessing the capacity of the other local agencies to adopt the reforms over time. This “discovery” phase gives the opportunity to develop the strategies based on the knowledge and readiness of the sector prior to “road testing” in early 2008 and then full implementation.

The service mapping and business modelling is focussed on the key steps in the client pathway that have been nationally agreed by the Community Care Eligibility and Assessment Working Group (diagram at end of this newsletter). Considerable mapping is being done in relation to the following:

- Contact – by clients and service providers;
- Information provision ;
- Eligibility and assessment (including client priority); and
- Referral with feedback on client outcomes.

A key part is to explore how the client’s information is captured and travels with the client, confidentially as well as ensuring that there is up to date service directories that provide indication of the agency’s capacity to accept clients after intake assessment.

## **Regional Implementation Working Groups and Stakeholder Meetings**

Regional Implementation Working Groups, with membership from NGOs, local government, health services, carers, Disability SA, Aboriginal and Culturally and Diverse (CALD) providers and ACS, SA & NT and Department of Health and Ageing and OFTA have been set up for the for the Wakefield Gawler and for the Western Adelaide demonstrations.

A series of Regional Stakeholder Meetings are being held for the Wakefield Gawler demonstration and for the Western Adelaide demonstration, with RSVPs to Adam Durst, OFTA, email: [adam.durst@dfc.sa.gov.au](mailto:adam.durst@dfc.sa.gov.au)

The first meeting for the Wakefield Gawler demonstration was held at 10.00am–12.00pm, Tuesday, 4 December 2007 at the Conference Room in Executive Services, Gawler Health. There will be a follow up session to refine the work at 10.00am–12.00pm, Wednesday, 12 December 2007 at the Conference Room in Executive Services, Gawler Health.

The first meeting for the Western Adelaide demonstration will be held at 12.30pm–2.30pm, Wednesday, 5 December 2007 at 72 Woodville Rd, Woodville (Murree Smith Memorial Hall). There will be a follow up session to refine the work at 1.00pm-3.00pm, Tuesday, 11 December 2007 at Domiciliary Care SA, Belmore Tce, Woodville.

## **Further Enhancements**

From April 2008, the Access Point reforms in SA will be adopted in stages, including trialling of the revised ACCNA-R and revised CENA-R as a common intake assessment and referral tool in the basic community care domain. Other important functions to be developed include the procedures for the major access points to set priority for the client, allocate fairly to the sector, and capacity of the MAT and Healthlink to transfer relevant client information from the major access points to the agencies, with the required privacy procedures.

## **Evaluation**

As part of the demonstration phase National and State evaluations will inform the changes over the demonstration period as well as the future roll out of access points across SA.

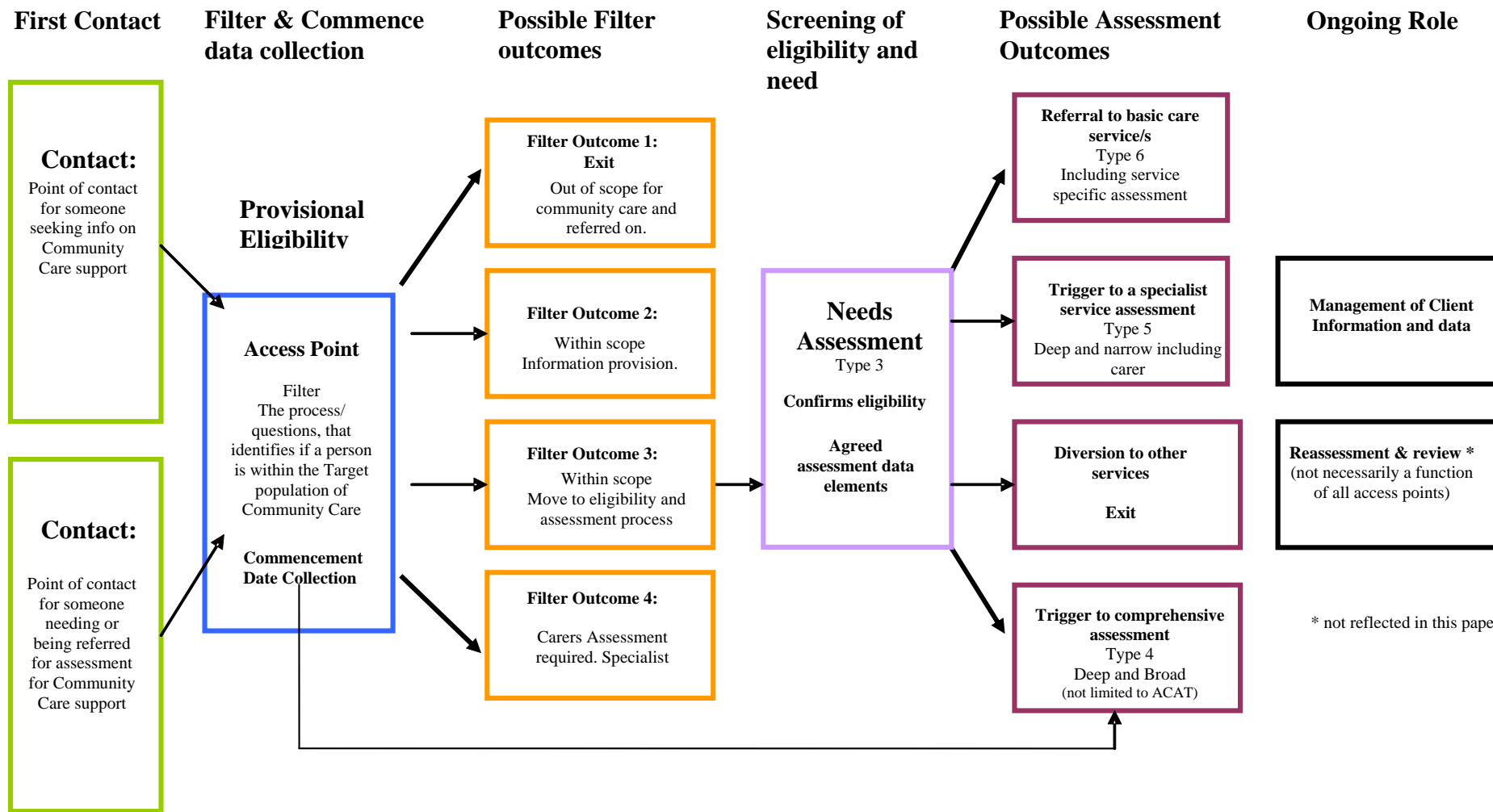
## **South Australian Community Care Access Point Project Contact**

For further information about access points in SA, please contact Janette Gay, Program Manager, Community Care Reform, OFTA on 8207 0269 or [janette.gay@dfc.sa.gov.au](mailto:janette.gay@dfc.sa.gov.au)

## **SA HACC 2008-11 TRIENNIAL PLAN CONSULTATION**

Consultation sessions are now complete with a final session held with Government stakeholders. Over 50 consultation sessions were held with key stakeholders, regional service providers, consumers and special interest groups. Information gathered is now being collated and analysed. Thank you again to the many people who contributed.

# Functions of an Access Point



\* not reflected in this paper