



SOUTHERN SERVICES  
REFORM GROUP

**SSRG Workgroup Meeting  
Aged Care Pathways  
Date: 25/5/17**

Present: Prue Oake, Sarah Jarvis, Lisa Hickson, Janine Callegari, Rachael Fawcett, Theresa Howard-Jones, Fiona Paterson, Jacqui Bowden, Terry Hales, Moira Noonan

Agenda Items	Discussion	Actions
Welcome and apologies	<ul style="list-style-type: none"><li>• Welcome, introductions and apologies</li></ul>	
Previous minutes & business arising	<ul style="list-style-type: none"><li>• Minutes accepted, no business arising</li></ul>	
Discussion re CHSP/HCP survey results response	<p><i>Letter responding to issues raised in the survey:</i></p> <p>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.</p>	

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 27<sup>th</sup> 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 27<sup>th</sup> 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](#)

	<p style="text-align: center;"><a href="#"><u>Care Complaints: Lodge a Complaint</u></a></p> <p>The Department of Health Webinar, 'Home care reforms and ongoing improvements', 15<sup>th</sup> 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 <a href="#"><u>Webinars   Ageing and Aged Care</u></a>.</p> <p>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.</p> <p>To receive regular e-newsletters and announcements to the aged care sector make sure you and your colleagues subscribe to the DoH e-newsletter:  <a href="https://agedcare.health.gov.au/news-and-resources/subscribe"><u>https://agedcare.health.gov.au/news-and-resources/subscribe</u></a></p> <p><i>Discussion</i></p> <ul style="list-style-type: none"> <li>• Some movement is now being seen re packages being released in South Australia</li> <li>• An older person may be accessed as a Level 4 but if none available may be offered a Level 2 in the interim</li> <li>• The interconnection between acute and community can still be an issue. Hospital avoidance scheme – can allocate 2 weeks but often need on-going services</li> <li>• Also an issue – when a TCP ends the older person may then be on a waitlist to access a home care package</li> <li>• Good response rate from Southern ACAT</li> <li>• Some HCP people have been keen to move to what they perceive as a 'better' provider</li> </ul>	
Vulnerable clients resource guide (ECP)	The group viewed the vulnerable client's resource guide. Discussion about adjusting it to be suitable for the south.	Sally to check with Susan re using/changing the resource

Because I Can	Due to lack of time not done – plan to spend most of next session delivering the program	
RAS spreadsheet	The group suggested the RAS information template should be circulated again.	Sally to send it out