



SOUTHERN SERVICES
REFORM GROUP

SSRG Workgroup Meeting
Workgroup: Social Inclusion
Date: 13 November 2012

Present: Sadie Goddard-Wrighton, Louise Fuller, Lisa Elder, Maxine Cape, Karen Beeching, Karen McDougle, Sally Warnes (Project Officer), Bev Bannister (minutes)

Apologies: Heather Trainor, Kasia Parker, Kristina Barnett, Shijun Huang, Vanessa Leane, Lynda Macphail (Chair), Sam Berry

Agenda Items	Discussion	Actions
Welcome & apologies	Welcomes and apologies made Sally chaired the meeting in the absence of Lynda Introductions were made around the table	
Previous minutes/business arising	<ul style="list-style-type: none"> • Minutes accepted • All actions completed • The group had a discussion about appreciative inquiry and the Jeremy Scrivens workshop 	
Project Discussion	<ul style="list-style-type: none"> • Lisa has received a few more calls relating to the postcard <ul style="list-style-type: none"> • Male looking for social support and shopping • Female wanting to be involved in community activities – water exercises and support on how to use an Ipad • A letter, feedback form, poster and postcards were sent to 46 GP practices • 7 feedback forms have been returned - with mixed responses • Members were given the feedback forms to read • Toucan indicated that the target suburb is probably too small to get a really good response from the post card distribution 	

	<ul style="list-style-type: none"> • Postcards have also been distributed to Meals on Wheels and RDNS 	
Planning for stage 2 of the project	<ul style="list-style-type: none"> • Next trial to be done in Holdfast Bay • Postcard to have both HACC and Commonwealth logos • Postcard image will be the lady on the scooter • Need to decide which suburb in the Holdfast Bay region will be targeted - how many residents live in the suburb? • Sadie to get a list of GPs in Holdfast Bay area (as was done in Onkaparinga) Copy of GP letter and feedback form to be emailed to Sadie • Discussion on 'type' of residents in the Holdfast bay region – lonely/socially isolated/more affluent • Trial in Holdfast Bay region to be done late February 2013 • Back of postcard to have some minor changes made <ul style="list-style-type: none"> • Add day trips and movies • Take off tea and scones • Add coffee and chat • The group began exploring new projects for 2013 <ul style="list-style-type: none"> • Volunteer training – package set up to train volunteers - 'right relationships' • Possibly ask Volunteer SA or BPP to deliver the training • Possibly regional training sessions for volunteers – inner and outer south • Volunteering SA website has fact sheets available • Explore topics again in early 2013 	<ul style="list-style-type: none"> • Sadie to check details wanted on the card and inform Sally • Sally to send GP letter and feedback form to Sadie
Sharing of innovative case studies	none	
Project Officer report	<p>Louise gave a report about the Health and Community Informed Choices Project:</p> <p>Summary of Research and Planning to Date</p> <p>❖ Suite of Resources</p> <p>A suite of resources that will connect to already available information in a user friendly, quick and informative way To achieve this outcome a combination of resources will be required. At present, considering a paper based directory (i.e. pokitpal). The pokitpal will contain main</p>	

service types and contact details including websites. Through the use of a number of QRcodes attached to some services, the user will be directed to specific information and websites. It will also link into the app which will enhance available information. The health professional will also be able to download the free app and retrieve the same information from a different starting point.

More than just facts - Enhance Community Services

The resources will highlight/enhance the importance of community services which will result in an increased understanding of services and knowledge that will lead to appropriate referrals. Include prompts or questions for the users like

Is there a carer?

Are they linked to council services?

How will your client access domestic assistance?

Is your client requiring ongoing or short term services?

Pilot Project

Due to budget restraints it will be most unlikely that we can trial resources at specific sites and then refine the design before releasing the resources to the target group. (Small print runs much more costly)

Therefore, it has been suggested the need to develop a relationship with a couple of organisations (or sections of) where management is keen and encouraging about the project and will provide quality feedback types of resources, vital information and on draft versions of the resources. Jacqui suggested an inner south and an outer south project site.

Finally, the development of presentations (i.e. PowerPoint) will accompany the introduction of the resource.

Innovative Project Forum - showcasing projects in the southern region. The forum is scheduled for 23 November at the Marion Hotel

Demystifying Consumer Directed Care Conference – Brief notes taken at the conference:

Ben Vincent: Department of Health and Ageing

- From July 2013 all NEW packages offered CDC then.....July 2015 ALL packages will be CDC
- Number of high care packages increasing
- From July 2013 – Level 1,2,3 & 4

Level 1 – basic needs

Level 2 – equivalent to CACP

Level 3 – Intermediate needs
Level 4 – equivalent to EACH
Also behavioural supplement for Dementia and Veterans
EACH D will be level 4 with supplement

- CDC – more choice and control
- Will be offering 3 levels of control – lower level high case management fees / higher level low case management fees
- Some different models, one being....Capacity building model – intensive case management initially and then tapered off and client takes over

- 2 phases of development

Phase 1: define and design elements with working groups (National Aged Care Alliance – NACA) Questions would include eligibility, how to control, how to set budgets

Phase 2: includes program guidelines, evaluation framework

What is likely to come about?

1. Individual transparent budget
2. Scope of services should be broader
3. ACAT – when assessed if eligible for level 2 then also eligible for level 1, if eligible for level 4 also eligible for level 3
4. Development of detailed information for assessors, consumers and providers
5. Evaluation strategy developed

Want the sector and Government to work together – co-design model

Compliance / police checks – no answer yet
A seamless continuum of care will be established

Home support will have a reablement focus.

No substantial changes until after July 2015

Gateway: My Aged Care Website
National Call Centre

National Assessment Framework

- Standardise assessment
- Seamless and equitable
- Graduated continuum of services

	<p>Pat Sparrow: COTA Rights Issue....fundamental right – fair, equitable and transparent</p> <p>Coral Trowbridge: Flinders University</p> <p>Client centred care – ‘Client being the ‘cog’ of the support. The services are the spokes. If one is missing the wheel can’t turn easily.</p>	
Information sharing	<p>Karen – Resthaven</p> <ul style="list-style-type: none"> • Vacancies at Ridgeway House • New social groups – send referrals for outer south to Karen • Aldinga Shed vacancies – arts and crafts <p>Karen - ACH</p> <ul style="list-style-type: none"> • Most programs close down for a couple of weeks over Christmas 	
Next Meeting	<p>Tuesday 12 February 2013 9.30 -11.30 am Civic Area, City of Onkaparinga</p>	