southern services reform group

SSRG Workgroup Meeting
Workgroup: Aged Care Pathways
Date: 25 August 2016

Present: Sally Warnes, Lisa Hickson, Fiona Paterson, Julie Turbill, Prue Oake, Janine Callegari, Dianne Lorimer, Theresa Howard-Jones , Jacqui Bowden, Sam Berry, Lorraine Wilkin , Leanne Taylor, Sarah Jarvis, Julie Williams

Agenda Items	Discussion	Actions
Welcome and apologies	• Welcome and apologies	
Previous minutes & business arising	• Minutes read, no business arising	
Brief summary of MAC: what's going well and what's not	Jacqui explained that the Department have received a lot of feedback about CHSP and they act on it in order of importance. The Department representatives' are listening and accepting information from providers and consumers. Contact Centre training is being targeted to ensure maintenance of a high standard. A Forum organised by the **Eastern Collaborative Project** (Susan Beard) about the Commonwealth Home Support Programme has resulted in an informative summary of	

changes and responses to users.

Below is information taken from that document:

The Portal Workshop, 12th August 2016

Question from the audience: The query was raised that unless there is a comment in the notes, under the services tab, providers don't know which provider is accepting the referral /picking up.

Answer: If RAS broadcast a referral, or it is sent to more than one agency the provider won't know this. This is also the case if the consumer is sent to a provider by the consumer's priority. *However the provider still needs to accept or reject the consumer within the time frame.*

Please note, *It is much better for the consumer that providers don't accept a referral if they know they are at capacity/ cannot provide services for any reason*. If a consumer referral is broadcast or sent via priority, once the provider rejects the referral it will move to the next provider or go back to the pool until a provider accepts it.

However, if a provider *rejects a referral after they accept it*, the referral doesn't stay in the pool it goes back to MAC and the whole process starts again with a referral to RAS again which then goes out to providers again. This results in significant time delays for the consumer.

Support Plan and Referral

The support plans on the RAS portal are the same as what appears on the provider's portal**.**

'Other Considerations and Complexity of Needs Identified'

RAS cannot change or remove information in this screen that is added by MAC, for example comments appear such as 'the consumer has a little bit of pain, some of the time'. Providers may think this information is not helpful.

There can therefore be a huge list of other considerations that providers are viewing, that RAS can't untick, but they also link back to the Home Support Assessment.

It is worthwhile for providers to look back through the Home Support Assessment to find the area that relates to the consideration that is ticked if they are considering what services to put in place.

Find a Service Provider

RAS Search by the provider name when making a referral.

Craig showed the RAS portal – this shows limited provider information.

Providers present at the workshop were surprised viewing what the RAS assessors are able to

	view here. – RAS assessors are trying to find out as much as they can about services but RAS cannot see a description of services offered by providers on their portal, RAS are reliant on information provided by the providers that they originally entered into the portal. When RAS visit a consumer often the consumer knows who they want as a provider. RAS therefore attempt to refer to this provider. If the consumer doesn't know which provider they want, RAS will search by postcode. The portal then lists services in that area as entered by service providers. There is no filter regarding services entered. That is, RAS can't filter down for specific services offered by a provider. **Maintaining Service Provider information** **Question:** How do providers see what information is added for their service on MAC? **Answer:** If providers want to see how their organisation appears for their description of services, go to the MAC website and search 'find a service'. It is vital that providers maintain their service availability accurately on MAC and the traffic light information is maintained so RAS know if they can refer or not. Jacqui Bowden, Regional Lead, APM, suggested that providers can send flyers to RAS providers but it is not for RAS to update their information regarding when services start and end. RAS can now search for multiple services under the same provider. **Question** from the audience: Query was raised why providers get referrals for services they don't provide. **Answer:** Providers need to show clearly the services they supply as per workshop discussions. However, if inappropriate referrals are occurring please contact RAS to give information regarding appropriate referrals. RAS regional manager agreed they would be happy to receive emails from providers regarding service information updates. **Web Referrals** RAS managers indicated they don't always see web referrals; this depends on how quickly MAC contact staff upload them. A medical professional web form will go straight to RAS; RAS do see this as received. This form bypasses the MAC contact centre. **Supporting vulnerable consumers with MAC** • **Authorised or Regular representative-**discussed that a representative from the service	

	provider can act on the consumer's behalf for vulnerable consumers (those without supports, CALD, cognitive issues etc.) – consumer consent is required. *An authorised representative* is elected as a legal guardian or power of attorney; this is a signed legal document. A Regular representative is not specified on a legal document such as that required for the authorised representative, but requires consumer consent. **Question**: Jacqui Bowden APM raised the question of what happens when a staff member leaves their job. **Answer:** RAS managers discussed the importance of the staff member discussing their removal as a representative with the consumer, discussing with staff colleagues and phoning MAC to ask to be removed as the representative**.** There was discussion that it is a risk if this process falls down if a staff member leaves. Therefore being a representative may be something that a staff member sets up during the initial processes of service provision with the goal of removing yourself after this stage. **Question**: There needs to be a clear process through MAC for a consumer representative to be set up. **Follow up action**: Since the portal workshop, RAS advised that a Service Provider staff member can either phone or email MAC to be added or removed as a representative. **<u>Incoming Referrals including 'one off' services</u>** '**Add service information'** –providers click the required fields. The provider can add the end date and review date for a referral by clicking the required fields**.** 'Once off' services can have an end date entered so the service doesn't remain sitting in the 'services in place tab'. If it does remain in the 'services in place' and the client calls MAC in future it could prevent them from having another service from a different provider as it will show that they are already receiving services from another provider. If this is an annual once off service, for example, 'once off' gutter cleaning, the end date can be entered to show to yourself and others when the service took place and ended, otherwise the service looks like it is occurring all the time. Providers are able to update service information to accurately show Frequency/ hours and review dates. • **Review dates** However, if the service is an ongoing service provided annually, providers can put in a review date so that the service stays in '*services in place'* and doesn't go back to MAC.	

	Providers click 'update service' information on the consumer/ client's cards **If the consumer's needs change**, for example, the consumer is having falls so he/she can't attend a social support group, the consumer will need to be reassessed by MAC. **The Review of service plan** **Questions**: Why service providers have to do a review of client/ consumer services if RAS do reviews and if service providers are not funded for this. **Follow up of information following the workshop**: The service provider's annual review of the service plan with a consumer is a requirement of service provider's monitoring and assessment, and is part of Home Care standards. CHSP service providers are funded for this review. As per information provided by the Commonwealth Department of Health, at the Eastern Collaborative Forum, 16/8/16, the Department visited CHSP providers in 2014 to discuss assessment fees. Executive Management of CHSP service providers decided that instead of the assessment fee being listed as a separate fee (which was evident under HACC funding), it would be included in the unit costs of CHSP services. This review relates to your organisation's service provision and *does not need to go back to MAC*. The review may identify changes such as an increase or decrease in service provision. It is an opportunity for the provider to update their information on service provision. This review is different to the annual RAS review of the support plan. Service Providers phone a RAS assessor if a consumer has asked for a service to be added. RAS can add this on the support plan.	
Where to next? Review list of identified issues	The group were asked to consider future projects. It was decided to focus on the progress of CHSP and work towards finding answers to questions and issues that providers are experiencing. Providers are still sending the completed spread sheet to the RAS. It was suggested to also email advertising flyers about new services directly to RAS services.	

Wellbeing and Resilience discussion	Sally is working with the Better Practice Project exploring the possibility of delivering workshops to the region to promote wellbeing and resilience. The Because I Can train the trainer workshop is booked for 18 October at Marion Hotel. Places in the course are still available. Training is free.	
Project officer update	Working on an on-line training resource to better engage older people with technology. The training module is being based on a strength and wellbeing philosophy. The dementia and driving films have been completed. They can be viewed on the SSRG website. Resources include a paper based dementia and driving 'tyre' with a written summary of the films as well as two stress balls in the shape of a traffic light and car tyre. The launch of Dementia and Driving project will be held at the SASMA symposium on 23 September at Wayville Showgrounds. There will be cake to celebrate the launch!	
Information sharing	Prue (Life Care) Packages are available in the north for high care clients. Leanne (SAPOL) Will be going on leave in 3 weeks' time. Their department is undergoing a major restructure. Sarah (City of Mitcham) Lunch groups are popular with the clients. Men's group has vacancies. Colouring -in group available, no referrals required. Referrals for home modifications are slowing down. Fiona (SA Health) The office will be relocating to 70 Pirie street very soon.	

	Janine (Care and Share) Waiting for referrals. They will be having a stall at the Ageing and Disability expo at Wayville on 23 September. Theresa (Resthaven) The men's shed is operating 4 days a week. Dianne (Life Without Barriers) Lots of enquiries regarding garden maintenance. There are vacancies in the northern and western areas. They are having a stall at the Ageing and Disability expo.	

Next meeting date: Thursday 22 September 2016
Time: 2.00 - 4.00 pm
Venue: Room CRT, City of Marion