



Seniors Collaborative
Action Project

Barossa.Gawler.Light.Adelaide Plains

MINUTES OF RAS/MAC TROUBLESHOOTING WORKING GROUP

Thursday 2nd November, 2017

1:00pm – 3:00pm

Barossa Council Chambers

| PRESENT: | APOLOGIES: |
|---|---|
| <ul style="list-style-type: none">• Chris Guerin (Uniting Communities)• Courtney Dswonitzky (Barossa & Light Home Assist)• Craig Gogoll (ACNA RAS)• Deb Anderson (SCAP)• Leonie Grant (Uniting Communities)• Sanna Brannan (Gawler Home Assist)• Tracy Maynard (Country SA PHN) | <ul style="list-style-type: none">• Catherine Balfour-Ogilvy (Country Home Services)• Angela Schuster (Country Referral Unit)• Beth Hudman (Gawler Care & Share)• Corinne Bruer (Uniting Communities - RAS)• Elspeth Morgan (Carers' & Disability Link)• Jo Parker (Barossa & Light Home Assist)• Jodie Zimmermann (Barossa Village)• Leanne Mullan (SA Country Carers)• Lena Lesnikov (APM RAS)• Morna Coats (Alzheimers Australia)• Lucy McFadyen (Barossa Village)• Stacey Hewitt (Country Health Connect)• Stefan Nowak (CHSA - ACAT) |

1. OPEN

Meeting opened at 1:10pm

2. BUSINESS ARISING FROM PREVIOUS MEETING

3.1 "Aged Care at Home Information Service"

Surprised at lack of interest in this new service. Gawler experiences frequent 'drop ins' rather than appointments. Number of people wanting to know how not to take a package. So they can save money – often families requesting this.

3.2 RAH ramp down

Stefan wasn't present to report on how this went. Tracy indicated that she had heard that a number of patients were transferred to regional hospitals without a GP, and that others had inadequate discharge information.

3.3 Future Reform – Discussion Paper

Regional response submitted. State Network of Collaborative Projects submitted a response detailing the survey results re Stage 1. Waiting for outcome.

3. NEW MAC/RAS ISSUES

NSAF Review

- Craig reminded everyone to complete the National Screening and Assessment Form (NSAF) Review survey which closes 5 November and provides an opportunity to identify all issues.
- Changes will be made to NSAF Support Plan in 2018.

MAC Referral Issues

- Suspect there's been a change of call centre staff as some inconsistent referrals occurring.
- Call Centre isn't adding notes. No 'MAC interaction' notes even though you know MAC has been in contact.
- Example where client has had one off spring clean then later when client's needs have changed and seeks ongoing domestic assistance – MAC indicates client is already receiving Domestic Assistance.
- Call centre screening questions don't delve deep enough eg get a different response if you ask "Can you drive?" compared with "When did you last drive?"
- Examples of carers wanting social support deemed ineligible at screening. Need better integration between carer support and MAC.

RAS Referral Issues

- RAS referring for ongoing gardening and lawn mowing – this should be a one off service Should relate to safety eg access to clothes line or letterbox not slashing a horse paddock.
- Couple of referrals with no contact details of RAS assessor.
- Sometimes get referral for every CHSP service type.
- Referrals for domestic when son or daughter living with them – how to have 'difficult' conversation about this
- Some service providers in Qld and more recently in Adelaide encouraging clients to seek an ACAT.

Technical Issues & Glitches

- Sometimes when log onto MAC it freezes. Have to go in 2 – 3 times –is it AusKey or MAC issue?
- Tasks & Notifications on MAC portal "update service delivery information" – have to put in review date for some and not others.
- Finalise referral / revoke - wants an end date even if haven't received a service.
- Can't revoke until frequency of service has been completed
- When accepting referral get message that "Commencement date is too far in the future"
- Client's address and primary contact details not being included on attachment – likely to be a glitch.
- Still can't enter one-off service. Minimum service level is once per month.

Carer Support

- Can carer have flexible respite (up to 3 hours a week) and also have care recipient access short term social support? Up to service provider. Refer to goals. Must be goal driven not service driven.

- Examples of carers wanting social support deemed ineligible at screening. Need better integration between carer support and MAC.
- CRCC – short term and emergency respite.
- Flexible respite under CHSP – up to 3 hours per week – Care recipient needs to register with MAC.

Other

- When completing general notes section be mindful that they can be seen by everyone, including the client.
- Uniting Communities seeing a lot of confused families.
- Seeking clarification about whether the need to register grandfathered clients with MAC is by the end of the 2018 or 2020 contract

ACNA RAS Reablement Pilot

- Evaluation by University of Wollongong
- 450 assessments each in SA and Qld by end of year
- 6 months follow up in June 2018
- WHO Quality of Life assessment tool used before assessment and at end of reablement period.
- Aim to reduce dependence on services
- Noted changed pattern of referral ie more allied health than domestic
- 'Active Assessment' - "show us what you can do" problem solving approach. Encourage people to come up with solution.
- Focus support on certain part of task. Clean one room per day rather than all at once. Offer to assist with having conversation with family about support.

4. FUTURE REFORM – AN INTEGRATED CARE AT HOME PROGRAM TO SUPPORT OLDER AUSTRALIANS DISCUSSION PAPER JULY 2017

The remainder of the meeting was spent discussing some of the questions in the Discussion Paper. Deb will draft a regional response based on discussion today and feedback obtained at the Gawler Regional Aged Care network last week, and will distribute before submitting to DoH by 21st August.

Will be proposing that the Collaborative Projects submit survey results re Stage 1.

All service providers are encouraged to submit feedback.

5. NEXT MEETING

Thursday 22nd February, 2018
1:00-3:00pm
Barossa Council Chambers

ATTACHMENT: RESPONSE FROM DOH RE STAGE 1 SURVEY REPORT

Last week the SA Collaborative Project Officers (CPOs) met with representatives from the Department of Health (Louise Hamilton, Bev Young and Margot Chiverton), to discuss feedback gained from the sector in the recent CPO survey “Stage 1, Increasing Choice in Home Care April – May 2017”. Refer attached report.

The survey and other sector feedback raised a number of concerns including:

1. The impact of the delay on CHSP service providers in a decision regarding Stage 2
2. The perceived lack of HCP’s coming into SA since 27th February.
3. The capacity of CHSP service providers to provide interim services to a consumer waiting for a HCP
4. The need for clarification from the Department of Health regarding appropriate exit fees and exit notice periods

Also, there was a release of information regarding the expected long wait periods of up to 12 months for a HCP to be provided. **Please note** that emails have been sent to all providers, and information is available on the MyAgedCare portal, regarding the release of this inaccurate test information. Currently there is no data on wait list times.

Regarding the first issue above, coincidentally on the same day of our meeting, the extension of CHSP until 30/6/20 was announced. This is obviously a great relief for all. Louise advised, however, that she would still pass on the feedback to Canberra so we do not find ourselves in the same position in two years’ time.

Regarding the second issue, DoH representatives stated that definitely HCPs have been released into SA. Prior to 27th Feb there were 42 HCP providers in SA, there are now 62. Consumers are approaching both smaller and larger organisations. There is also a 56 day take up period which may contribute to this perception of no packages since the February/ March HCP release.

Addressing the third issue, DoH representatives reinforced that CHSP is to only be provided for consumers requiring basic level/entry level services.

- **A consumer approved and waiting for a HCP** can only be provided with CHSP at an entry level, not at the level of the HCP they are approved for.
- The description of what entry level support is, in the CHSP is at section 1.2.2 on page 3 of the Manual.
- If above basic/entry level CHSP services are required, a discussion is required with the client about how they meet their needs **while they are waiting**. For example, can family or any people within their networks (if available) provide support in the interim?

- Another option is that a reprioritisation by ACAT be requested if the consumer is likely to require hospitalisation or enter residential aged care immediately without the required HCP.
- If reprioritisation is not approved this is an appealable decision by the consumer.
- However, in the first instance providers may want to advocate for the consumer to the **ACAT Manager** to discuss all the issues and the inability of the consumer to remain in their home safely.
- It also needs to be noted that ACAT can only give a higher priority in extenuating circumstances. Paying for private services is also an option while consumers wait for their HCP.

Additional sector feedback regarding the interaction of CHSP and HCP **for consumers already on HCP** was also discussed with Roy Inglis, Department of Health. Roy provided the information below in blue:

- Information and guidance about the interaction of CHSP and HCP **in relation to someone on a HCP** is in 3.1.2 of the Manual. [Interaction between the Commonwealth Home Support Programme and other programs](#)
- Consumers **already on HCP** can only access CHSP **in the circumstances as per 3.1.2 of the CHSP Manual** [CHSP Programme Manual 2017](#) HCP advisers need to be aware of this so they do not raise expectations amongst their consumers that they can receive both HCP and CHSP services in other circumstances.
 - The pertinent paragraphs regarding people assessed for and waiting on a HCP and receiving CHSP services are on page 64 where there is a reference to “entry level support consistent with the CHSP”.
 - Regarding a CHSP provider recouping costs from a Home Care Package (HCP) provider once a CHSP client who has been waiting for a HCP commences their HCP, there is no requirement, compulsion or expectation within the CHSP for a HCP provider to reimburse or otherwise pay a CHSP provider for services provided to the aged person **before the HCP commenced**. Also, HCP funds can only pay for HCP eligible services provided to the HCP client once the HCP has commenced, that is on and after the date of commencement of the HCP.
- In all circumstances advisers/coordinators should be discussing these issues with their senior management so that a consistent approach within organisations can be achieved. Organisations are well positioned to feedback issues such as those raised through their peak bodies to ensure future policy direction. In relation to the fourth issue , regarding appropriate exit fees, service providers are encouraged to view the Department of Health, [Exit Amount Fact Sheet](#) that includes requirements for exit fees. Consumers can also contact ARAS if they are concerned that their rights are not being upheld in relation to exit fees and exit notice periods. ARAS may support them in their dealings with the service provider.
 - The [Changing a Home Care Provider](#) fact sheet provides guidelines regarding the notice a service provider states is required from a client to change service providers.

The cessation day should **be agreed with the client in consideration of the circumstances**, the terms of the Home Care Agreement, and the **legislative rules** governing home care. Consumers have a right (under the Charter of Care Recipients' Rights and Responsibilities

Home Care) to choose their provider, **and to change providers if they wish**. If the clients Rights and Responsibilities are not being taken into account then the client could lodge a complaint with the Aged Care Complaints Commissioner at [Aged Care Complaints: Lodge a Complaint](#)

The Department of Health Webinar, 'Home care reforms and ongoing improvements', 15th May 2017, has information on many of the issues raised in the recent CPO survey, it will be available again in the near future at [Webinars | Ageing and Aged Care](#).

The CPO's will be developing some training and development opportunities in the near future to better equip advisors and coordinators to have these challenging conversations with clients.

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<https://agedcare.health.gov.au/news-and-resources/subscribe>