



Australian Government

Department of Social Services

Commonwealth Home Support Programme

Programme Manual 2015

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FOREWORD

As part of broader changes to aged care that will offer frail, older people and their carers more choice, easier access and better care, the Australian Government launched the Commonwealth Home Support Programme on 1 July 2015.

The Commonwealth Home Support Programme builds on the strengths of home support programmes which came before it and from 1 July 2015 consolidates the following programmes to create a streamlined source of support for frail, older people living in the community and their carers:

- The Commonwealth Home and Community Care (HACC) Program
- Planned respite services under the National Respite for Carers Program (NRCP)
- The Day Therapy Centres (DTC) Program
- The Assistance with Care and Housing for the Aged (ACHA) Program.

The Commonwealth Home Support Programme will deliver the entry-level tier of support in an increasingly responsive, integrated and client-centred aged care service system, delivering a relatively small amount of care and support to a large number of frail, older people to help them to remain living at home.

The amalgamation of programmes is supported by My Aged Care through:

- a central client record to allow client information to be appropriately shared with assessors and service providers
- a consistent, streamlined assessment process
- better access to relevant and accurate information (for clients, carers and family members, service providers and assessors)
- appropriate referrals for assessments and services.

These supports will improve client outcomes by providing more consistent and integrated care.

This Programme Manual does not apply to HACC services in Western Australia or Victoria.

Negotiations for transitioning HACC services for older people are underway with the Victorian and Western Australian governments. HACC services for older people in Victoria and Western Australia will continue to be provided under the Commonwealth-State jointly funded HACC Program until these are transitioned to the Commonwealth.

Older people in Victoria and Western Australia will also be able to access services under the Commonwealth Home Support Programme that were previously delivered through the NRCP (planned respite services), DTC and ACHA programmes.

The Government will provide funding of more than \$1.64 billion in 2015-16 for the Commonwealth Home Support Programme which will assist over half a million older people.

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PART A

The Programme

CHAPTER 1 – OVERVIEW OF THE PROGRAMME

1.1 Introduction

What is the Purpose of this Programme Manual?

This Manual outlines the requirements supporting the delivery and management of the Commonwealth Home Support Programme, which commenced on 1 July 2015.

It is primarily for use by grant recipients, and forms part of their Grant Agreement.

Operational and administrative requirements for grant recipients are outlined in this Manual at:

- Part A – The Programme (and Appendices) – detailing the delivery of Commonwealth Home Support Programme services including operational requirements
- Part B – Administration of the Programme (and Appendices) – detailing grant recipient and Departmental obligations for administration of the Commonwealth Home Support Programme, including funding and reporting arrangements.

The Commonwealth Home Support Programme Manual 2015 replaces:

- The Commonwealth HACC Program Manual 2012
- The National Respite for Carers Program (NRCP) – (for planned respite service providers) - Respite Service Providers' Program Manual July 2014
- The Assistance with Care and Housing for the Aged (ACHA) Program – Program Manual July 2014
- The Day Therapy Centre (DTC) Program – Program Manual 2012.

The ongoing implementation of the Commonwealth Home Support Programme will be reviewed and monitored. This Programme Manual may be updated or varied in the future from time to time.

Consultation

This Programme Manual was informed by advice from the National Aged Care Alliance and its Commonwealth Home Support Programme Advisory Group and feedback received from peak groups, organisations and individuals during consultations on the draft Manual in early 2015.

Terminology

In this Programme Manual, the term 'grant recipient' refers to service providers or organisations funded to provide services under the Commonwealth Home Support Programme. This term is used interchangeably with 'service provider' throughout the Manual.

A glossary of terms is provided at the back of this Programme Manual.

Scenarios

A range of scenarios have been provided within the Programme Manual to demonstrate how the Commonwealth Home Support Programme may be implemented and the interface between this and other programmes. In addition, Appendix A provides a diagram of the service provider interactions with My Aged Care and Appendix B provides a diagram of client interactions with My Aged Care.

More Information

This Programme Manual is available on the Department of Social Services (www.dss.gov.au/chsp) (DSS) website.

Inquiries about individual services or funding matters must be referred to the Commonwealth Home Support Programme grant recipient help desk on 1800 625 136 or email grants@dss.gov.au.

The community can access information about Commonwealth Home Support Programme services from the My Aged Care (www.myagedcare.gov.au) website and by calling the My Aged Care contact centre on 1800 200 422.

1.2 Overview of the Commonwealth Home Support Programme

1.2.1 Vision

The Commonwealth Home Support Programme will help frail, older people living in the community to maximise their independence.

Through the delivery of timely, high quality entry-level support services taking into account each person's individual goals, preferences and choices – and underpinned by a strong emphasis on wellness and reablement – the Commonwealth Home Support Programme will help frail, older people stay living in their own homes for as long as they can and wish to do so.

In recognition of the vital role that carers play, the Commonwealth Home Support Programme also supports care relationships through providing respite care services for frail, older people which allows regular carers to take a break from their usual caring responsibilities.

1.2.2 Definition of Entry-level Support

The Commonwealth Home Support Programme provides a strategy for delivering small amounts of timely low level home support services to large numbers of frail, older people.

The term 'entry-level' refers to home support services provided at a low intensity on a short-term or ongoing basis, or higher intensity services delivered on a short-term or episodic basis.

The defining feature of the entry tier is that services delivered to a client are, in total, generally lower than the cost or volume provided in a Home Care Package per annum. Clients who require higher intensity levels of ongoing care and support may be eligible for a Home Care Package. Another characteristic of entry-level support relates to the case management needs of the client.

Where ongoing case management is required to provide a package of care and services, this can signal that the client may need a Home Care Package.

Client Scenario – Entry-level support

While visiting his elderly mother, Joyce, from interstate, a son notices that she is not eating well at home and seems low in spirits. When they discuss this, Joyce admits that her closest friend has moved interstate to live with family, and this has affected her. She has lost interest in eating and has not seen her other friends at the local Seniors Centre as she doesn't drive.

Joyce and her son call the My Aged Care contact centre and she consents for the contact centre to register her as a client and create a client record. The initial screening identifies she is feeling isolated due to lack of mobility and has concerns about her nutrition. The contact centre organises for Joyce to receive a face-to-face assessment by a My Aged Care Regional Assessment Service (RAS).

The RAS assessor discusses Joyce's needs and goals and establishes a Support Plan that includes: seeing a Commonwealth Home Support Programme funded Accredited Practising Dietitian in the community on a short-term basis to discuss any nutrition issues and community transport to her local Seniors Centre where she will see her friends again. This entry-level support helps Joyce to re-connect with her community, improve her physical and emotional health and continue living in her own home.

1.2.3 Position in the Australian Government's End-to-end Aged Care System

From 1 July 2015, entry and assessment for the Commonwealth Home Support Programme are through My Aged Care, an identifiable entry point to the aged care system for older people, their families and carers.

My Aged Care will be expanded in 2015. The table below details what is being introduced, and why it is being introduced.

What is being introduced	Why it is being introduced
Central client record.	To facilitate the collection and sharing of client information. This helps reduce the number of times clients need to tell their story. Advice for service providers on how and when to update the client record is available on the My Aged Care website.
My Aged Care Regional Assessment Service (RAS).	To conduct face-to-face assessments for clients seeking to access Commonwealth Home Support Programme services.

National Screening and Assessment Form (NSAF).	To ensure a nationally consistent and holistic screening and assessment process. The form will be used by contact centre staff, the RAS and existing Aged Care Assessment Teams (ACATs).
Web-based portals for clients, assessors and service providers.	<ul style="list-style-type: none"> • Client portal - to view their client record and update personal details. • Assessor portal - to manage referrals, use the NSAF and update the client record. • Provider portal - to manage service information, referrals and update the client record. <p>This helps achieve efficient and effective ways for clients, assessors and providers to interact with My Aged Care.</p>
Service providers will self-manage information about the services they deliver.	This information will be presented on the service finders via My Aged Care, and will support accurate referral of clients to services.
Enhanced service finders that include information about non-Commonwealth funded services.	To enable the provision of information about non-Commonwealth funded aged care services to clients and the public.

This streamlined entry to aged care will make it easier for frail, older people to access information on ageing and aged care, have their needs assessed and be supported to locate and access services available to them, including entry-level support.

The Commonwealth Home Support Programme represents the entry tier of the aged care system. In conjunction with the Home Care Packages Programme, residential aged care and other specialised aged care programmes, it forms part of an end-to-end aged care system offering frail, older people a continuum of care options as their care needs change over time.

As people age, they can develop conditions or experience increased frailties which impede their ability to continue living in their own home. Investment in entry-level support can delay the need to move to more intensive forms of care. This benefits older people through increasing their independence and quality of life as well as reducing calls on government outlays for other forms of care, such as residential aged care.

The Commonwealth Home Support Programme is designed to provide relatively small amounts of a single service or a few services for frail, older people when this is sufficient in maintaining independent community living and wellbeing; or a higher intensity of episodic or short-term services where improvements in function or capacity can be made, or further deterioration avoided.

The Commonwealth Home Support Programme complements the Australian Government's Home Care Packages Programme, which is designed to support older people living in the community whose care needs exceed the level of support which can be provided through the

Commonwealth Home Support Programme, and provides consumers with higher intensity, ongoing services as well as an individualised budget that the consumer controls. Frail, older people who require higher levels of ongoing support are also able to access Australian Government subsidised residential aged care places.

The Commonwealth Home Support Programme is designed to play an important role in supporting frail, older people to delay, or avoid altogether, the need to move into more expensive forms of aged care, so that whole-of-system aged care costs can be kept at a sustainable level as the population ages and the number of people requiring aged care increases.

A range of studies, both in Australia and overseas, have shown a positive relationship between receiving community services and delay/avoidance of more expensive residential care admissions. They have also shown that the earlier older people receive community care services, the longer their admission to more expensive forms of care can be delayed.

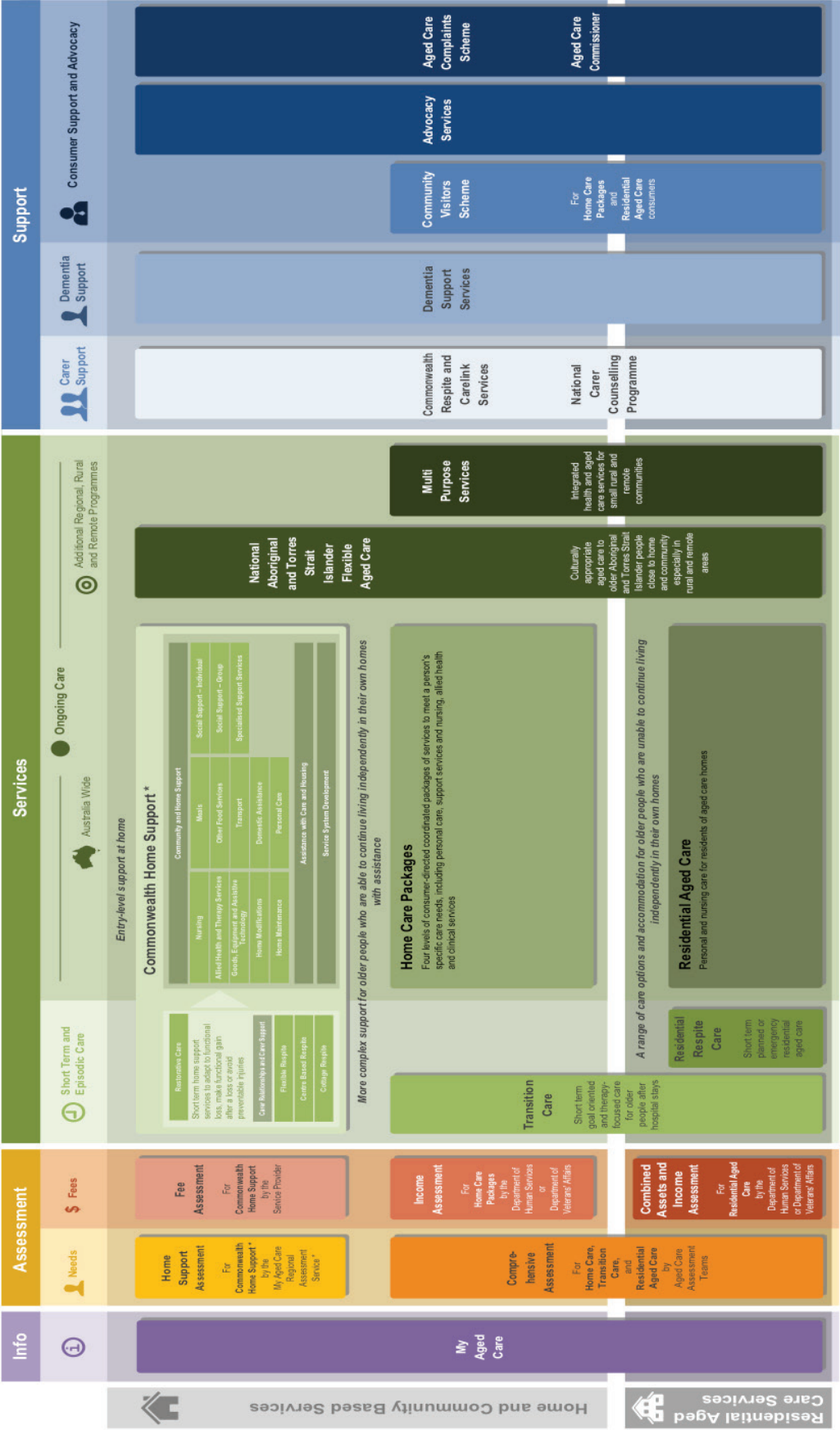
The diagram on the following page represents the aged care system that will be in place from July 2015, noting that an expanded aged care advocacy program will be implemented from 1 July 2016. It is also recognised that episodic delivery of respite services depicted in the diagram through the Care Relationships and Carer Support service types may be delivered over a longer, indefinite time period.

As part of the 2015 Budget, the Government announced changes to improve the way that home care services are delivered to older Australians. The changes will give older Australians greater choice in deciding who provides their care, and will establish a consistent national approach to prioritising access to care.

These changes are a key step in moving to a less regulated, more consumer-driven and market-based aged care system. Following consultation with stakeholders, the changes will be implemented in two stages:

- From February 2017, Australians receiving home care packages will be able to choose their approved provider, and have the flexibility to change their provider. There will be increased competition, leading to enhanced quality and innovation in service delivery, and reduced regulation and red tape for providers.
- From July 2018, the Government intends to integrate the Home Care Packages Programme and the Commonwealth Home Support Programme into a single care at home programme. This will make the system easier for consumers to navigate and further reduce red tape for providers.

In combination, these changes will lead to a simpler, more sustainable, accessible and client-centred aged care system that will serve the needs of more frail, older people and their carers.



1.2.4 Objectives

The objectives of the Commonwealth Home Support Programme are to:

1. Provide high-quality support, at a low intensity on a short-term or ongoing basis, or higher intensity services delivered on a short-term or episodic basis, to frail, older people to maximise their independence at home and in the community for as long as they choose, thereby enhancing their wellbeing and quality of life
2. Support frail, older clients aged 65 years and over (50 years and over for Aboriginal and Torres Strait Islander people) through the direct service delivery of planned respite services, which will allow regular carers to take a break from their usual caring duties and support care relationships
3. Support clients to delay, or avoid altogether, the need to move into more expensive forms of aged care (such as Home Care or residential aged care), so that whole-of-system aged care costs can be kept at a sustainable level as the population ages and the number of people requiring care increases
4. Ensure that all clients, including those with special needs, have equity of access to services that are socially and culturally appropriate and free from discrimination
5. Ensure through the quality framework, including the Home Care Standards, that clients receive high quality services
6. Facilitate client choice – to enhance the independence and wellbeing of older people, and ensure that services are responsive to the needs of clients
7. Provide flexible, timely services that are responsive to local needs

In certain circumstances, services may be provided to people outside the identified target groups for the Commonwealth Home Support Programme as noted in Section 1.2.8 of this Programme Manual.

1.2.5 Outcomes

The intended outcomes of the Commonwealth Home Support Programme are:

- Frail, older people with functional limitations are supported to live in their own homes
- Frail, older people have increased social participation and access to the community, including through the use of technology
- Frail, older people's psychological, emotional and physical wellbeing and functional status is maintained and/or improved
- Frail, older people are supported to be more independent at home and in the community, thereby enhancing their quality of life and/or preventing or delaying their admission to long-term residential care
- Frail, older people are supported in a safe, stable and enabling environment
- Carers and care relationships are supported
- Sustainability and service innovation is improved
- Equitable and affordable access to services is provided.

1.2.6 Key Features

The Commonwealth Home Support Programme will:

- Provide streamlined entry-level support services
- Be supported by My Aged Care in providing access to information and services through:
 - a central client record to allow client information to be appropriately shared with assessors and service providers
 - a consistent, streamlined assessment process
 - better access to relevant and accurate information (for clients, carers and family members, service providers and assessors)
 - appropriate referrals for assessments and services
- Deliver services and support with a strong focus on wellness, reablement and restorative care
- Provide targeted sector support and development activities
- Promote equity and sustainability through a nationally consistent fees framework
- Reduce red-tape for grant recipients through streamlined contractual obligations such as consistent record keeping processes and simplified funding arrangements and reporting requirements.

1.2.7 Service Delivery Principles

Commonwealth Home Support Programme grant recipients will implement the service delivery principles below when developing, delivering or evaluating services directed to clients:

- Promote each client's opportunity to maximise their capacity and quality of life through:
 - being client-centred and providing opportunities for each client to be actively involved in addressing their goals
 - focusing on retaining or regaining each client's functional and psychosocial independence
 - building on the strengths, capacity and goals of individuals
- Provide services tailored to the unique circumstances and cultural preference of each client, their family and carers
- Ensure choice and flexibility is optimised for each client, their carers and families
- Emphasise responsive service provision for an agreed time period and with agreed review points
- Support community and civic participation that provide valued roles, a sense of purpose and personal confidence
- Develop and promote strong partnerships and collaborative working relationships between the person, their carers and family, support workers and grant recipients.

1.2.8 Target Groups

All new Commonwealth Home Support Programme clients will access services through My Aged Care. Target groups for the Commonwealth Home Support Programme are:

- Frail, older people (aged 65 years and over or 50 years and over for Aboriginal and Torres Strait Islander people) and who need assistance with daily living to remain living independently at home and in the community
- Frail, older Commonwealth Home Support clients aged 65 years and over (50 years and over for Aboriginal and Torres Strait Islander people) will be the direct service recipients of planned respite services, which will allow regular carers to take a break from their usual caring duties
- People aged 50 years and over on a low income who are homeless or at risk of homelessness as a result of experiencing housing stress or not having secure accommodation
- Grant recipients funded under the Commonwealth Home Support Programme and their service delivery client base.

In certain circumstances, Commonwealth Home Support Programme services may be provided to people who do not meet the target group criteria and who need assistance with daily living to remain living independently at home and in the community.

These circumstances include::

- The client is receiving a certain level of care under a programme that was consolidated under the Commonwealth Home Support Programme and should therefore expect to retain this service level until other suitable care options become available
- Specific arrangements have been agreed to by the respective state or territory governments and the Commonwealth
- It is required to give effect to transition arrangements necessary to support the consolidation of the Commonwealth HACC, NRCP (planned respite), DTC and ACHA programmes within the Commonwealth Home Support Programme
- DSS (the Commonwealth Home Support Programme) determines that other circumstances justify the delivery of services to a younger person.

The Commonwealth Home Support Programme is structured around the target groups identified above. Specific eligibility will apply for each Sub-Programme that targets these groups. Chapter 2 of this Programme Manual provides more detail on Sub-Programmes and eligibility.

Carers

Carers are integral to ensuring the quality of life and independence of frail, older people. In recognition of the vital role that carers play in supporting frail, older people to remain living at home and in the community, the Commonwealth Home Support Programme will support the care relationship through contributing funding towards a range of planned respite services delivered to frail, older people. These services are provided under the Care Relationships and Carer Support Sub-Programme.

The Commonwealth Home Support Programme is complemented by access to emergency respite services provided through the Commonwealth Respite and Carelink Centres and services provided through the National Carer Counselling Program and Carer Information Support Service. The Commonwealth is developing options for future carer services in the context of,

and in alignment with, the aged care and disability reforms, working towards a more integrated response for carer services.

As announced in the May 2015 Budget, the Australian Government has introduced the Integrated Plan for Carer Support Services (Plan) which will consolidate carer programmes (excluding planned respite) from aged care, disability and mental health and create for carers, a specific gateway to access supports. This measure will streamline pathways to services for carers, which are often confusing, particularly for carers who have multiple caring responsibilities.

DSS will provide further information updates as the development of the Plan progresses and as the need for carer and sector expertise is required.

A critical aspect in the Plan is to work together with carers and the sector to co-design the development. Key principles which will guide the process include ensuring the Plan is:

- carer centric
- designed based on the experience of carers
- based on evidence about what works to support carers.

DSS will be seeking contribution from organisations which deliver support to carers as part of this process.

1.2.9 Special Needs Groups

The Commonwealth Home Support Programme will recognise people with cultural or other special needs with appropriate services which reflect the diversity of the population.

The Commonwealth Home Support Programme recognises the following special needs groups, which align with those identified under the *Aged Care Act 1997*:

- People from Aboriginal and Torres Strait Islander communities
- People from culturally and linguistically diverse backgrounds
- People who live in rural and remote areas
- People who are financially or socially disadvantaged
- Veterans
- People who are homeless, or at risk of becoming homeless
- People who are lesbian, gay, bisexual, transgender and intersex
- People who are care leavers
- Parents separated from children by forced adoption or removal.

The concept of special needs within the Commonwealth Home Support Programme is not intended as a principle for generally prioritising access to services for an individual client over another. Rather, the identification of particular groups recognises that each person is unique and has different beliefs, values, preferences and life experiences, and that for some people these differences may result in barriers to accessing or using services.

The Commonwealth Home Support Programme will:

- Ensure that all clients have equity of access to services and that support is accessible, appropriate and free from discrimination
- Ensure that services are delivered in a way that is culturally safe and appropriate for older people from diverse backgrounds
- Ensure through the quality framework, including the Home Care Standards, that grant recipients consider the requirements of special needs groups
- Support access by grant recipients to translation and interpreting services
- Consider equity of access for special needs groups in the allocation of new funding.

These principles support the goals identified in the Australian Government's '*National Ageing and Aged Care Strategy for People from Culturally and Linguistically Diverse Backgrounds*' and '*National Lesbian, Gay, Bisexual, Transgender and Intersex Ageing and Aged Care Strategy*'. Information on how service providers and clients can access interpreting services is available at www.dss.gov.au/chsp

People with Dementia

The Australian Government considers the provision of appropriate care and support of people with dementia, their families and carers to be core business for all providers of aged care, given its prevalence amongst older people.

The Australian Government funds a range of advisory services, education and training, support programmes and other services for people with dementia, their families and carers. Commonwealth Home Support Programme clients may access these supports if appropriate to their needs.

1.2.10 Programme Philosophies

Maximising Independence

A fundamental objective of the Commonwealth Home Support Programme is to maximise clients' independence and to emphasise an increased focus on ways of working aimed at maximising client autonomy (known in the aged care literature as wellness, reablement and restorative care).

Wellness, reablement and restorative approaches are emerging as powerful ways to help older people improve their function, independence and quality of life, although they are not new concepts in aged care. In Australia, Victoria and Western Australia are already operating with a wellness focus embedded in their programs and services. Other states and territories have also taken significant steps to introduce a wellness approach and some individual organisations in those jurisdictions are using well developed wellness practices.

The *Living well at home: CHSP Good Practice Guide* seeks to build on existing examples of good practice and draw on the communications, capacity-building and training products that have been developed over a number of years in all jurisdictions and overseas.

The design of the Commonwealth Home Support Programme is founded on a wellness approach that is to be embedded at all levels of the programme, including assessment, support planning and service delivery. The provision of reablement and restorative care services are complementary methods of interventions.

Wellness can be applied across all service outcomes with the aim to promote independence and autonomy. The terms reablement and restorative care may be used to describe specific and time limited interventions and supports, with reablement aimed at adaption to changed circumstances and restorative care aimed at measurable improvements in an individual's capacity or function.

Wellness is a philosophy based on the premise that even with frailty, chronic illness or disability, people generally have the desire and capacity to make gains in their physical, social and emotional wellbeing and to live autonomously and as independently as possible.

A wellness approach involves assessment, planning and delivery of supports that build on the strengths, capacity and goals of individuals, and encourages actions that promote a level of independence in daily living tasks, as well as reducing risks affecting the ability to live safely at home. It avoids 'doing for' when a 'doing with' approach can assist individuals to undertake a task or activity themselves, or with less assistance, and to increase satisfaction with any gains made.

The wellness approach underpins all assessment and service provision and applies even when the need for assistance is episodic, fluctuates in intensity or type over time, or is of an ongoing nature.

Like wellness, reablement aims to assist people to reach their goals and maximise their independence and autonomy. However, reablement involves time-limited interventions that are more targeted towards a person's specific goal or desired outcome to adapt to some functional loss, or regain confidence and capacity to resume activities. Supports could include training in a new skill, modification to a person's home environment or having access to equipment or assistive technology.

In the Commonwealth Home Support Programme, reablement is embedded within the My Aged Care assessment, referral and service pathway. It will be supported by the My Aged Care RAS that will identify opportunities for clients to be as independent as is practical, potentially reducing the need for ongoing and/or higher levels of service delivery.

For a smaller sub-set of older people, restorative care may also be appropriate, where assessment indicates that the client has potential to make a functional gain.

Restorative care involves evidence based interventions led by an allied health worker or professional that allows a person to make a functional gain or improvement after a setback, or in order to avoid a preventable injury.

Restorative care interventions implemented through the Commonwealth Home Support Programme will be coordinated by providers of allied health and therapy services who will help clients set (functional) goals and review their progress after a defined period.

Grant recipients will be expected to adopt a wellness approach in their service delivery practices and:

- Interpret the support plan with a wellness approach in mind and in consultation with the client

- Work with individuals and their carers, as they seek to maximise their independence and autonomy
- Build on the strengths, capacity and wishes of individuals, and encourage actions that promote self-sufficiency
- Embed a cultural shift from 'doing for' to 'doing with' across service delivery
- Be alert to changing circumstances and goals of the client and consult with the My Aged Care RAS where appropriate to review the client's support plan
- Consult the *Living well at home: CHSP Good Practice Guide* to assist in the development of good practices within a wellness approach (www.dss.gov.au/chsp).

Consumer Direction

In partnership with a wellness approach, consumer direction under the Commonwealth Home Support Programme will drive a model of service delivery that focuses on a client's life goals and strengths. It will empower individuals to take charge of, and participate in, informed decision-making about the care and services they receive. Clients will:

- Have access to detailed information on aged care options provided through My Aged Care
- Actively participate in assessment of their needs through a two-way conversation with My Aged Care assessors
- Identify any special needs, life goals, strengths and service delivery preferences
- Have their carer's needs recognised and assessed with assessors from My Aged Care
- Have access to free, independent and confidential advocacy services
- Have options on how to select their preferred grant recipient (if they choose to) from information available through My Aged Care
- Have access to client feedback mechanisms including the Aged Care Complaints Scheme.

Commonwealth Home Support Programme grant recipients must:

- Establish client consent to receive services as a prerequisite for all service delivery
- Ensure opportunities for client choice and flexibility are provided for each client, their carers and families
- Invite clients to identify their preferences in service delivery and where possible honour that request
- Deliver services tailored to the unique circumstances and cultural preferences identified by each client, their family and carers where possible
- Comply with the Charter of Rights and Responsibilities for Home Care (excluding the rights expressed at 3A) (see link at Appendix D of this Programme Manual)
- Provide clients with a copy of the Charter of Rights and Responsibilities for Home Care
- Manage their service information via the My Aged Care provider portal to assure accurate information is presented publically through the My Aged Care service finders and to support appropriate referrals to services by the contact centre and assessors
- Manage client referrals via the My Aged Care provider portal by accepting, rejecting or waitlisting a client for service

- Manage a central client waitlist within the My Aged Care provider portal – accepting clients from this list for service as services become available
- Where a client is accepted for service, update the client record through the My Aged Care provider portal with service delivery information, including frequency and intensity of services.

The Commonwealth Home Support Programme does not provide individual budgets like the Home Care Packages Programme. However, its approach to consumer direction complements the high-level principles for the Home Care Packages Programme. These include consumer choice and flexibility, consumer rights and participation.

Client Scenario – Consumer Direction

Steven receives domestic assistance support under the Commonwealth Home Support Programme. One week he decides that, instead of having the house vacuumed, his preference is for the worker to clean his fridge and pantry.

1.2.11 What Services Are Funded Under the Commonwealth Home Support Programme?

The following service types, including the activities or sub-types under each, are available under the Commonwealth Home Support Programme:

Sub-Programme	Service type	Service sub-type
Community and Home Support	Domestic Assistance	General House Cleaning
		Unaccompanied Shopping (delivered to home)
		Linen services
	Personal Care	Assistance with Self-Care
		Assistance with client self-administration of medicine
	Social Support Individual	Visiting
		Telephone/Web Contact
		Accompanied Activities, e.g. Shopping
	Other Food Services	Food Advice, Lessons, Training, Food Safety

		Food Preparation in the Home
	Nursing	N/A
	Allied Health and Therapy Services	Podiatry
		Occupational Therapy
		Physiotherapy
		Social Work
		Speech Pathology
		Accredited Practising Dietitian or Nutritionist
		ATSI Health Worker
		Psychologist
		Ongoing Allied Health and Therapy Services
		Restorative Care Services
		Diversional Therapy
		Exercise Physiologist
		Other Allied Health and Therapy Services
	Social Support Group	N/A
	Home Modifications	N/A
	Home Maintenance	Minor Home Maintenance and Repairs
		Major Home Maintenance and Repairs
		Garden Maintenance
	Goods, Equipment and Assistive Technology	Self-care aids
		Support and mobility aids

		Medical care aids
		Communication aids
		Other goods and equipment
		Reading aids
		Car Modifications
	Meals	At Home
		At Centre
	Transport	Direct (driver is volunteer or worker)
		Indirect (through vouchers or subsidies)
	Specialised Support Services	Continence Advisory Services
		Dementia Advisory Services
		Vision Services
		Hearing Services
		Other support services
		Client Advocacy
		Carer Support
Assistance with Care and Housing	Assistance with Care and Housing	Assessment - Referrals etc.
		Advocacy - Financial, Legal etc.
Care Relationships and Carer Support	Flexible Respite	In-home Day Respite
		In-home Overnight Respite
		Host Family Day Respite
		Host Family Overnight Respite

		Community Access - Individual respite
		Other planned respite
		Mobile Respite
	Cottage Respite	Overnight Community Respite
	Centre-based Respite	Centre Based Day Respite
		Community Access - Group
		Residential Day Respite

In addition, under the Commonwealth Home Support Programme's Service System Development Sub-Programme, Sector Support and Development activities will be funded. These services are funded under specific Sub-Programmes based on the Commonwealth Home Support Programme target groups (Section 1.2.8). Details of each Sub-Programme, including eligibility and service types, are provided in Chapter 2 of this Programme Manual.

Other Support Services

As part of the transition into the Commonwealth Home Support Programme, in certain circumstances funding is being used for the provision of activities additional to those listed under Section 1.2.11 of this Programme Manual. This must be agreed between DSS and the grant recipient and refers to some services previously funded under the Commonwealth HACC, ACHA, DTC and NRCP programmes.

1.2.12 What Services Must Not Be Purchased Using Commonwealth Home Support Programme Funding?

- Purchase of land
- Coverage of retrospective costs
- Costs incurred in the preparation of a grant application or related documentation
- Major construction/capital works
- Overseas travel
- Activities that are already funded under other Commonwealth, state, territory or local Government programs because it is their responsibility to fund them (except where grandfathering arrangements are operating)
- Activities that could bring the Australian Government into disrepute
- Client accommodation expenses, as these are provided for within the social security system (note: Assistance with Care and Housing Sub-Programme services deliver assistance with accessing appropriate support)
- Direct treatment for acute illness, including convalescent or post-acute care
- Medical aids, appliances and devices which are to be provided as a result of a medical diagnosis or surgical intervention and which would be covered under a Health Care system,

such as oxygen tanks or continence pads

- Household items which are not related to the functional impairment (i.e. general household or furniture or appliances)
- Items which are likely to cause harm to the participant or pose a risk to others
- Other activities as outlined in this Programme Manual and updated from time to time.

The following are former Commonwealth HACC Program services now delivered under My Aged Care:

- Assessment – from 1 July 2015 undertaken via initial phone based screening by the My Aged Care contact centre and face-to-face assessments conducted by the My Aged Care RAS
- Case Management – short term case management services will be available for vulnerable Commonwealth Home Support Programme clients through My Aged Care linking services delivered by the RAS.

Client Care Coordination is not funded as a separate service type under the Commonwealth Home Support Programme as this function is considered intrinsic to ongoing service delivery.

1.2.13 Where Will Commonwealth Home Support Programme Services Not Be Provided?

Commonwealth Home Support Programme services will not be offered:

- To permanent residents of residential aged care facilities (except under grandfathering arrangements or a full-cost recovery basis)
- Where a resident's accommodation contract provides for similar services to those under the Commonwealth Home Support Programme.

Services can be offered to people in retirement villages and independent living units, where a resident's accommodation contract does not include Commonwealth Home Support Programme-like services.

The My Aged Care screening process will help identify what existing services a client is receiving including accommodation services subsidised by Government.

1.2.14 Policy Context

Broader Aged Care Changes

In addition to combining existing home support programmes under a single Commonwealth Home Support Programme, the broader aged care agenda includes:

- My Aged Care as the key entry point to Australia's aged care system, which will make it easier for older people, their families and carers to access the aged care services that best meet their needs. From 1 July 2015, My Aged Care introduced nationally:
 - a central client record to allow client information to be appropriately shared with assessors and service providers
 - a consistent, streamlined assessment process

- better access to relevant and accurate information (for clients, carers and family members, service providers and assessors)
- appropriate referrals for assessments and services.
- From 1 July 2015, all Home Care Packages have a strong focus on client directed care and choice. Consumer Directed Care is a model of service delivery that gives consumers more choice and flexibility about the types of care and services they access, how the care is delivered and who delivers it to them
- The introduction of a more consistent and sustainable fees framework
- Removal of the former distinction between high and low care in residential aged care
- From 1 July 2014 the Australian Aged Care Quality Agency commenced, monitoring quality consistently across the sector benefiting both industry and clients
- National voluntary quality indicators are being developed for aged care and will be published on the My Aged Care website. Quality indicators (QI) will measure aspects of service provision which contribute to the quality of care given by the care provider
- Publication of QI information will provide consumers, their families and carers with information to assist with choosing services that meet their needs and initiating discussions with their service provider about quality and service delivery. QI information will also be a tool providers can use for their continuous quality improvement activities.

The Aged Care (Living Longer Living Better) Act 2013 provides for an independent review of the reforms to commence as soon as practicable after 1 August 2016 with a written report of the review to be given to the Minister by 1 August 2017. The Minister must table a copy of the report in both Houses of Parliament within 15 sitting days of receiving it.

Carers

Carers make a significant contribution to the lives of the older people they care for and an important economic contribution to the community. The Commonwealth Home Support Programme reflects priorities and principles identified within the National Carer Recognition Framework and *The Carer Recognition Act (Commonwealth) 2010* (www.comlaw.gov.au/Details/C2010A00123).

Commonwealth Home Support Programme service provision is expected to embody the principles incorporated in the Statement for Australia's Carers under the *Carer Recognition Act 2010*, including the following:

1. All carers should have the same rights, choices and opportunities as other Australians, regardless of age, race, sex, disability, sexuality, religious or political beliefs, Aboriginal or Torres Strait Islander heritage, cultural or linguistic differences, socioeconomic status or locality.
2. Children and young people who are carers should have the same rights as all children and young people and should be supported to reach their full potential.
3. The valuable social and economic contribution that carers make to society should be recognised and supported.

4. Carers should be supported to enjoy optimum health and social wellbeing and to participate in family, social and community life.
5. Carers should be acknowledged as individuals with their own needs within and beyond the caring role.
6. The relationship between carers and the persons for whom they care should be recognised and respected.
7. Carers should be considered as partners with other care providers in the provision of care, acknowledging the unique knowledge and experience of carers.
8. Carers should be treated with dignity and respect.
9. Carers should be supported to achieve greater economic wellbeing and sustainability and, where appropriate, should have opportunities to participate in employment and education.
10. Support for carers should be timely, responsive, appropriate and accessible.

All Commonwealth Home Support Programme grant recipients are to take all practicable measures to ensure that:

- (a) their officers, employees and agents have an awareness and understanding of the Statement for Australia's Carers; and
- (b) they, and their officers, employees and agents, take action to reflect the principles of the Statement in developing, implementing, providing or evaluating care supports.

Further Information:

The Australian Government's reform agenda is available on the Department of Social Services (www.dss.gov.au) website. Detail on the Commonwealth Home Support Programme is available at Commonwealth Home Support Programme (www.dss.gov.au/chsp). Information on My Aged Care for service providers is available on the Department of Social Services (www.dss.gov.au/MyAgedCare) website.

CHAPTER 2 – SUB-PROGRAMMES: ELIGIBILITY AND SERVICES

2.1 Programme Framework – Commonwealth Home Support Programme

The Commonwealth Home Support Programme is structured to include four distinct Sub-Programmes. These are based on the Programme's four target groups.

Each Sub-Programme has its own objective, eligibility criteria and service types. This approach helps to target services and supports grant recipients to respond more flexibly to clients' needs.

Under the DSS Comprehensive Grant Agreement, grant recipients receive funding to deliver specified outputs against one or a combination of service types under each Sub-Programme. Details on these funding arrangements, including flexibility provisions and relevant reporting requirements for grant recipients are set out in Chapter 5 of this Programme Manual.

The Programme Framework of the Commonwealth Home Support Programme, including Sub-Programmes is provided on the following page in Table 1. Details on each Sub-Programme are provided in Section 2.2.

In certain circumstances services may be provided to people outside the identified target groups for the Commonwealth Home Support Programme as noted in Section 1.2.8 of this Programme Manual.

Table 1 Programme Framework – Commonwealth Home Support Programme

Sub-Programme	Community and Home Support	Care Relationships and Carer Support	Assistance with Care and Housing	Service System Development
Objective	To provide entry-level support services to assist frail, older people to live independently at home and in the community	To support and maintain care relationships between carers and clients, through providing good quality respite care for frail, older people so that regular carers can take a break	To support vulnerable clients to remain in the community through accessing appropriate, sustainable and affordable housing and linking them where appropriate, to community care and other support services	To support the development of the community aged care service system in a way that meets the aims of the programme and broader aged care system
Target Group	Frail, older people aged 65 years and over (or 50 years and over for Aboriginal and Torres Strait Islander peoples) who need assistance with daily living to remain living independently at home and in the community	Frail, older clients aged 65 years and over (or 50 years and over for Aboriginal and Torres Strait Islander peoples) will be the recipients of planned respite services	People aged 50 years and over who are on a low income and are homeless or at risk of homelessness as a result of experiencing housing stress or not having secure accommodation	Grant recipients funded under the Commonwealth Home Support Programme and their client base
Service types funded	<ul style="list-style-type: none"> Meals Other Food Services Transport Domestic Assistance Personal Care Home Maintenance Home Modifications Social Support-Individual Social Support-Group (formerly Centre-Based Day Care) Nursing Allied Health and Therapy Services Goods, Equipment and Assistive Technology Specialised Support Services 	<ul style="list-style-type: none"> Flexible Respite: <ul style="list-style-type: none"> In-home day respite In-home overnight respite Community access – individual respite Host family day respite Host family overnight respite Mobile respite Other planned respite. Centre-based respite: <ul style="list-style-type: none"> Centre based day respite Residential day respite Community access-group respite Cottage respite (Overnight community) 	Assistance with Care and Housing	Sector Support and Development activities

2.2 Sub-Programme – Objective, Target Population, Eligibility And Services

2.2.1 Community and Home Support Sub-Programme

Objective

To provide entry-level support services to frail, older people to assist them to live independently at home and in the community.

Target Population

Frail, older people (people aged 65 years and over or 50 years and over for Aboriginal and Torres Strait Islander peoples) who need assistance with daily living to remain living independently at home and in the community.

In certain circumstances services may be provided to people outside the identified target groups for the Commonwealth Home Support Programme as noted in Section 1.2.8 of this Programme Manual.

Eligibility

Frail, older person who:

- is aged 65 years and over (or 50 years and over for Aboriginal and Torres Strait Islander peoples); and
- has difficulty performing activities of daily living without help due to functional limitations (for example communications, social interaction, mobility or self-care); and
- lives in the community.

Service Types Funded

Sub-Programme	Service type	Service sub type
Community and Home Support	Meals	At Home At Centre
	Other Food Services	Food Advice, Lessons, Training, Food Safety Food Preparation in the Home

	Transport	Direct (driver is volunteer or worker) Indirect (through vouchers or subsidies)
	Domestic Assistance	General House Cleaning Unaccompanied Shopping (delivered to home) Linen Services
	Personal Care	Assistance with Self-Care Assistance with client self-administration of medicine
	Home Maintenance	Minor Home Maintenance and Repairs Major Home Maintenance and Repairs Garden Maintenance
	Home Modifications	N/A
	Social Support-Individual	Visiting Telephone/Web Contact Accompanied Activities, e.g. shopping
	Social Support-Group (formerly Centre-Based Day Care)	N/A
	Nursing	N/A
	Allied Health and Therapy Services	Podiatry Occupational Therapy Physiotherapy Social Work Speech Pathology Accredited Practising Dietitian or Nutritionist ATSI Health Worker Psychologist Diversional Therapy Exercise Physiologist Other Allied Health and Therapy Services Ongoing Allied Health and Therapy Services Restorative Care Services

	Goods, Equipment and Assistive Technology	Self-care aids Support and mobility aids Medical care aids Communication aids Other goods and equipment Reading aids Car Modifications
	Specialised Support Services	Continence Advisory Services Dementia Advisory Services Vision Services Hearing Services Other support services Client Advocacy Carer Support

As at 1 July 2015, only Allied Health and Therapy Services provided through former Day Therapy Centres will be available under this Sub-Programme of the Commonwealth Home Support Programme in Victoria and Western Australia. Other, similar services are available through the joint Commonwealth-State funded HACC Programs in Victoria and Western Australia.

Detail on the service types funded under this Sub-Programme is provided in the following tables, including service type definitions, service sub-types and service settings.

Client Scenario

Mabel is 82 years old and lives alone. She has been diagnosed with macular degeneration and is losing her vision. Mabel no longer drives and is finding it increasingly difficult to access services in her community. She is however keen to remain as independent as possible with some support. Mabel rings the My Aged Care contact centre to see what assistance is available.

Screening undertaken by the My Aged Care contact centre identifies that she would benefit from a RAS face-to-face assessment. Mabel is also provided with information on how to access a specialist disability assessment and a mobility and orientation instructor to help her manage the functional impacts of her vision loss.

The RAS discusses Mabel's care needs and goals and develops a support plan which includes: referral to Commonwealth Home Support Programme funded specialised support services for advice on living independently with vision loss and weekly community transport to support her to access services in her community as she no longer drives. The community transport provider sends staff with experience in working with people with vision loss.

The support provided recognises the challenges Mabel is facing while offering opportunities to maintain her independence where possible.

Service Type: Meals

Objective	To provide frail, older people with access to meals.
Service type description	<p>This service type refers to:</p> <ul style="list-style-type: none"> • meals prepared and delivered to the client's home; and • meals provided at a Centre or other setting. <p>Providing meals to frail, older people at home, a centre or in another setting may deliver a range of benefits. These include informal health monitoring of clients and supporting social participation e.g. time spent with the older person when delivering the meal and social interactions enjoyed by the older person at a centre or other setting.</p> <p>The term 'Meals' recognises and includes all varieties of service models in operation, including the provision of main meals such as two and three course lunches and dinners and complementary meal options such as breakfast and snack packs.</p> <p>The carers of older people accessing Commonwealth Home Support Programme meal services may receive a meal where they are accompanying those clients where required.</p>
Out-of-scope activities under this service type (i.e. must not be purchased using Commonwealth Home Support Programme funding)	<p>This service type does not include meals prepared in the client's home.</p>
Service delivery setting e.g. home/ centre/clinic/ community	<p>Delivered to the client's home or provided at a centre or other setting. Centres may include, but are not limited to Senior Citizen Centres and other community-based venues.</p>
Use of funds including any target areas	<p>For meals delivered to the client at home, funds must assist in paying for the production and distribution of the meal.</p> <p>Funding for meals at a centre or other setting must assist in paying for the production of the meal.</p> <p>Funding may be used to access dietetic advice from an Accredited Practising Dietitian where required.</p> <p>Because social security payments provide for the cost of living of recipients it is expected that the cost of the ingredients of the meal will be covered by the client (through their personal income, pension etc.)</p>

Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations, for example relevant state and territory safe food handling practices.
Output measure	<p>Number of meals provided.</p> <p>Meals provided to a carer accompanying the client should be counted separately.</p>
Staff qualifications	All paid staff and volunteers involved in preparation and handling of food must adhere to safe food handling practices including personal hygiene and cleanliness and must be provided with information regarding safe food handling as it relates to their activities.

Service Type: Other Food Services

Objective	To educate, train and re-skill frail, older people in preparing and cooking a meal in their own home to promote their independence.
Service type description	<p>Other Food Services refers to:</p> <ul style="list-style-type: none"> • assistance with preparing and cooking a meal in a client's home to promote knowledge, skills, independence, confidence and safety; and • advice on food including food preparation and nutrition, lessons, training and food storage and safety.
Out-of-scope activities under this service type	This does not cover the delivery of a meal prepared elsewhere or providing shopping services for clients.
Service delivery setting e.g. home/ centre/clinic/ community	The client's home is the primary setting. Some group-based education activities, however, may occur at centres such as education classes about nutrition.
Use of funds including any target areas	Funding must be used for activities that directly involve the client and promote their independence through education and re-skilling activities.
Legislation	Grant recipients must comply with relevant Commonwealth and/ or state/territory legislation and regulations, for example safe food handling practices.
Output measure	Time (recorded in hours and minutes as appropriate).
Staff qualifications	<p>All paid staff and volunteers involved in the preparation and handling of food must be provided with information regarding safe food handling as it relates to their activities. Grant recipients are required to comply with state and territory based references and guidelines relevant to safe food handling practices.</p> <p>Advice on nutrition must be provided by an Accredited Practising Dietitian, a Certificate IV Nutrition and Dietetics Assistant under the guidance of an Accredited Practising Dietitian, or a qualified nutritionist.</p>

Service Type: Transport

Objective	To provide frail, older people with access to transport services that support their access to the community.
Service type description	<p>Transport refers to the provision of a structure or network that delivers accessible transport to eligible clients and includes:</p> <ul style="list-style-type: none"> • direct transport services which are those where the trip is provided by a worker or a volunteer; and • indirect transport services including trips provided through vouchers. <p>Consistent with the findings of the Review of Community Transport, the Department will commence work to develop a revised definition for transport services from July 2015 in partnership with states and territories and the sector. This Programme Manual will be updated once this work is complete. Grant recipients should operate on the definition provided in this Programme Manual until this work is completed.</p>
Service delivery setting e.g. home/centre/clinic/community	<p>Includes, but is not limited to, transport services provided to or from facilities or the client's home.</p>
Use of funds including any target areas	<p>Funding must be used for non-assisted/assisted transport and planned (group) and on-demand (individual) services.</p> <p>The carers of older people accessing Commonwealth Home Support Programme transport services may accompany those clients when using those services where required.</p>
Legislation	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations, for example holding appropriate licenses, meeting state accreditation standards and meeting any legislated access requirements.</p> <p>As per Section 3.2 of this Programme Manual, all Commonwealth Home Support Programme services must be able to offer accessible service options to people with physical or sensory disabilities.</p>
Output measure	<p>Number of one-way trips.</p> <p>Service providers are to count clients and carers separately when reporting outputs.</p>

Staff qualifications	<p>Drivers of transport services must hold an appropriate licence.</p> <p>Grant recipients must also take reasonable care to ensure the safety of all concerned where paid staff or volunteers are providing transport services.</p> <p>It is the responsibility of the grant recipient to ensure they are meeting their Work Health and Safety responsibilities for safe driving and client transport practices.</p>
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Service Type: Domestic Assistance

Objective	To provide frail, older people with assistance with domestic chores to maintain their capacity to manage everyday activities in a safe, secure and healthy home environment.
Service type description	<p>Domestic Assistance is normally provided in the home and refers to:</p> <ul style="list-style-type: none"> • general house cleaning; • unaccompanied shopping (delivered to home); and • linen services. <p>It can include:</p> <ul style="list-style-type: none"> • dishwashing • house cleaning • clothes washing and ironing • shopping (unaccompanied) • bill paying (unaccompanied) • collection of firewood (in remote areas) • help with meal preparation (where this is not the primary focus of service delivery) • washing of clothes and other household linen or provision and laundering of linen, usually by a separate laundry facility. <p>Services may also include demonstrating and encouraging the use of techniques to improve the person's capacity for self-management and building confidence. The use of domestic assistance equipment or aids, such as the available range of emerging technologies or modification of work practices to support client participation in chosen domestic tasks is supported where appropriate.</p>
Out-of-scope activities under this service type	<p>Commonwealth Home Support Programme grant recipients do not give financial advice or offer to assist with managing a person's finances.</p> <p>Accompanied shopping, bill paying and attendance at appointments are not included under Domestic Assistance but are included under Social Support.</p>

Service delivery setting e.g. home/centre/clinic/community	<p>Normally provided in the home, however in special situations domestic assistance may be delivered at a centre because it is not feasible to deliver the service in the client's home.</p> <p>For example, a day centre may provide washing facilities so that domestic assistance can be delivered to an individual client.</p>
Legislation	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations, for example relating to safe food handling and laundering practices.</p>
Output measure	<p>Time (recorded in hours and minutes as appropriate).</p>
Staff qualifications	<p>Where additional services are performed, such as personal care, in conjunction with domestic assistance, requirements relating to that additional service apply.</p>

Service Type: Personal Care

Objective	To provide frail, older people with support in activities of daily living that help them maintain appropriate standards of hygiene and grooming.
Service type description	<p>Personal care provides assistance with activities of daily living self care tasks in order to help a client maintain appropriate standards of hygiene and grooming, including:</p> <ul style="list-style-type: none"> • assistance with self-care; and • assistance with client self-administration of medicine. <p>Activities can include:</p> <ul style="list-style-type: none"> • eating • bathing • toileting • dressing • grooming • getting in and out of bed. • moving about the house • assistance with client self-administration of medicine (including from dose-administration aids and reporting of failure to take medicines). <p>Services may also include demonstrating and encouraging the use of techniques to improve the person's capacity for self-management and building confidence in the use of equipment or aids, such as a bath seat or handheld shower hose.</p>
Service delivery setting e.g. home/ centre/clinic/ community	<p>Personal care is normally provided in the home. In special situations personal care assistance may be delivered at a centre or other community setting because it is not feasible to deliver the service in the client's home.</p> <p>This may be because the client is homeless, itinerant or living in a temporary shelter and the centre is able to provide the shower and washing facilities required for client care.</p>

Legislation	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.</p> <p>State and territory legislation governs medication management. Grant recipients must take into account all relevant legislation and guidelines in developing policies and procedures around assistance with client self-administration of medicine (including from dose-administration aids and reporting of failure to take medicines) provided under the Commonwealth Home Support Programme.</p>
Output measure	<p>Time (recorded in hours and minutes as appropriate).</p>
Staff qualifications	<p>For personal care, including assistance with client self-administration of medicine, a Certificate III in aged/community care or equivalent is desirable.</p> <p>This includes any circumstances where nursing-related tasks are delegated to personal care workers which is permitted under the Commonwealth Home Support Programme (see the Nursing service type in this Programme Manual for more information).</p>

Service Type: Home Maintenance

Objective	<p>To provide home maintenance services that assist clients to maintain their home in a safe and habitable condition. Maintenance services provided must be linked to assisting clients to maintain their independence, safety, accessibility and health and wellbeing within the home environment. Maintenance services can also assist in creating a home environment that facilitates a client's reablement goals.</p>
Service type description	<p>Home maintenance services provided to clients must focus on repairs or maintenance of the home and garden to improve safety, accessibility and independence within the home environment for the client, by minimising environmental health and safety hazards.</p> <p>This includes home and yard maintenance and repairs that mitigate or remove identified risks to a client's health and safety and/or services targeted at maintaining a home environment which supports a client's wellness goals.</p> <p>Services refer to:</p> <ul style="list-style-type: none"> • major home maintenance and repairs; • minor home maintenance and repairs; and • garden maintenance. <p>Given the important role of the home environment, a home based assessment by a RAS is important for developing initial home and yard maintenance plans.</p> <p>Activities funded can include a range of maintenance or repair tasks such as:</p> <ul style="list-style-type: none"> • Repair of internal flooring & external access pathways to address slip and trip hazards • Minor plumbing, electrical & carpentry repairs where client safety is an issue • Working-at-height related repairs or cleaning for client health and safety – i.e. gutters, roofs, windows, ceilings, smoke alarms • Secure access issues for clients' personal safety • Accessible, low maintenance garden redesign to support wellness and reablement goals • Yard maintenance – pruning, yard clearance or lawn mowing where there are issues for client safety and access.*

	<p>* The provision and frequency of on-going home maintenance services (e.g. lawn mowing and garden pruning) must directly relate to assessed client need in terms of maintaining accessibility, safety, independence or health and wellbeing and be subject to regular review. They are basic services primarily for function and safety rather than for aesthetic effect.</p>
Out-of-scope activities under this service type	<p>General renovations of the home must not be purchased using Commonwealth Home Support Programme funding.</p> <p>The programme does not provide services that are the responsibility of other parties e.g. private rental landlords or where damage to a property is covered by insurance.</p>
Service delivery setting e.g. home/ centre/clinic/ community	<p>The Client's home and/or yard where the client holds responsibility for the maintenance or repair of same.</p> <p>As per Section 1.2.13 of this Programme Manual, services will not be delivered where another entity holds responsibility for maintenance or repair to the home; similar Government support is already provided or where it is a state or territory government responsibility to provide this type of support (Section 1.2.12) e.g. clients living in social housing would receive home maintenance and repair support through their state or territory government but may still hold responsibility for the maintenance of their yard.</p>
Legislation	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and local Council Authority regulations e.g. where the work is undertaken by licensed or registered tradespeople.</p>
Output measure	<p>Time (recorded in hours and minutes as appropriate).</p> <p>Cost in dollars.</p>
Staff qualifications	<p>Grant recipients must adhere to any legislative or regulatory requirements where the work is undertaken by licensed or registered tradespeople.</p>

Service Type: Home Modifications

Objective	To provide home modifications that increase or maintain levels of independence, safety, accessibility and wellbeing. Modification services can also assist in creating a home environment that supports reablement and restorative practices.
Service type description	<p>Services are provided to assist eligible clients with the organisation and cost of simple home modifications and where clinically justified, more complex modifications.</p> <p>Home modifications provide changes to a client's home that may include structural changes to increase or maintain the person's functional independence so that they can continue to live and move safely about the house.</p> <p>Examples of home modification activities could include:</p> <ul style="list-style-type: none"> • grab rails in the shower • ramps (permanent and temporary) • step modifications • access and egress pathways through a property • appropriate lever tap sets or lever door handles • internal and external hand rails next to steps • installation and fitting of emergency alarms and other safety aids and assistive technology • client engagement and support. <p>In some clinically justified circumstances home modifications could also include:</p> <ul style="list-style-type: none"> • bathroom redesign (e.g. lowering or removal of shower hobs, changes to design lay out to improve accessibility) • kitchen redesign (e.g. lowering kitchen bench tops, changes to design layout to improve accessibility) • widening doorways and passages (e.g. to allow wheelchair access). <p>Home modifications are provided to improve safety and accessibility and independence within the home environment for the client. Simple modifications can be installed by the service provider, in line with the Building Code of Australia and include:</p>

	<ul style="list-style-type: none"> • Hand-held showers, sliding shower rails • Removal of shower screens/doors – installation of weighted shower curtains • Doorway wedges <35 mm rise • Slip resistant flooring/step treatments including highlighter strips • Lowering or removal of shower hobs • Lever taps and door handles • Repositioning of clotheslines, letterboxes • Widening of pathways <p>More complex home modifications require a specialised functional assessment of the client to be undertaken by an Occupational Therapist who will assess the need for home modification, as well as consider alternative solutions that may be more suitable (for example assistive technology and equipment).</p>
Out-of-scope activities under this service type	<p>General renovations of the home are not in the scope of the Commonwealth Home Support Programme.</p> <p>The intent of the Commonwealth Home Support Programme is to primarily fund simple home modifications (i.e. modifications that would incur a cost of less than \$1,000 to the Commonwealth).</p> <p>Modifications that would incur a cost of over \$10,000 to the Commonwealth are not supported under the Commonwealth Home Support Programme. The \$10,000 cap is the Government contribution and applies per client per financial year.</p> <p>Service providers must record the amount spent in the 'Notes' section of the My Aged Care central client record.</p>
Service delivery setting e.g. home/ centre/clinic/ community	<p>Client's home.</p> <p>As per Section 1.2.13 of this Programme Manual, services will not be delivered where another entity holds responsibility for structural changes to the home; similar Government support is already provided or where it is a state or territory government responsibility to provide this type of support (Section 1.2.12) e.g. clients living in social housing would receive home modification support through their state or territory government.</p> <p>It is the responsibility of the client to investigate and gain any permissions necessary before modifications are undertaken, for example permission to modify a private property the client is renting, strata scheme permission or local Council authority where applicable.</p> <p>Support to the client to undertake this process may form part of the project management activities undertaken by a service provider.</p>

Use of funds including any target areas	<p>Funds must be targeted towards lower cost modifications that meet client needs. No modification must be undertaken that would incur a cost of over \$10,000 to the Commonwealth.</p> <p>Providers can use their home modification funds flexibly to obtain appropriate services for clients where clinically justifiable to increase independence within the home.</p> <p>Providers may consider using the flexibility provisions to purchase Occupational Therapy assessments for clients requiring complex home modifications or small goods and equipment that may be prescribed through the Occupational Therapy assessment that may either support the installation or, where clinically appropriate, may mitigate/negate the need for more complex home modification installations.</p>
Specific funding advice	<p>Funding can be used to cover both the labour costs and the materials cost or only some part of this, for example the initial work including measurement of the home, planning processes and for project management of the modification.</p>
Legislation	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and local Council Authority regulations. This includes holding appropriate licences and insurances, where required.</p> <p>For example, grant recipients are required to be aware of their obligations to comply with state and territory based laws and regulations relevant to the safe handling and removal of asbestos when undertaking home modifications in the homes of clients.</p>
Output measure	<p>Cost in dollars.</p> <p>Types of modification activity provided.</p>
Staff qualifications	<p>Providers must comply with Commonwealth and state and territory legislation regarding who can undertake home modifications.</p>

Service Type: Social Support-Individual

Objective	To assist frail, older people to participate in community life and feel socially included through meeting their need for social contact and company.
Service type description	<p>Social support-individual is assistance provided by a companion (paid worker or volunteer) to an individual, either within the home environment or while accessing community services, which is primarily directed towards meeting the person's need for social contact and/or company in order to participate in community life.</p> <p>Services funded include:</p> <ul style="list-style-type: none"> • visiting services • telephone and web-based monitoring services (including other technologies that help connect older people to their community e.g. to assist people with sensory impairments or those living in geographically isolated areas) • accompanied activities (such as assisting the person through accompanied shopping, bill paying, attendance at appointments and other related activities). <p>Social support is usually provided one-on-one but may also be provided to more than one person, for example, where social support is provided to an aged couple.</p>
Out-of-scope activities under this service type	<p>Unaccompanied activities such as bill-paying and shopping, which are considered Domestic Assistance.</p> <p>Social Support provided to the client in a group-based environment at, or from a fixed base facility away from their residence, which is considered Social Support-Group.</p>
Service delivery setting e.g. home/	Client's home or community setting.
Use of funds including any target	Funding must be targeted at supporting older people to participate in community life.
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.
Output measure	Time (recorded in hours and minutes as appropriate).

Staff qualifications	Where staff or volunteers are involved in other activities as part of Social Support-Individual, they must have relevant qualifications, for example any food handling and meal preparation must adhere to safe food handling practices including personal hygiene and cleanliness.
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Service Type: Social Support-Group

Objective	To assist frail, older people to participate in community life and feel socially included through structured, group-based activities that develop, maintain or support independent living and social interaction.
Service type description	<p>Social support-group (formerly known as Centre-Based Day Care) provides an opportunity for clients to attend and participate in social interactions which are conducted away from the client's home and in, or from, a fixed base facility or centre based settings.</p> <p>These structured activities are provided in a group-based environment and designed to develop, maintain and support social interaction and independent living.</p> <p>Activities may take the form of:</p> <ul style="list-style-type: none"> • group-based activities held in or from a facility/centre (e.g. pre set or individually tailored activities promoting physical activity, cognitive stimulation and emotional wellbeing) • group excursions conducted by centre staff but held away from the centre. <p>Services may include light refreshments and associated transport and personal assistance (e.g. help with toileting) involved in attendance at the centre.</p>
Out-of-scope activities under this service type	Social gatherings that do not specifically aim to support older people's social inclusion and independence.
Service delivery setting e.g. home/centre/clinic/community	Usually centres or fixed-base facilities but can include community settings away from the centre (e.g. group excursions).
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.

Output measure	<p>Time (recorded in hours and minutes as appropriate).</p> <p>If a grant recipient provides transport to/from a centre they will record the transport assistance separately to the Social Support-Group assistance. Any transport provided as part of an excursion or activity within the centre's program will not be counted as a separate transport service.</p> <p>Any meals provided as part of an excursion or activity within the centre's program will not be counted as a separate meal service.</p> <p>Where transport is provided (separate to any excursion) to a carer accompanying the older client this should be counted separately.</p>
Staff qualifications	<p>Appropriately qualified staff must be used to conduct activities of a specific nature, such as allied health activities or exercise programs.</p> <p>Where staff or volunteers are involved in other activities as part of Social Support-Group, they must have relevant qualifications, for example any food handling and meal preparation must adhere to safe food handling practices including personal hygiene and cleanliness.</p>

Service Type: Nursing

Objective	To provide short-term or episodic treatment and monitoring of medically diagnosed clinical conditions to support frail, older people to remain living at home.
Service type description	<p>Nursing care is the clinical care provided by a registered or enrolled nurse. This care is directed to treatment and monitoring of medically diagnosed clinical conditions and can include use of telehealth technologies to support nursing care and recording client observations.</p> <p>Nursing services also play a role in education of clients in maintenance of good health practices and the delivery of treatments and care that improve a client's capacity to self-manage.</p> <p>Nursing care includes and allows the delegation of nursing-related tasks to other workers, including personal care workers. Where nursing tasks are delegated to a personal care worker and the service provider does not have personal care workers on staff, the provider should contact My Aged Care to facilitate the client's access to that support.</p> <p>Commonwealth Home Support Programme nursing services are not intended to replace or fund support services more appropriately provided under another system, such as the health system or palliative care services.</p>
Out-of-scope activities under this service type	<p>Palliative care and nursing services that would otherwise be undertaken by the health system are not funded under the Commonwealth Home Support Programme.</p> <p>These (complementary) services are considered out-of-scope because government funding is already provided for them through other government programmes. For example, where only post-acute care is required, this is considered out-of-scope for the Commonwealth Home Support Programme.</p> <p>However, a client can receive non-health related Commonwealth Home Support Programme services in conjunction with post-acute services, for example following a hospital stay. After this, support services must be reviewed to determine whether the client's current needs are being met.</p>
Service delivery setting e.g. home/ centre/clinic/ community	<p>Nursing care can be delivered in the client's home, a centre, clinic or other location. It is expected they will be primarily delivered in the client's home.</p>

Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.
Output measure	<p>Time (recorded in hours and minutes as appropriate).</p> <p>Where nursing is provided, including training of a personal care worker to undertake delegated tasks, this should be recorded as nursing hours. Where personal care tasks are provided this should be recorded as personal care hours.</p>
Staff qualifications	Nursing care must be provided by a Registered Nurse or an Enrolled Nurse. Nursing-related tasks may be overseen by a Registered Nurse or Enrolled Nurse. Nursing care allows the delegation of nursing-related tasks to other workers, including personal care workers.

Service Type: Allied Health and Therapy Services

Objective	To provide services that restore, improve or maintain frail, older people's health, wellbeing and independence.
Service type description	<p>Allied health and therapy services focus on restoring, improving, or maintaining older people's independent functioning and wellbeing. This is done through providing a range of clinical interventions, expertise, care and treatment, education including techniques for self-management, technologies including telehealth technology, advice and supervision to improve people's capacity.</p> <p>The focus of these services is assisting older people to regain or maintain physical, functional and cognitive abilities which support them to either maintain or recover a level of independence, allowing them to remain living in the community. Non-clinical services, including some diversional and preventative therapies, may be provided to clients under this service type, however, these must be complementary supports for the client and not delivered in isolation from the focus of this service delivery.</p> <p>Allied Health and Therapy Services funded under the Commonwealth Home Support Programme include (but are not limited to):</p> <ul style="list-style-type: none"> • podiatry • occupational therapy • physiotherapy • social work • formal counselling from a qualified social worker or psychologist • speech pathology • exercise physiology • nutritional advice from an Accredited Practising Dietitian or a qualified nutritionist • ATSI Health worker • diversional therapy • other allied health and therapy services. <p>This list of services is not exclusive and grant recipients are not expected to provide all the activities listed.</p> <p>There are two models of service provision for this service type available depending on intensity. These are additional service sub-types to those listed above.</p> <p>Grant recipients must indicate which (or both) of the models they are able to deliver, and which specific allied health or therapy they will provide under that model.</p>

	<p>It is anticipated that grant recipients will be able to deliver both models.</p> <p>1. Ongoing Allied Health and Therapy services</p> <p>Grant recipients can deliver one or more of the services in the list above (exactly which services are delivered by the provider will need to be identified). These services are of an ongoing or episodic nature, are delivered on an individual or group basis and provided at a low intensity or frequency, with a maintenance or preventative focus, for example regular podiatry for a client with diabetes and group exercise classes.</p> <p>2. Restorative Care services</p> <p>Grant recipients can deliver a time-limited, allied-health led approach to service delivery that focuses on older clients who can make a functional gain after a setback. These may be one to one or group services that are delivered on a short term basis which are delivered by, or under the guidance of an allied health professional.</p> <p>Their goal will to be to increase the independence of clients. They will target people who can make a functional gain after a setback, who are at risk of a preventable injury, or who need other allied health led services to maintain independence.</p> <p>In implementing restorative care services, grant recipients must:</p> <ul style="list-style-type: none"> • conduct an initial assessment of the client to establish a baseline from which progress or maintenance of function can be evaluated. This assessment must identify goals and must include the development of an individual plan for each client • use measurable, objective, quantitative and qualitative indicators and record results associated with therapeutic goals or desired outcomes which include the client's functional ability: on entry, at review and at discharge • complete an outcome assessment documenting achievement or progress made against identified client goals prior to discharge for each client.
Out-of-scope activities under this service type	Specialist post-acute care and rehabilitation services are out-of-scope and must not be purchased using Commonwealth Home Support Programme funding.
Service delivery setting e.g. home/centre/clinic/community	Services may be delivered in a client's home, a clinic, at a day centre, a group environment or other community setting.
Legislation	Grant recipients must adhere to any relevant Commonwealth and/or state/territory legislation or regulations.

Output measure	<p>Time (recorded in hours and minutes as appropriate).</p> <p>Type of care (identify which model/s will be delivered i.e. Ongoing Allied Health and Therapy Services and/or Restorative Care Services).</p>
Staff qualifications	<p>Allied health providers must meet their respective accreditation and registration requirements and operate within the scope of practice of their particular regulated or self-regulated body. For example, speech pathologists funded under the Commonwealth Home Support Programme must hold the Speech Pathology Australia Certified Practising Speech Pathologist credential.</p> <p>Depending on the respective accreditation and registration requirements, this may permit activities being undertaken by assistant allied health professionals or less qualified staff.</p>

Service Type: Goods, Equipment and Assistive Technology

Objective	To provide access to goods, equipment or assistive technology which enables the client to perform tasks they would otherwise be unable to do or promote the older person's safety and independence.
Service type description	<p>Goods, equipment and assistive technology are provided to assist a client to cope with a functional limitation and maintain their independence. Items include those that provide short-term and ongoing support and assist with mobility, communication, reading and personal care. These can be provided through loan or purchase.</p> <p>Goods, equipment and assistive technologies that can be purchased under the Commonwealth Home Support Programme fall under the following service sub-types:</p> <ul style="list-style-type: none"> • self-care aids • support and mobility aids • medical care aids • communication aids • reading aids • car modifications • other goods and equipment. <p>and include a wide range of items such as:</p> <ul style="list-style-type: none"> • assistive technologies such as robotic vacuum cleaners • dressing aids • shower chairs • sensor mats • over-toilet frames • walking frames • adapted utensils • low vision aids such as binoculars, electronic magnifiers and magnifying/reading software. <p>Older people need a range of items, from smaller inexpensive 'off the shelf' items to customised equipment and technology which requires assessment and prescription by professionals with specialised skills and knowledge.</p> <p>In general it is expected that clients who are unable to purchase the item/s independently will be able to access up to \$500 in total support per financial year under this service type.</p> <p>Service providers must record the amount spent in the 'Notes' section of the My Aged Care central client record.</p>

	<p>This cap applies in total per client, regardless of how many items are loaned or purchased. It is not a cap applied per item. For example, a client may lease a walking frame and shower chair in the same financial year for a total combined cost of \$450.</p> <p>These items include those which pose a low risk to the client or worker.</p> <p>Where a provider assesses it to be necessary, however, the provider has the discretion to increase the cap to \$1000 per client per financial year.</p>
Out-of-scope activities under this service type	<ul style="list-style-type: none"> • Items that are not related to the functional impairment (e.g. general household or furniture or appliances) • Items that are likely to cause harm to the participant or pose a risk to others.
Service delivery setting e.g. home/ centre/clinic/ community	Varied settings.
Use of funds including any target areas	<p>Providers can use goods, equipment and assistive technology funds to provide services that may be necessary to providing equipment for a client, such as specialised assessment for goods and equipment, providing training or support using the item, and maintaining or repairing the item.</p> <p>These hours must be reported as Allied Health and Therapy Services hours if they were delivered by an Allied Health professional.</p>
Specific funding advice	<p>The Commonwealth Home Support Programme is not designed to replace existing state managed schemes which provide medical aids and equipment (e.g. Medical Aids Subsidy Scheme).</p> <p>Commonwealth Home Support Programme grant recipients are encouraged to access these state and territory aids and equipment programs where appropriate.</p> <p>Access to informed, independent information on the types of equipment available, and which equipment best meets the client's needs, is an important part of the service delivery system. Providers are encouraged to seek advice from their state or territory Independent Living Centre which can assist.</p>
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.

Output measure	<p>Number of items purchased or loaned.</p> <p>Cost in dollars.</p> <p>Hours of Allied Health and Therapy Services delivered must also be recorded if appropriate.</p>
Staff qualifications	<p>Training for clients in the use of goods, equipment and assistive technology should be provided by people with appropriate knowledge and skills. For example, speech pathology assessment is required to assess clients for communication aids and equipment.</p>

Service Type: Specialised Support Services

Objective	To provide services that meet the specialised needs of older people living at home.
Service type description	<p>This service type refers to specialised or tailored services for older people who are living at home with a particular condition such as dementia or vision impairment.</p> <p>These services help clients, and their carers and families, to manage these conditions and maximise client independence to enable them to remain living in their own homes.</p> <p>They comprise a mix of direct service delivery, tailored support and expert advice.</p> <p>They also provide support to other service providers to meet the specialised needs of those clients through awareness raising, information sharing and education.</p> <p>Specific service sub-types delivered include:</p> <ul style="list-style-type: none"> • continence advisory services • dementia advisory services • vision support services • hearing support services • other support services. <p>Other service sub-types that can be provided under this service type on a transitional basis include:</p> <ul style="list-style-type: none"> • client advocacy • carer support.
Out-of-scope activities under this service type	<p>Specialised support services that would otherwise be undertaken by the health system are not within scope.</p> <p>Services that are already funded under other Commonwealth, state, territory or local government programs are not within scope.</p>
Service delivery setting e.g. home/ centre/clinic/ community	<p>Varied settings</p>
Use of funds including any target areas	<p>Providers can use funds to support clients with specific needs such as those with dementia, incontinence, vision impairment, hearing loss or other conditions.</p>

Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.
Output measure	Time (recorded in hours and minutes as appropriate). Outputs recorded should include delivery of all advice and support.
Staff qualifications	Appropriately qualified staff must be used to conduct activities. Allied health providers must meet their respective accreditation and registration requirements and operate within the scope of practice of their particular regulated or self-regulated body. Depending on the respective accreditation and registration requirements, this may permit activities being undertaken by assistant allied health professionals or less qualified staff.

2.2.2 Care Relationships and Carer Support Sub-Programme

Objective

To support and maintain care relationships between carers and clients, through providing good quality respite care for frail, older people so that regular carers can take a break.

Target Population

Frail, older Commonwealth Home Support Programme clients will be the recipients of planned respite services, providing their carers with a break from their usual caring duties.

In certain circumstances services may be provided to people outside the identified target groups for the Commonwealth Home Support Programme as noted in Section 1.2.8 of this Programme Manual.

Eligibility

Commonwealth Home Support Programme clients who require respite services to continue the caring relationship.

Service Types Funded

Sub-Programme	Service type	Service sub type
Care Relationships and Carer Support	Flexible Respite	In-home Day Respite
		In-home Overnight Respite
		Host Family Day Respite
		Host Family Overnight Respite
		Community Access - Individual respite
		Other planned respite
		Mobile Respite
	Cottage Respite	Overnight Community Respite
	Centre-based Respite	Centre Based Day Respite
		Community Access - Group
		Residential Day Respite

Planned respite services delivered under this Sub-Programme will remain within the Commonwealth Home Support Programme.

Grant recipients should give consideration to models of respite care that support Commonwealth Home Support Programme clients with carers in employment, training or study. This may include for example, the availability of respite services outside of current standard operating hours, to assist carers to balance work and caring responsibilities.

Detail on the planned respite service types funded under this Sub-Programme is provided in the table following the client scenario, including a service type definition and service settings.

Client Scenario

Kerry is 75 years old and the carer of her 83 year old husband, Ronald, who has incontinence and mobility problems due to muscle weakness. She assists him with his personal care, drives him to appointments, and takes him on short outings.

In the last six months Kerry has noticed her health beginning to suffer from concern about her husband and poor sleep. She is also finding it increasingly difficult to balance providing for his needs and continuing the activities she used to enjoy, such as line dancing at the local club with her friends.

Her sister suggests that Kerry calls the My Aged Care contact centre to see what assistance she and Ronald may be eligible for. Kerry and Ronald both consent for the contact centre to register them as clients and create client records. After screening by the My Aged Care contact centre they are both referred for assessment by the My Aged Care RAS.

During the assessment process, both of their care needs and goals are identified: including what help is needed to support the care relationship. As a result of the assessment, an individual support plan for both Kerry and Ronald is agreed, and services organised to meet their needs. This includes Commonwealth Home Support Programme specialised support services that provide support on continence services as well as fortnightly physiotherapy support to assist Ronald with his muscle weakness.

In addition, from the Commonwealth Home Support Programme's Care Relationships and Carer Support Sub-Programme, two hours per fortnight of ongoing, flexible (in-home) respite care is arranged. Over the coming weeks Ronald becomes comfortable with the respite worker and requests that the same staff member provides the respite services each time. They also schedule the respite at a time to support Kerry to return to line dancing.

Access to this support has benefited Ronald and provided Kerry with more balance in her life.

Service Type: Flexible Respite

Objective	To support and maintain care relationships between carers and clients, through providing good quality respite care for frail, older people so that regular carers can take a break.
Service type description	<p>Respite care benefits the carer through providing supervision and assistance to the older client. The carer may or may not be present during the delivery of the service. Flexible respite care includes:</p> <ul style="list-style-type: none"> • in-home day respite – provides a daytime support service for carers of clients needing assisted support in the carer's or the client's home • in-home overnight respite – provides overnight support service for carers of clients needing assisted support in the carer's or client's home • community access–individual – provides one-on-one structured activities to give clients a social experience to develop, maintain or support independent living and social interaction and offer respite to their carer • host family day respite – day care received by a client in another person's home • host family overnight respite – overnight care received by a client while in the care of a host family • mobile respite – provides Respite Care from a mobile setting • other – innovative types of service delivery to clients. <p>Grant recipients are required to structure services in such a way that allows them to be as responsive as possible to requests from carers for short term or non-ongoing respite.</p> <p>This includes respite or services in the event of an emergency where the carer is sick or not available and cannot provide the care or support as usual.</p>
Out-of-scope activities under this service type	<p>Residential respite that is delivered under the <i>Aged Care Act 1997</i>. (see Glossary).</p> <p>Group based respite.</p>
Service delivery setting e.g. home/centre/ clinic/community	Varied settings including the client's home, a host family's home, other suitable accommodation in the community and respite delivered as an outing etc.
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.

Output measure	Time (recorded in hours and minutes as appropriate).
Staff qualifications	Where additional services are performed e.g. personal care, in conjunction with respite – requirements relating to that additional service apply.

Service Type: Cottage Respite

Objective	To support and maintain care relationships between carers and clients, through providing good quality respite care for frail, older people so that regular carers can take a break.
Service type description	<p>Respite care benefits the carer through providing supervision and assistance to the older client. The carer may or may not be present during the delivery of the service.</p> <p>Cottage respite (overnight community respite) provides overnight care delivered in a cottage-style respite facility or community setting other than in the home of the carer, care recipient or host family.</p> <p>Grant recipients are required to structure services in such a way that allows them to be as responsive as possible to requests from carers for short term or non-ongoing respite. This includes respite or services in the event of an emergency where the carer is sick or not available and cannot provide the care or support as usual.</p>
Out-of-scope activities under this service type	Residential respite that is delivered under the <i>Aged Care Act 1997</i> . (see Glossary).
Service delivery setting e.g. home/centre/ clinic/community	Cottage settings.
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.
Output measure	Time (recorded in nights as appropriate).
Staff qualifications	<p>Overnight respite can have unique risks for grant recipients and clients. Grant recipients need to identify and manage risk through consistent use of the Home Care Standards, the DSS Comprehensive Grant Agreement and relevant state and territory legislation.</p> <p>Where additional services are performed e.g. personal care, in conjunction with respite – requirements relating to that additional service apply.</p>

Service Type: Centre-Based Respite

Objective	To support and maintain care relationships between carers and clients, through providing good quality respite care for frail, older people so that regular carers can take a break.
Service type description	<p>Respite care benefits the carer through providing supervision and assistance to the older client. The carer may or may not be present during the delivery of the service. Centre-based respite care includes:</p> <ul style="list-style-type: none"> • centre based day respite – provides structured group activities to develop, maintain or support independent living and social interaction conducted in a community setting • residential day respite – provides day respite in a residential facility • community access – group – provides small group day outings to give clients a social experience and offer respite to their carer. <p>Grant recipients are required to structure services in such a way that allows them to be as responsive as possible to requests from carers for short term or non-ongoing respite.</p> <p>This includes respite or services in the event of an emergency where the carer is sick or not available and cannot provide the care or support as usual.</p> <p>Residential day respite is defined as day respite in a residential facility (where the booking made is not for consecutive days and nights).</p>
Out-of-scope activities under this service type	Residential respite that is delivered under the <i>Aged Care Act 1997</i> (see Glossary).
Service delivery setting e.g. home/centre/ clinic/community	Varied group-based settings including a centre and respite delivered as an outing etc.
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.
Output measure	Time (recorded in hours and minutes as appropriate).
Staff qualifications	Where additional services are performed e.g. personal care, in conjunction with respite – requirements relating to that additional service apply.

2.2.3 Assistance With Care and Housing Sub-Programme

Objective

To support vulnerable clients who are homeless or at risk of homelessness to remain in the community, through accessing appropriate, sustainable and affordable housing and linking them where appropriate, to community care and other support services.

Target Population and Eligibility

The primary target group is older people or people aged 50 years and over and on a low income and who are homeless or at risk of homelessness as a result of experiencing housing stress or not having secure accommodation.

The person being assessed for assistance under the Sub-Programme, and who must meet the above eligibility requirement is regarded as the Principal Client (see Glossary). The Principal Client may have dependants and these are regarded as co-habiting clients.

Co-habiting clients do not need to meet the eligibility requirements and are entitled to receive the same range of Assistance with Care and Housing support as Principal Clients. This is because the stability of the client household is important to the long term viability of future accommodation arrangements.

In certain circumstances services may be provided to people outside the identified target groups for the Commonwealth Home Support Programme as noted in Section 1.2.8 of this Programme Manual.

Service Type Funded

Sub-Programme	Service type	Service sub type
Assistance with Care and Housing	Assistance with Care and Housing	Assessment - Referrals etc.
		Advocacy - Financial, Legal etc.

Service Considerations

To ensure older people are supported in being housed appropriately and to receive the care they need to continue living in the community, grant recipients funded to deliver Assistance with Care and Housing must follow the principles below.

Assistance with Care and Housing services:

- coordinate a response that is directed to ensuring appropriate housing is secured for the older person and that their care needs are met so they can continue to live in the community
- provide a rapid response to older people who are homeless or at risk of homelessness through one-on-one contact
- provide a flexible and individualised service delivery approach within the requirements of the broader Commonwealth Home Support Programme

- interact and work with multiple services across a range of sectors
- must have strong links with the community, housing services and all aspects of the aged care sector
- will coordinate and link support for clients along with service level advocacy in a goal focussed client management relationship
- provide opportunities for all associated services and programmes to work cooperatively to meet the essential housing, health and community care needs of extremely vulnerable and disadvantaged members of the community
- will have access to translation and interpreting services under the Commonwealth Home Support Programme to support clients.

Client Scenario

Pete is 55 years old and has been sleeping rough for several years. His latest accommodation is a boarding house, where his bedroom is unable to be locked and he is exposed to harassment from other boarders. Pete feels increasingly isolated and fearful for his safety and his health is starting to be impacted, including his arthritis.

He has been receiving some help from a local charity which suggests that Pete contact a Commonwealth Home Support Programme service that provides Assistance with Care and Housing support. He visits the Commonwealth Home Support Programme provider and they call the My Aged Care contact centre together and establish he is eligible to receive support.

With Pete's consent, he is registered as a client. The contact centre refers him to the My Aged Care RAS and notes on the client record that the Assistance with Care and Housing provider can be contacted to assist in arranging an assessment with Pete. Upon contact, the RAS and Assistance with Care and Housing provider organise a time to meet with him at his boarding house. They work together during the assessment and in developing a support plan with Pete. The RAS records this information on the client record.

Pete's support plan includes: being linked to a bulk-billing health clinic for physiotherapy, support for his arthritis, finding better accommodation and connecting with his friends again.

He gives his consent to receive these linking services through the Assistance with Care and Housing provider and a formal referral for service is sent by the RAS to the provider. The Assistance with Care and Housing provider helps Pete find more secure accommodation in his local area. The small bedsit is self-contained and private, and he feels safer and begins to invite his friends to visit him again which helps him feel connected.

The accommodation is also located close to public transport and shops so he can maintain his links with the community, such as continuing to visit the charity which first assisted him. A follow-up visit by the Assistance with Care and Housing provider to check on Pete's progress shows that his physical and emotional wellbeing has improved with secure accommodation, support for his health and continuing links with friends and the community. This gives him a renewed sense of optimism and control.

Service Type: Assistance With Care and Housing

Objective	To support older people and people aged 50 years and over who are on a low income and who are homeless or at risk of homelessness, to remain in the community through accessing appropriate, sustainable and affordable housing and linking them where appropriate, to community care and other support services.
Service type description	<p>Assistance with Care and Housing services do not provide direct care or ongoing support, but do link clients to the most appropriate range of housing and care services in order to meet their immediate and ongoing needs. Service sub-types are:</p> <ul style="list-style-type: none"> • Assessment – Referrals etc and • Advocacy - Financial, Legal etc. <p>In practice, Assistance with Care and Housing provider engagement with the client and the gradual development of trust, leading to a supportive professional relationship, may take numerous interactions.</p> <p>This requires persistence and a specialised capacity of the worker to manage challenging behaviour. When linking clients into services, clients may require a period of continued support and advocacy to assist them to remain linked with those services.</p> <p>Assistance with Care and Housing support may also be required at times after linkages have been established to conduct early intervention and prevent relapse into homelessness or estrangement from support services and a resultant decline in the person's health and welfare.</p> <p>Grant recipients are required to develop links with other local care services and provide a referral service for clients to those agencies that offer care and support services. Examples of linkages to be made include but are not limited to:</p> <ul style="list-style-type: none"> • Commonwealth Home Support Programme service providers • The RAS as part of My Aged Care • Aged Care Assessment Program • Residential aged care where appropriate • Home Care Packages • State and territory programmes and resources • Veteran's Home Care services • Health services • Local government services

	<ul style="list-style-type: none"> Other services appropriate to the needs of the client, such as police and legal services, other aged and community services, medical and therapeutic services, financial services, culturally specific programmes, counselling, mental health services, drug and alcohol treatment services, disability support programmes etc. <p>Requirements for grant recipients funded under this Sub-Programme in relation to interacting with My Aged Care are outlined at Section 3.4.1 of this Programme Manual.</p>
Out-of-scope activities under this service type	<p>Permanent support and/or direct care provision are out-of-scope.</p> <p>Funding to purchase accommodation for clients.</p>
Service delivery setting	<p>Varied – including a client's home, at a centre or clinic, in the community.</p>
Use of funds including any target areas	<p>Grant recipients are funded to link clients to appropriate specific services in their area. They may provide clients with direct contact details for these services, or where judged necessary, provide active liaison and representation on behalf of clients.</p> <p>Grant recipients are also funded to assist the Principal Client to locate, apply for, and relocate to housing in an area suitable to the needs of the Principal and co-habiting Client.</p>
Legislation	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.</p>
Output measure	<p>Time (recorded in hours and minutes as appropriate).</p>
Staff qualifications	<p>Staff must possess an appropriate level of knowledge and skills in relation to socially isolated and/or disadvantaged people.</p>

2.2.4 Service System Development Sub-Programme

Objective

To support the development of the community aged care service system in a way that meets the aims of the Commonwealth Home Support Programme and broader aged care system.

Target population

Commonwealth Home Support Programme grant recipients and their client base.

In certain circumstances services may be provided to people outside the identified target groups for the Commonwealth Home Support Programme as noted in Section 1.2.8 of this Programme Manual.

Service type funded

Sector Support and Development.

Service Type: Sector Support and Development

Objective	To support the development of the community aged care service system in a way that meets the aims of the programme and in the broader aged care system.
Service type description	<p>The service sub-type is sector support and development.</p> <p>The Commonwealth Home Support Programme will support a range of activities that are designed to support, develop and build the capacity of the service system and the sector.</p>
Out-of-scope activities under this service type	This service type does not include provision of direct service delivery to clients or advocacy.
Service delivery setting e.g. home/centre/	Service delivery can be across a range of settings as appropriate.
Use of funds including any target	Funding must be used as described in the Grant Agreement.
Measure	Funds expended in accordance with activity described in Grant Agreement Activity work plan.

CHAPTER 3 – ACCESS AND INTERACTIONS

3.1 Interaction Between the Commonwealth Home Support Programme and Other Programmes

It is permissible for clients of other programmes to access services and support under the Commonwealth Home Support Programme in certain circumstances. The following principles will apply to the interface between the Commonwealth Home Support Programme and other services.

3.1.1 General Principles Defining Access to More Than One Programme

Generally:

- Commonwealth Home Support Programme services must not be provided to people who are already receiving other government-subsidised services that are similar to service types funded through the Commonwealth Home Support Programme.
- Any exceptions to these arrangements must not unfairly disadvantage other members of the Commonwealth Home Support Programme target population.

3.1.2 Interaction with Specific Programmes and Services

Home Care Packages

The care needs of a person receiving a Home Care Package should be addressed through their Home Care Package, and any Commonwealth Home Support Programme services delivered to them would generally be paid on a full cost-recovery basis from the Home Care Package client's individualised budget.

This is intended to ensure that the Commonwealth Home Support Programme is able to provide entry-level support services to as broad a population as possible (given that in most cases this will be the only form of support that people receiving Commonwealth Home Support Programme services access), and recognises that Home Care Package clients already receive an individualised budget that they control, with which they can purchase the services offered under the Commonwealth Home Support Programme.

In defined circumstances, however, a Home Care Package client may access Commonwealth Home Support Programme services in addition to the services they are receiving from their Home Care Package budget (that is, the additional Commonwealth Home Support Programme services will not be charged to the client's individualised budget). These circumstances include:

- Where the Home Care Package client's budget is already fully allocated, a Level 1 or 2 Home Care Package client can access additional, short-term or episodic Allied Health and Therapy services or Nursing services from the Commonwealth Home Support Programme;
- Where the Home Care Package client's budget is already fully allocated, and a carer requires

it, a Home Care Package client can access additional planned respite services under the Commonwealth Home Support Programme;

- In an emergency (such as when a carer is not able to maintain their caring role), where a Home Care Package client's budget is already fully allocated, additional services under the broader Commonwealth Home Support Programme can be obtained on an emergency or short term basis.

These instances should be time limited, monitored and reviewed.

As with other clients accessing Commonwealth Home Support Programme funded services, except in Western Australia and Victoria, My Aged Care will be responsible for assessing and referring clients on Home Care Packages to Commonwealth Home Support Programme services where appropriate. All Home Care Package clients must be assessed by My Aged Care (for example by a RAS) to receive these additional Commonwealth Home Support Programme services.

In addition, Commonwealth Home Support Programme providers should only supply additional Commonwealth Home Support Programme services to Home Care Package clients where they have capacity to do so without disadvantaging other current or potential Commonwealth Home Support Programme clients - that is, Commonwealth Home Support Programme services should prioritise people who need Commonwealth Home Support Programme support but do not have access to other support services over people who are already in receipt of a Home Care Package.

Where a new client has been assessed and approved as eligible for a Home Care Package but is waiting to receive that Package, the client will be able to receive services under the Commonwealth Home Support Programme as an interim arrangement, but only to an entry-level of support consistent with the Commonwealth Home Support Programme, not at the level of support of the Package they are eligible for.

Residential Care

Residential care clients will not be able to access Commonwealth Home Support Programme services unless on a full cost recovery basis.

National Disability Insurance Scheme (NDIS) and Other Disability Supports

The NDIS is not intended to replace the health or aged care systems. The National Disability Insurance Scheme Act 2013 specifies that a person is eligible for the NDIS if they meet its age, residential and disability requirements. The age eligibility requirements mean that a person needs to have acquired their disability and made their access request before the age of 65 to be an NDIS participant.

People who are not accessing the NDIS but have a disability and are aged 65 or over will be able to access the Commonwealth Home Support Programme if they are eligible, but within its scope as the entry tier of aged care (see the Scenario at Section 2.2.1 of this Programme Manual as an example).

Commonwealth Home Support Programme grant recipients will be required to make reasonable provisions to accommodate the specific needs of clients with disabilities to enable them to access services that are within scope, such as providing services that are responsive to the client's specific needs.

Health System

Commonwealth Home Support Programme services are not intended to replace or fund supports funded and provided for under other systems including the health system. For example, the Commonwealth Home Support Programme aims to maximise independence and autonomy for older people but is not a substitute for early intervention or rehabilitation/subacute/transition programmes provided under the health system.

Post-acute care is also not funded under the Commonwealth Home Support Programme. Where a client is already eligible for Commonwealth Home Support Programme funded assistance or was receiving it prior to hospitalisation, additional support services can be provided following a hospital stay, for a short period of time. After this, support services must be reviewed to determine whether the client's current needs are being met.

Short-Term Restorative Care as a Form of Flexible Care

The 2015 Budget provided for additional short-term restorative care places to support older people to improve their capacity to stay independent and living in their homes longer, rather than prematurely entering residential aged care. The new care type will build on the success of the existing Transition Care Programme that assists older people to return home after a hospital stay. However, unlike transition care, short-term restorative care will be available to people before they end up in hospital.

These places will be established under the *Aged Care Act 1997* and further development work will be undertaken to determine issues of eligibility, assessment and service delivery arrangements – as well as their relationship with short-term restorative care assistance provided under the Commonwealth Home Support Programme.

Palliative Care

State and territory governments are responsible for the provision and delivery of palliative care and hospice services as part of state health and community service provision responsibilities. As such, decisions on the funding and delivery of palliative care and hospice services in each jurisdiction, are the responsibility of individual state and territory governments.

Commonwealth Home Support Programme clients are able to receive palliative care services from their local health system in addition to their home support services, but this needs to be arranged by the person's GP, or treating hospital. As with any palliative care arrangement, the palliative care team would coordinate the skills and disciplines of many service providers to ensure appropriate care services. This would include working with the client's Commonwealth Home Support Programme service provider(s).

Veterans

Veterans are able to access Commonwealth Home Support Programme services in order to support them to remain independent in their own home in the same way as the general population. This access is determined by their eligibility, assessed need, and any service being provided by other government programmes.

A person's eligibility for Department of Veterans' Affairs-funded services such as the Veterans' Home Care Programme, community nursing, transport or respite does not preclude that person from accessing services under the Commonwealth Home Support Programme, so long as the client is eligible for services, the support required from the Commonwealth Home Support

Programme is entry-level, and there is no duplication in the specific services/assistance being provided.

For example, a person may access Veterans' Home Care for low-level domestic assistance and personal care, but also be receiving transport and delivered meals through the Commonwealth Home Support Programme.

3.1.3 Transition Arrangements for Existing Clients

Existing clients are considered to be those clients with a current booking for service or currently accessing a service as at 1 July 2015; who accessed services (perhaps intermittently) at least three times over the previous financial year (e.g. three episodes of receiving meals); or who received care for a continuous period of six months or more in the previous financial year (see Glossary).

Under the Commonwealth Home Support Programme, efforts will be made to ensure that there is continuity of care for existing clients. This includes:

- Existing clients of previous programmes (Commonwealth HACC; planned respite services under the NRCP; DTC and ACHA programmes) who would otherwise not be eligible for similar Commonwealth Home Support Programme services. These clients will be supported during a transfer to other appropriate services or grandfathered until suitable services become available
- Existing clients who are eligible under the Commonwealth Home Support Programme
- Existing Home Care Package clients who have been referred by the Department.

It is expected that grandfathering arrangements would occur within the life of the Commonwealth Home Support Programme Grant Agreement. In the interim, service providers are expected to transition clients to more appropriate services in a timely manner.

Where an existing client's needs change significantly so they would need additional levels of services or new service types, the client should be referred to My Aged Care for reassessment and, based on the outcome of this assessment, will be supported to move to more appropriate care, such as a Home Care Package.

Grandfathering arrangements for existing clients aged under 65 years is necessary until other more appropriate care is available.

In certain circumstances services may be provided to people outside the identified target groups for the Commonwealth Home Support Programme as noted in Section 1.2.8 of this Programme Manual.

Residential care

Prior to 1 July 2015, services funded under the DTC Program were available to residents with an Aged Care Funding Instrument (ACFI) 'low' score in Australian Government funded residential care facilities. These existing DTC clients will be grandfathered under the Commonwealth Home Support Programme.

Clients Needing Services That Are Over the Level of 'Entry-Level Support'

Existing clients receiving services prior to 1 July 2015 that are comparable in volume and cost to the type of care provided under a Home Care Package will be grandfathered and supported while they transition to more suitable supports and programmes. This includes consideration of their eligibility for a Home Care Package or residential care.

These grandfathered clients will continue to receive support from the current grant recipients at the current service level until they are transitioned to other forms of more appropriate care. The grant recipient's approach to transition these clients to other programmes must be underpinned by the principle of consumer direction.

Existing Clients Receiving Services Over 'Entry-Level Support' as They Wait for a Home Care Package

Existing clients receiving services over 'entry-level' support prior to 1 July 2015 and waiting for a Home Care Package will be grandfathered at their current level of service until the Home Care Package becomes available.

Clients Aged Under 65 Years

Clients aged under 65 years who were accessing services under the NRCP or DTC Program prior to 1 July 2015, will be allowed to continue to receive services under the Commonwealth Home Support Programme until:

- A more appropriate service becomes available, such as the NDIS
- They no longer require the service
- The expiration of the Grant Agreement for the Commonwealth Home Support Programme.

This is necessary to ensure this group of clients has access to services until they can access more appropriate care.

Clients who are Homeless or at Risk of Homelessness and Aged Under 50 Years

A small number of principal clients aged under 50 years accessed linkage services provided by the former ACHA Program. These clients may retain access to equivalent services under the Commonwealth Home Support Programme until other suitable services become available.

Carers of Clients Under the Age of 65

Prior to 1 July 2015, there was a small group of carers of clients under the age of 65 receiving services under the former NRCP. Grandfathering arrangements will apply for existing respite arrangements to ensure continuity of care for these clients. These clients may retain access to equivalent services under the Commonwealth Home Support Programme until other suitable services become available.

3.2 Equity of Access

Grant recipients must ensure that all their clients have equitable access to services. To achieve equitable access, grant recipients must consider the following key principles:

- Physical access – all Commonwealth Home Support Programme services must be able to offer accessible service options to people with physical or sensory disabilities.
- All eligible people assessed as needing a service must have equal access to Commonwealth Home Support Programme services whether they are an Aboriginal and/or Torres Strait Islander person; from a diverse cultural and linguistic background; or on the grounds of location, marital status, religion and spirituality, gender identity, sexual orientation and intersex status, disability or whether they have the ability to pay for services.

In addition:

- The Commonwealth Home Support Programme does not have any exclusion from services based on citizenship, residency status or eligibility for Medicare support. However there may be provisions in the *Migration Act 1958* that require a person, who has given an assurance of support, to repay a visa holder's aged care or medical costs. The Department of Immigration and Border Protection should be contacted in relation to this matter if an assurance of support has been given.
- Eligibility does not translate to having an entitlement to services. Services may not be able to be provided due to other people being assessed as a higher priority or resources not being immediately available.

3.3 Prioritisation of Referral

Priority of the referral will be determined by My Aged Care based on evidence based approaches using standardised factors including carer availability, cognition and function. This will be provided with the referral through the My Aged Care provider portal. The priority timeframes are referenced in the My Aged Care Guidance for Providers document available on the My Aged Care website (www.dss.gov.au/MyAgedCare).

Grant recipients are to take this rating into account along with their own capacity to respond with existing resources before accepting a client.

3.4 Assessment for Entry to the Commonwealth Home Support Programme

3.4.1 Assessment Functions Undertaken by My Aged Care

From 1 July 2015 entry and assessment for the Commonwealth Home Support Programme will be through My Aged Care. Detailed information for service providers on interacting with My Aged Care and using the My Aged Care provider portal is available on the Department of Social Services (www.dss.gov.au/MyAgedCare) website.

My Aged Care incorporates a website and contact centre. The My Aged Care contact centre will register clients and undertake a phone-based screening process.

My Aged Care also incorporates a RAS network. The RAS will operate in 52 Aged Care Planning Regions across Australia (except Western Australia and Victoria) and will assess a client's needs and eligibility for Commonwealth Home Support Programme services.

Both levels of assessment will be supported by a standardised national assessment process (using the NSAF) and a central client record.

Core functions delivered by the RAS are:

- Assessment of new clients, with a holistic, goal oriented reablement focus
- Matching and referral of assessed clients to appropriate Commonwealth Home Support Programme services and other appropriate support services
- Reassessment of existing clients where a significant change arises in the client's circumstances or needs
- Linking service support to assist vulnerable clients with complex care needs to access a range of aged care and other services e.g. health, housing, disability, financial and aged care services
- The provision of information regarding client fees for Commonwealth Home Support Programme Services.

The RAS will be required to have local knowledge of Commonwealth Home Support Programme Services.

Comprehensive assessments for aged care services (such as Home Care Packages) under the *Aged Care Act 1997* will continue to be undertaken by ACATs.

Assessment Processes In Victoria And Western Australia

Western Australia and Victoria will continue to hold separate responsibility for the provision of face-to-face assessment services in those jurisdictions. Clients living in Victoria and Western Australia can still call My Aged Care, but there will be differences in the assessment and delivery of services.

Victoria

For clients living in Victoria, My Aged Care will register them, create their client record and undertake the screening process. The My Aged Care contact centre will be able to take calls from Victorian clients and refer people direct to service or an appropriate form of assessment.

Face-to-face assessments for Commonwealth Home Support Programme services will be sent to the existing Home and Community Care (HACC) Assessment Service. The HACC Assessment Service will be able to view the My Aged Care client record but will not update the record. They will not use the same assessment framework as My Aged Care and will not make electronic referrals for service.

Comprehensive assessments will continue to be undertaken by the Aged Care Assessment Service (ACAS). From 1 July 2015, ACAS will receive electronic referrals from My Aged Care. This will allow them to accept/reject referrals and access the registration and screening

information captured by the My Aged Care contact centre. ACAS will transition to using all functions of My Aged Care by December 2015.

Victorian Commonwealth Home Support Programme providers will be able to accept clients directly as well as receive referrals through their existing referral pathways, with My Aged Care complementing these existing mechanisms with clients that enter through the Contact Centre. Commonwealth Home Support Programme service providers are encouraged to keep up-to-date details of their organisation on the My Aged Care Provider Portal to ensure visibility of their service to clients who access services through My Aged Care.

Western Australia

For clients living in Western Australia, My Aged Care will directly refer clients to the existing Western Australia intake point. My Aged Care will not register clients, create a client record or undertake a screening process.

Face-to-face assessments for Commonwealth Home Support Programme services will be undertaken by the existing HACC Assessment Service which will not use the same assessment framework as My Aged Care.

Comprehensive assessments in Western Australia will continue to be undertaken by ACATs who will transition to using all functions of My Aged Care by December 2015.

Western Australian Commonwealth Home Support Programme providers will be able to accept clients directly as well as receive referrals through their existing referral pathways.

The Assessment Process

Initial contact

The My Aged Care contact centre will register the client, conduct a screening process over the phone (where possible) and then may:

- Refer the client directly to Commonwealth Home Support Programme service(s)
- Refer the client for a face-to-face home support assessment conducted by the My Aged Care RAS
- Refer the client to an ACAT if needs indicate a higher level of care is required
- Provide information about non-Commonwealth funded services, as appropriate.

Clients approaching service providers directly

From July 2015, people seeking access to aged care services for the first time will need to contact the My Aged Care contact centre to discuss their aged care needs and have a client record created.

New clients (and existing clients seeking new service types) should not access Commonwealth Home Support Programme services directly by approaching a service provider.

New clients should be registered, screened and/or assessed by My Aged Care to determine eligibility prior to accessing Commonwealth Home Support Programme services.

Where it is clear that urgent care is required, for example the delivery of meals due to the

unplanned absence of a carer, service delivery may be provided before a client has contacted My Aged Care.

Service providers can assist clients with the My Aged Care registration process by:

- Recording client details in an inbound referral form, accessed from My Aged Care (www.myagedcare.gov.au) that is sent to the My Aged Care contact centre
- Calling the My Aged Care contact centre with the person to help them register and be screened
- Sending a fax with information about the person.

Direct Referral by My Aged Care to Commonwealth Home Support Programme Service Delivery Including Urgent Circumstances

The client can be referred by My Aged Care directly to a Commonwealth Home Support Programme service:

- If the need for service is episodic due to an event that means the client's ability to live independently is compromised temporarily (such as while recovering from illness); or
- Where there are relatively simple needs identified.

The services referred to should be:

- For a one-off intervention (such as transport to a GP appointment); or
- For a short period of time only (not ongoing service provision).

The following describes circumstances where direct service delivery can commence prior to completion of the My Aged Care face-to-face assessment:

- Where a person is eligible for the Commonwealth Home Support Programme and screening at the contact centre identifies there is no further assessment necessary. This pathway will not be appropriate for all service requests.
- Where a client has an urgent need for services but also requires face-to-face assessment. In these cases, a client may begin to receive services they are assessed as eligible to receive (e.g. meals or transport), while they wait for a face-to-face assessment.
- Where it is clear that urgent care is required, for example the delivery of meals due to the unplanned absence of a carer, service delivery may be provided before a client has contacted My Aged Care. Ultimately clients need to be registered with My Aged Care, and have their broader needs considered.

This recognises situations where urgent delivery of services is required while maintaining the commitment to a more thorough analysis of the client's needs by the RAS when possible.

There are established Performance Indicators including timeframes for RAS in managing referrals, conducting an assessment and making referrals.

Face-to-face Assessment

Where face-to-face assessment is required, this will be conducted in the client's home or other appropriate location by the RAS using the NSAF, building on the information collected by the My Aged Care contact centre during the screening process.

This may include referring clients to more specialised assessments undertaken under the Commonwealth Home Support Programme where required, such as allied health professionals.

The central client record will ensure they do not need to unnecessarily repeat their story as Commonwealth-funded service providers will have access to this information.

The assessment will focus on the strengths and needs of the individual client, rather than be specific to a particular programme or care type. RAS assessors are appropriately skilled, and trained to undertake assessments and identify services appropriate for a diverse range of clients. The national training resources for staff conducting screening and assessment includes consideration of the needs of people from CALD backgrounds, Aboriginal and Torres Strait Islander people and the LGBTI community.

The screening and assessment process, facilitated through the NSAF, ensures diverse needs groups are appropriately considered and provided with culturally appropriate support.

My Aged Care RAS assessors will approach assessment in a way that maximises client independence and autonomy, supporting their desire and capacity to make gains in their physical, social and emotional wellbeing by optimising physical function and active participation in the community.

Where a client might benefit from a short course of more intensive supports, as part of a reablement approach recommended by a My Aged Care RAS assessor, the Commonwealth Home Support Programme will be able to deliver a goal orientated support service for a time-limited period. The nature of these services should be identified in the referral sent to providers.

Review of Client Needs

Changes in a client's circumstances may result in reviews or new assessments being completed over time.

A review refers to a check of the effectiveness and on-going appropriateness of the services the client is receiving. A review of a client may take place where:

- The My Aged Care assessor sets a review date in the support plan for a short term service. For example, where the client is referred for time limited support under the Commonwealth Home Support Programme whilst a client is waiting for access to a Home Care Package
- A service provider identifies a change in the client's needs or circumstances that affects the existing support plan
- A client identifies a change in their needs or circumstances, or seeks assistance to access new services or change their service provider.

Commonwealth Home Support Programme service providers have an on-going responsibility to monitor and review the services they provide their clients to ensure that the client's needs are being met. Where there is no recommended review date included in the support plan, it is expected that the service provider will undertake a review of services they are delivering, at least every 12 months. The outcome of the review can be recorded on the client record.

Where the client requires a different service or where the review highlights needs or goals not identified on the client's support plan, the service provider must refer the client to the RAS for a review. A client completing a restorative care programme may also be referred to the RAS, for identification of any on-going services needed following the end of the programme.

The outcomes of a review may include:

- No change
- An increase or decrease in services
- A referral for further assessment.

If there is a significant change in the client's needs and/or circumstances that affect the scope of the support plan, a new assessment may be undertaken by the RAS. This may be initiated by an assessor's review following a request for review by a service provider or by a client. Clients will be referred to the RAS that last undertook the face-to-face assessment.

Assistance with Care and Housing Sub-Programme Service Providers

It is recognised that a specialised approach is required for Assistance with Care and Housing clients due to their particular circumstances. For these clients, Assistance with Care and Housing service providers may be an additional (to My Aged Care) point of entry and assessment.

Assistance with Care and Housing providers can help clients contact the My Aged Care contact centre and work with the My Aged Care RAS, particularly during the assessment process. Providers can also update the client service plans. Where there are significant changes in need or additional services needed, grant recipients can request a review, which may lead to a new assessment for the client.

Implementing a Reablement Approach

The My Aged Care RAS assessors meet face to face with potential clients to gauge their eligibility, work with the client to identify and set goals and then refer clients to available service providers.

Service providers then interpret the support plan with a wellness approach in mind and in consultation with the clients by translating each goal into smaller steps to enable clients to progress their goals.

The My Aged Care RAS will be responsible for developing support plans with the client that may result in referral to services that will provide a reablement intervention. Such a plan might include some of the following:

- Need for assistive devices or equipment
- In-home or community linked exercise and daily activity program
- Strategies to reduce falls
- Improved awareness and understanding of the use of medication
- Ways of managing chronic disease, including improved ways of self-management.

Because of the nature of reablement services, it is possible there will be several items in the support plan that need to be delivered in a coordinated way over a limited time period. In these circumstances, the assessor could refer a client to a lead provider, the organisation or individual provider who will deliver the key services in the support plan.

The assessor might also need to take on a coordination role to ensure that all services in the support plan are linked to a provider and that they will all be delivered in the time frame of the overall reablement service.

More detail on implementing a wellness approach, including reablement, under the

Commonwealth Home Support Programme is available in the publication *Living well at home: CHSP Good Practice Guide*.

3.4.2 Grant Recipient Requirements for Interacting with My Aged Care

Commonwealth Home Support Programme grant recipients must:

- Provide and update their service data via the My Aged Care online provider portal
- Accept/reject client referrals via the My Aged Care online provider portal
- Refer or help clients to access My Aged Care where clients have approached them directly
- Enter service information and update client details on the client record
- Participate in assessment, referral and client record processes.

The *My Aged Care Guidance for Providers* and *My Aged Care Provider Portal User Guide* are available on the Department of Social Services (www.dss.gov.au/MyAgedCare) website. These documents provide Grant Recipients with detailed information on the My Aged Care system.

3.4.3 Assessment Functions Undertaken by Commonwealth Home Support Programme Grant Recipients

A small number of assessment functions will continue to be undertaken as integral parts of service delivery by Commonwealth Home Support Programme grant recipients, where they are intrinsic to the service being delivered.

These include:

- Service level assessment activities relating to the grant recipient, such as undertaking Work Health and Safety assessments (for both the care worker and client). As noted earlier, grant recipients also need to undertake a review of services every 12 months (these may be done over the phone with the client)
- Specialised assessment based on professional expertise (e.g. Nursing, Allied Health and Therapy Services; and face-to-face malnutrition risk assessments by Meals providers where organisations have this knowledge and capacity)
- On-going monitoring of the client, the home environment and appropriateness of service arrangements
- Referral to My Aged Care if the client's care needs change significantly (e.g. high levels of additional services are required or new service types are needed). This may lead to a new assessment.

In addition, grant recipients must follow requirements identified at Section 3.4.2 of this Programme Manual.

3.4.4 Assessment Principles

Commonwealth Home Support Programme grant recipients must adhere to the following principles when undertaking the functions outlined in Section 3.4.3 of this Programme Manual and in interacting with My Aged Care as per Section 3.4.2.

Review and Refer

Where a client's circumstances have altered (e.g. carer status has changed) and/or the client's needs are changing to a point where new service types may be required or current levels of service are escalating significantly, service providers must refer clients to My Aged Care. This may lead to adjustment of the support plan and a new assessment.

Avenues for Client Complaint about Assessment

If a client has a complaint about the assessment process or outcome, the client should contact the RAS in the first instance. The RAS will document the complaint and attempt to resolve the complaint within their internal complaints system. (RAS providers are required to develop and document their own internal complaints system, which aligns with the Deed of Arrangement).

If a client is not satisfied that their complaint has been resolved by the RAS, they can escalate the complaint by contacting the My Aged Care contact centre.

My Aged Care

The publications My Aged Care Guidance for Providers and My Aged Care Provider Portal User Guide are available on the Department of Social Services (www.dss.gov.au/MyAgedCare) website and provide Commonwealth Home Support Programme Grant Recipients with detailed information on the My Aged Care system.

Service Level Assessment

All review and assessment functions undertaken for the Commonwealth Home Support Programme must incorporate the eligibility and service information and Work Health and Safety requirements outlined in this Programme Manual.

Privacy and Confidentiality

Assessment practices must be in accordance with processes to protect client privacy and confidentiality.

CHAPTER 4 – FEES FRAMEWORK

Following the announcement by Senator the Hon Mitch Fifield, Assistant Minister for Social Services, a Commonwealth Home Support Programme Fees Framework will be developed which outlines principles that service providers can adopt in setting and implementing fees, leading to greater consistency and fairness.

The Department will work with the National Aged Care Alliance and peak bodies to settle a principles-based fees policy for release in July 2015. All Commonwealth Home Support Programme providers will be notified of the release of the policy.

The new fees framework will enable providers to move their fee charging practices towards national consistency over time.

The Department will also work with the sector to develop a national guide for providers and consumers which describes the current varying fee arrangements in order to make them more transparent.

This chapter of the Programme Manual will contain information on the Fees Framework, to be provided at a later date.

PART B

Administration of the Commonwealth Home Support Programme

CHAPTER 5 – GRANT RECIPIENT AND DEPARTMENTAL RESPONSIBILITIES

5.1 Grant Recipient Responsibilities

In entering into a Grant Agreement with the Department, the grant recipient must comply with all requirements outlined in the suite of documents that comprise the Agreement, including:

- The Commonwealth Home Support Programme Guidelines
- The Comprehensive Grant Agreement Terms and Conditions (Terms and Conditions)
- Any Supplementary Conditions
- The Schedule (including any annexures or attachments to the Schedule)
- This Programme Manual
- Other documents incorporated by reference into the above documents.

Grant recipients are responsible for ensuring:

- The Terms and Conditions of the Grant Agreement are met
- Service provision is effective, efficient and appropriately targeted
- Highest standards of duty of care are applied
- Services are operated in line with, and comply with, the requirements as set out within all state and territory and Commonwealth legislation and regulations
- Special needs groups have equal and equitable access to services
- They work collaboratively to deliver services
- They contribute to the overall development and improvement of services such as sharing best practice
- They manage and keep up-to-date their service information via the web-based provider portal.

This chapter outlines grant recipient and Departmental responsibilities relating to the administration of the Commonwealth Home Support Programme, including:

- Quality arrangements (Section 5.1)
- Funding arrangements (Section 5.2)
- Reporting requirements (Section 5.3).

5.1.1 Quality Arrangements for Service Delivery

All Commonwealth Home Support Programme grant recipients must operate in line with the Home Care Standards (the Standards) and have appropriate procedures in place to meet these. The Standards relate to quality of care and quality of life for the provision of aged care in the community. A link to the Standards is provided in Appendix C of this Programme Manual.

The Standards require service providers to demonstrate effective management processes based on a continuous improvement approach to service management, planning and delivery. This includes policies for managing staff and volunteers, regulatory compliance with funded programme guidelines, relevant legislation including work health and safety legislation and professional standards and having complaint mechanisms in place. Some of the Standards relate to service access and assessment and referral practices.

My Aged Care undertakes the registration, screening and assessment of clients requiring aged care services. Although the responsibility of assessments for services under the Commonwealth Home Support Programme resides with the My Aged Care RAS, grant recipients are expected to continue to monitor and review the client's circumstances to ensure the service delivery is appropriate for the client in meeting their care needs. Grant recipients must comply with this and all other requirements relating to access and assessment as outlined in Chapter 3 of this Programme Manual.

Grant recipients also must report that they have a client fee policy in place that is consistent with the Fees Framework as detailed in Chapter 4 of this Programme Manual.

Quality Reviews

The Australian Aged Care Quality Agency (the Quality Agency) undertakes all quality reviews of aged care services provided in the community, including the Commonwealth Home Support Programme. Under clause 5.9(a) of the Grant Agreement, grant recipients are obliged to provide the Quality Agency with access to a service delivery site or service outlet, for the purpose of undertaking a quality reporting site visit.

The Standards will support grant recipients to maintain the high quality of service delivery expected by all providers of aged care, however only those Commonwealth Home Support Programme Sub-Programmes under which direct care is delivered to clients (all Sub-Programmes except the Assistance with Care and Housing Sub-Programme and the Service System Development Sub-Programme) will be subject to Quality Reporting by the Australian Aged Care Quality Agency.

5.1.2 Client Rights and Responsibilities

Grant recipients must comply with the Charter of Care Recipients' Rights and Responsibilities - Home Care (the Charter) (excluding the rights expressed at 3a) within the User Rights Principles 2014 under the *Aged Care Act 1997*, and provide their clients with a copy of the *Charter of Care Recipients' Rights and Responsibilities for Home Care*.

Grant recipients must:

- Develop and maintain internal policies and practices that support clients' rights and responsibilities in accordance with the Charter and the Standards
- Ensure these policies support and explain their responsibilities to clients
- Make this information available to clients and assist with clients' understanding of the policies
- Respond to the needs of each individual client
- Involve each individual when determining the support to be provided.

Respect for, and promotion of, the rights of clients is integral to the consumer direction philosophy that underpins the Commonwealth Home Support Programme.

5.1.3 Police Checks

Grant recipients have a responsibility to ensure staff members working with vulnerable people, volunteers and executive decision makers undergo police (or relevant) checks.

Grant recipients have a responsibility to ensure that all staff, volunteers and executive decision makers working in Commonwealth Home Support Programme services are suitable for the roles they are performing. Grant recipients must ensure that staff involved in service delivery meets the *Commonwealth Home Support Programme Police Certificate requirements at Appendix F of this Programme Manual*.

The Commonwealth Home Support Programme Police Certificate Guidelines have been developed to assist grant recipients with the management of police check requirements under the Commonwealth Home Support Programme.

The payment of the cost of obtaining a police certificate is a matter for negotiation between the grant recipient and the individual. Individuals may be able to claim the cost of the police certificate as a work-related expense for tax purposes. Further advice on this issue is available on the Australian Taxation Office (www.ato.gov.au) website

Volunteers may be eligible to obtain a police certificate at a reduced cost whether the certificate is requested by an individual or by a grant recipient on behalf of a volunteer. This must be confirmed with the agency issuing the police certificate.

5.1.4 Staffing and Training

Grant recipients are required to meet staffing and training requirements under the Standards. Examples of desirable staff qualifications under the Commonwealth Home Support Programme are outlined in the 'Staff Qualifications' sections in Chapter 2 of this Programme Manual.

5.1.5 Work Health and Safety

Legislation relating to OH&S is being replaced by legislation referring to Work Health and Safety (WHS) following the passage of the *Work Health and Safety Act 2011 (Cth)*.

The Australian Government, Northern Territory, Queensland, New South Wales, Tasmania, South Australia and the Australian Capital Territory have implemented the new legislation. Victoria and Western Australia have not yet introduced the WHS legislation. It is intended that the term OH&S will be incrementally replaced with WHS in all Australian Government, state and territory documents.

Providing a Safe and Healthy Workplace

Commonwealth Home Support Programme grant recipients must provide a safe and healthy workplace for their employees and volunteers in accordance with relevant Commonwealth, and state or territory governments WHS or OH&S legislation, as well as relevant codes and standards.

In many cases, the workplace will be the client's home. Grant recipients are responsible for addressing the safety of employees and volunteers delivering services to a client or carer in their home.

Grant recipients are required to be aware of their obligations to comply with state and territory based laws and regulations relevant to the safe handling and removal of asbestos when undertaking home modifications to the homes of clients. For detailed information on laws applying to the workplace, grant recipients must contact the relevant work health and safety regulator in their state or territory.

Grant recipients must also consider and assess WHS, or OH&S, Australian Building Standards and other local requirements, as these relate to their own offices and facilities, vehicles, and other physical resources used by their staff and volunteers.

5.1.6 Client not Responding to a Scheduled Visit or Service

Grant recipients may refer to the Guide for Community Care Grant recipients on how to respond when a client does not respond to a scheduled visit (the Guide) published in September 2009 as a set of nationally consistent protocols to deal with non-response from a client who was scheduled to receive a service.

Grant recipients may use the Guide when developing their own policies and procedures on the issue of clients not responding to scheduled visits.

5.1.7 Complaints Mechanisms

Dealing with Complaints About Services

Commonwealth Home Support Programme clients and their carers must be actively encouraged to provide feedback about the services they receive. A client has the right to call an advocate of their choice to present any complaints and to assist them through the complaints management process.

Clients (or their representative) can raise a complaint in the following ways:

- Directly with the grant recipient through their publicly available complaints system (see clause 3.4 of the Grant Agreement for further detail)
- With the Department (www.dss.gov.au) at the feedback facility or by email to DSSfeedback@dss.gov.au
- With the Aged Care Complaints Scheme (the Scheme) (<http://agedcarecomplaints.govspace.gov.au/>) or by telephone on **1800 550 552** (a free call from fixed lines; calls from mobiles may be charged at a higher rate). The Scheme provides a free service for anyone to raise their concerns about the quality of care or services being delivered to people receiving aged care services subsidised by the Australian Government

Grant recipients must comply with the Guidelines for the Aged Care Complaints Scheme.

Grant recipients are also responsible for the services provided by subcontractors, including resolving any complaints made about that organisation. Should a complaint regarding a subcontractor be made to the Department, the grant recipient retains responsibility for liaison with the Department and ensuring the subcontractor complies with all reasonable requests, directions and monitoring requirements requested by the Department.

In recognition that many grant recipients also deliver multiple services through other Australian Government and/or state and territory government programmes, the Department will, from time-to-time, share information with other relevant parties to ensure clients continue to receive appropriate services.

Dealing with complaints about the assessment process is covered in Section 3.4.4 of this Programme Manual.

5.1.8 Service Continuity

At all times grant recipients must do all things reasonably necessary to ensure clients continue to receive Commonwealth Home Support Programme services. If there is a risk that a grant recipient is no longer in a position to provide services for any reason, for example, due to serious incident such as a natural disaster, they must cooperate with the Department to ensure service provision continues for their clients.

Grant recipients must develop Activity Continuity Plans that address any risks associated with being unable to continue to deliver services, including in the event of a serious incident. The Continuity Plan could cover:

- Management of serious incidents such as natural disasters (e.g. how to continue service delivery in the event of flood or fire)
- Transitioning-out of service provision (e.g. moving services to another grant recipient where the Commonwealth Home Support Programme Grant Agreement has expired or is terminated).

Transition Out

The 'transition-out' component of Activity Continuity Plans aims to ensure that the standard and delivery of services do not suffer and should cover: specific requirements for different service types; the grant recipient's individual arrangements; and the outcome of any negotiations with other grant recipients.

This component should also include the following:

- Service details
- Subcontracting arrangements
- Organisational information
- Timeframe for transition
- Staffing arrangements
- Assets
- Information and records
- Telephones.

5.1.9 Acknowledging the Funding

Clause 4 of the Terms and Conditions oblige grant recipients to acknowledge the Department's support. The following prescribed wording must be used:

“Funded by the Australian Government Department of Social Services. Visit the Department of Social Services website (www.dss.gov.au) for more information”.

OR

“Supported by the Australian Government Department of Social Services. Visit the Department of Social Services website (www.dss.gov.au) for more information”.

Disclaimer

Publications and published advertising and promotional materials that acknowledge the Commonwealth Home Support Programme funding must also include the following disclaimer:

“Although funding for this [insert service/activity] has been provided by the Australian Government, the material contained herein does not necessarily represent the views or policies of the Australian Government.”

Other Options for Acknowledging the Funding

If for any reason grant recipients wish to acknowledge the funding in a different manner to the options set out in this Programme Manual, they must obtain the Department’s prior written consent.

Questions on Acknowledging Funding

Grant recipients who are unsure whether they need to acknowledge the Commonwealth Home Support Programme funding or have any queries relating to acknowledgement of funding are encouraged to contact the Department for advice (grants@dss.gov.au).

Transition Arrangements

The Department understands that grant recipients will have existing stocks of promotional materials produced which used the former Department of Health and Ageing (DoHA) acknowledgements. Providers are encouraged to discontinue use of these materials over the long term and instead introduce the new prescribed wording identified above recognising the Commonwealth Home Support Programme.

Monitoring of the use of Acknowledgements

Grant recipients are responsible for ensuring they and their subcontractors comply with the requirements for acknowledging the funding which are set out in this section.

The Department will monitor acknowledgments of funding and, in particular, the use of the prescribed wording, and notify grant recipients in writing if it considers that a grant recipient or their subcontractor has failed to comply with the DSS Comprehensive Grant Agreement. In certain circumstances, the Department may, by notice in writing, revoke its permission for any person to use this wording (for example, if the grant recipient or subcontractor has not complied with all the requirements of this Programme Manual).

Grant recipients should inform the Department if they become aware of any unauthorised use of the due recognition branding by any person.

5.1.10 Subcontracting

Grant recipients do not need to seek Departmental approval for use of subcontractors to deliver the funded services but a detailed register of subcontractors used must be maintained and provided to the Department on request. All subcontractors must provide services in line with the Agreement and the grant recipient remains responsible for any omissions of the subcontractor.

5.2 Funding

5.2.1 Spending the Grant

For information on spending funding, including growth funding, please refer to the Commonwealth Home Support Programme Guidelines Overview, available on the Department of Social Services (www.dss.gov.au/chsp) website.

5.2.2 Assets

Assets are defined in Clause 40 of the DSS Comprehensive Grant Agreement as any item of personal, real or intangible property, with a price or value of \$10,000 or more, inclusive of GST, and which has been created, acquired or leased wholly or in part with the Grant.

Grant recipients must refer to Item H of the Grant Agreement for specific guidance on Asset purchase.

5.3 Grant Recipient Reporting

5.3.1 Overview

Grant Recipient Responsibility in Managing Risk

Grant recipients are to actively work to identify and address potential risk, to ensure the safety of service users, staff and the organisation and should refer to the Home Care Standards for further guidance.

Reporting Elements and Timing of Reports

Under the Commonwealth Home Support Programme, grant recipients will be required to submit reports relating to the Activity described in Item B of the Grant Agreement. The Activity means any tasks, activities, services or other purposes for which the grant is provided.

Reports will in the main, cover the following elements:

- Financial reporting – reports to facilitate acquittal of funds expended, providing assurance and evidence that public funds have been spent, as specified in the Grant Agreement
- Performance reporting – reports on service delivery activities and outcomes.

- The type and frequency of Activity reports due are outlined in Items E and F of the grant recipient's Grant Agreement.

In an effort to reduce the reporting burden for grant recipients, the frequency of submitting financial reports has been confined to annual reporting (unless otherwise stated in the Grant Agreement). A summary of when key Activity reports are due is provided in Table 2.

Table 2 – Key Reports – Commonwealth Home Support Programme

Report	Reporting Period	Final due date to the Department	Description
Financial acquittal report	1 July to 30 June	31 October	A report which facilitates acquittal of funds expended, providing assurance and evidence that public funds have been spent for their intended purpose, as specified in the Grant Agreement.
Performance/ Service Delivery Report via DSS data collection system	1 July to 31 December 1 January to 30 June	31 January 31 July	A report on service delivery activities and outcomes.

5.3.2 Accounting for the Grant

Under clause 9 of the Terms and Conditions, grant recipients must spend the Grant:

- Only on carrying out the Activity
- In accordance with the Grant Agreement (including in accordance with the Budget for the Activity specified in the Grant Agreement).

All financial information provided by grant recipients should relate to the relevant financial year that is being acquitted. Financial reports are to be provided separately for each Activity (in this case, at the Sub-Programme level – refer to Section 2.1 of this Programme Manual for information on Sub-Programmes) for which funding is received.

The Financial Reporting Process

The Department requires grant recipients to provide assurance and evidence that grant funds have been spent for their intended purpose. This is in the form of financial reporting which is used to determine:

- that funding provided by the Department has been spent by the grant recipient in accordance with the Grant Agreement (financial).

For multi-year grant agreements it is normal Departmental practice to acquit funding annually. The purpose of an annual acquittal within multi-year agreements is to assist assessment of whether the grant recipient is on target with their expenditure and performance.

Most funding acquitted in the Department is based on a financial year cycle however, some activity periods in grant agreements are for set periods or for a calendar year cycle. Grant recipients should refer to their Grant Agreement to ascertain their reporting periods.

Types of Financial Reports

Grant recipients must provide financial acquittal reports in the form and at the times set out in E.4 Accounting for the Grant in the Grant Agreement, or otherwise notified in writing.

Client Fees

Client fees, as defined in Chapter 4 of this Programme Manual, are not part of the financial acquittal report. The acquittal report only acquits the grant provided by the Department.

5.3.3 Managing Performance

Flexibility Provisions

The Commonwealth Home Support Programme Grant Agreement requires grant recipients to deliver the service outputs specified in the Agreement.

However, in some cases flexibility is available to accommodate the changing needs of the local community. For example, where a service provider receives a large volume of referrals from My Aged Care for clients requiring social support, but less than the level of referrals expected for personal care, it may need to utilise a small portion of the funding it receives for personal care to deliver social support.

In such cases, within the Community and Home Support Sub-Programme and Care Relationships and Carer Support Sub-Programme:

- Grant recipients must deliver 100 per cent of their agreed outputs; OR
- Grant recipients can deliver no less than 80 per cent of agreed outputs; AND
- Grant recipients may deliver additional needed services within the same Sub-Programme with the remaining 20 per cent, provided they can demonstrate they are delivering value for money.

As outlined in Section 3.4.1 of this Programme Manual, where a client's needs are changing significantly or an additional, new service type is needed, the service provider must refer the client to My Aged Care for review. This helps ensure any new services are recorded on the client record. Following advice by My Aged Care, the grant recipient may then, with the client's permission, use the flexibility provisions to deliver the additional service type to the client.

All outputs must represent value for money. For example:

A grant recipient may be funded on the shared agreement that they will deliver 100 hours of Personal Care (funding provided \$1,000) and 100 hours of Nursing (funding provided \$2,000). Due to changing client needs they need to deliver only 80 hours of Personal Care. As long as

they comply with the 80 per cent rule they may use the funds otherwise provided for Personal Care services to deliver additional Nursing services as long as they can demonstrate they are still delivering value for money.

How will the Department assess whether grant recipients are delivering value for money when they use the flexibility provisions?

Grant recipients must be able to demonstrate that in doing this they have achieved value-for-money. To do this, the Department will consider the indicative unit cost of Personal Care delivered by that provider in that region (i.e. 100 hours for \$1,000 is \$10 per hour) and of Nursing (100 hours for \$2,000 is \$20 per hour). The grant recipient has \$200 available to spend or use on Nursing, equating to an extra 10 hours to meet the additional need or demand for this service. Therefore, provided that the grant recipient delivers 80 hours of Personal Care and 110 hours of Nursing, value-for-money has been achieved.

It is important that grant recipients indicate their capacity to provide these additional services on My Aged Care to ensure they can receive referrals for clients. Grant recipients must also ensure they meet the requirements of that service type as described in Chapter 2 of this Programme Manual including any staff qualification requirements.

Where grant recipients wish to use greater than 20 per cent flexibility they must seek the Department's prior approval. It may be necessary to vary the Grant Agreement.

This flexibility provision is designed to enable the service provider meet the short-term changes in the needs of clients and is not intended to change the funding arrangements in the longer term.

The Commonwealth Home Support Programme Sub-Programmes and service types are outlined in Chapter 2 of this Programme Manual. Funded service types are set out in the service provider's Grant Agreement.

Where service providers have special conditions identified in their Grant Agreement, service providers are required to deliver the services as stipulated in the special conditions prior to applying the flexibility provision outlined above. Special conditions take precedence over the flexibility provisions.

Performance Management – Working Together to Enhance Performance

The Department acknowledges that changes in the service delivery environment can impact on grant recipient performance. DSS is committed to working with our grant recipients to rectify any performance issues. Any changes to grant recipients' obligations will be mutually agreed and in line with the Grant Agreement.

5.3.4 Activity Reporting

Commonwealth Home Support Programme grant recipients must provide activity and performance data in line with their Grant Agreement details. As part of a new way of working, the Department has implemented improved programme performance reporting processes in new grant agreements.

The DSS Data Exchange is a new approach to programme reporting that has been designed to reduce red tape for organisations by streamlining the data ask and providing simple and easy ways to submit data.

Data requirements are divided into two parts: a small set of priority requirements that all service providers must report, and a voluntary extended data set that providers can choose to share with the Department in return for relevant and meaningful reports, known as the partnership approach. This will help build the evidence base regarding the effectiveness of DSS programmes and service delivery approaches. Participation in the partnership approach is entirely voluntary and there will be no negative consequences if a grant recipient chooses not to provide this extended data set.

There are a number of options available for grant recipients to report through the *DSS Data Exchange*. If organisations do not currently use a client management system the *DSS Data Exchange* has a web-based portal (<https://www.dss.gov.au/grants/programme-reporting/dss-data-exchange-web-based-portal>) that they can access as free client management system to support service delivery. If however, grant recipients already have their own client management system then they can choose to submit data to DSS through a system-to-system transfer or bulk upload.

The DSS Data Exchange Technical Specifications (<https://www.dss.gov.au/grants/programme-reporting/the-dss-data-exchange-technical-specifications>) are available on the DSS grants website to support organisations that may want to use system-to-system transfers or bulk uploads. The Technical Specifications outline the initial coding changes required to meet the Department's data formats.

Additionally, there is a range of other training and support material on the Department of Social Services (www.dss.gov.au) website to help organisations using the *DSS Data Exchange*. The DSS Data Exchange Protocols (<https://www.dss.gov.au/grants/programme-reporting/dss-data-exchange-web-based-portal/the-dss-data-exchange-protocols>) have been designed as a practical support manual to guide managers and frontline staff. A set of task cards are also available as well as video training modules that provide a visual demonstration of the web-based portal.

Dedicated DSS Data Exchange Helpdesks are available if organisations have general questions about this aspect of the new way of reporting or require specialist technical support.

Organisations can email dssdataexchange.helpdesk@dss.gov.au for general *DSS Data Exchange* enquiries or phone 1800 020 283.

For specialist technical support please email Dataexchange.developersupport@dss.gov.au

Grant Administration

Refer to Appendix E of this Programme Manual for Grant Agreement Manager contact details.

5.3.5 Aged Care Workforce Census

If a grant recipient receives an aged care workforce census form sent by, or on behalf of, the Department the grant recipient must complete the form and return it to the Department, or another address as directed, by the date specified in the form.

If a grant recipient for a community aged care service was not responsible for the operations of a service during all or some of a period covered by an aged care workforce census, the grant recipient is taken to have complied with this requirement in relation to the service and the census.

If a grant recipient's funding is less than \$35,000 per annum and it receives an aged care workforce census form, the form is to be completed and returned on a voluntary basis and is not a mandatory condition of funding.

5.4 IT and System Requirements

As noted in the Commonwealth Home Support Programme Guidelines, grant recipients must have systems in place to allow them to meet their service delivery, data collection and reporting obligations outlined in their Grant Agreement.

5.4.1 System Requirements

My Aged Care

Commonwealth Home Support Programme service providers will need a computer with an internet connection and a standard internet browser that supports AUSkey, such as Internet Explorer, Safari or Firefox.

As of April 2015, AUSkey is no longer compatible with Google Chrome. To use AUSkey providers will need to use an alternative browser that is compatible.

To use AUSkey to log in to the provider portal, the computer will need certain software installed. If providers and their staff do not have administration rights to the computer, they will need to consult their organisation's IT support area to ensure the appropriate software is installed.

Further information is available at www.dss.gov.au/MyAgedCare

The My Aged Care provider portal is available at www.dss.gov.au/MyAgedCare and will be the key tool for service providers to interact with My Aged Care.

It will be used to:

- Manage information about the services delivered by service providers
- Accept and reject referrals for service(s) issued by the My Aged Care contact centre or assessors
- Reject referrals and indicate that service providers can place the client on a centrally hosted, but individually managed, waitlist
- Update client records with information about services being delivered
- Request a review of the client's needs and services
- Produce reports
- Action system generated tasks and notifications.

Commonwealth Home Support Programme Activity and Performance Reporting

Commonwealth Home Support Programme providers will need internet access and a suitable internet browser to meet their activity and performance reporting requirements.

5.5 Government Responsibilities

5.5.1 Planning Framework

The Commonwealth Home Support Programme planning framework will be based on Aged Care Planning Regions and take into account existing services available in a given region, projected growth in the target population and other factors influencing service delivery supply and demand.

Planning processes for the Commonwealth Home Support Programme will also consider parallel planning cycles and processes in other related sectors, including aged care more broadly and the disability care sector.

This will ensure that the needs of various clients are considered and the funding is allocated so that growth in home support services complement and enhance services already being delivered.

5.5.2 Government Reporting

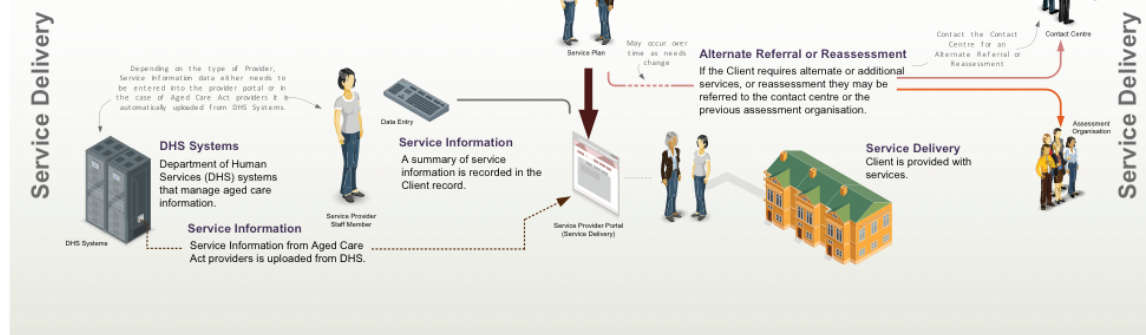
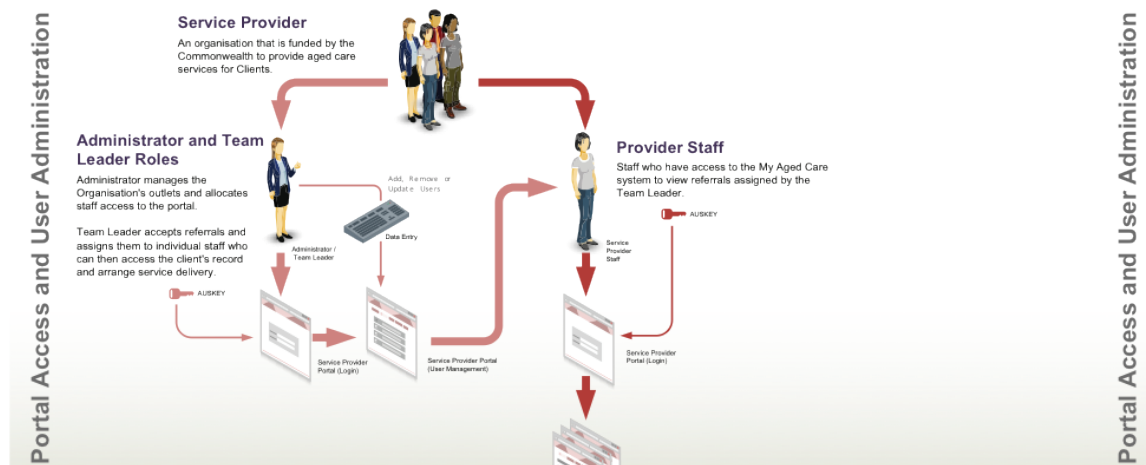
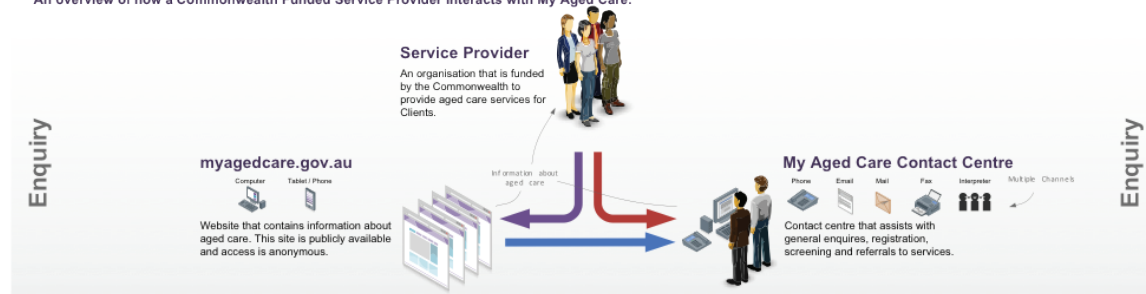
As with all Government funding programme arrangements, the Australian Government has a responsibility to report on the planning, implementation and evaluation of the Commonwealth Home Support Programme.

Commonwealth Home Support Programme grant recipients are required to submit specific reports. The information provided through these is utilised by the Australian Government to report on the continued development, implementation and on-going evaluation of the Programme.

APPENDIX A - Grant Recipient Interactions with My Aged Care

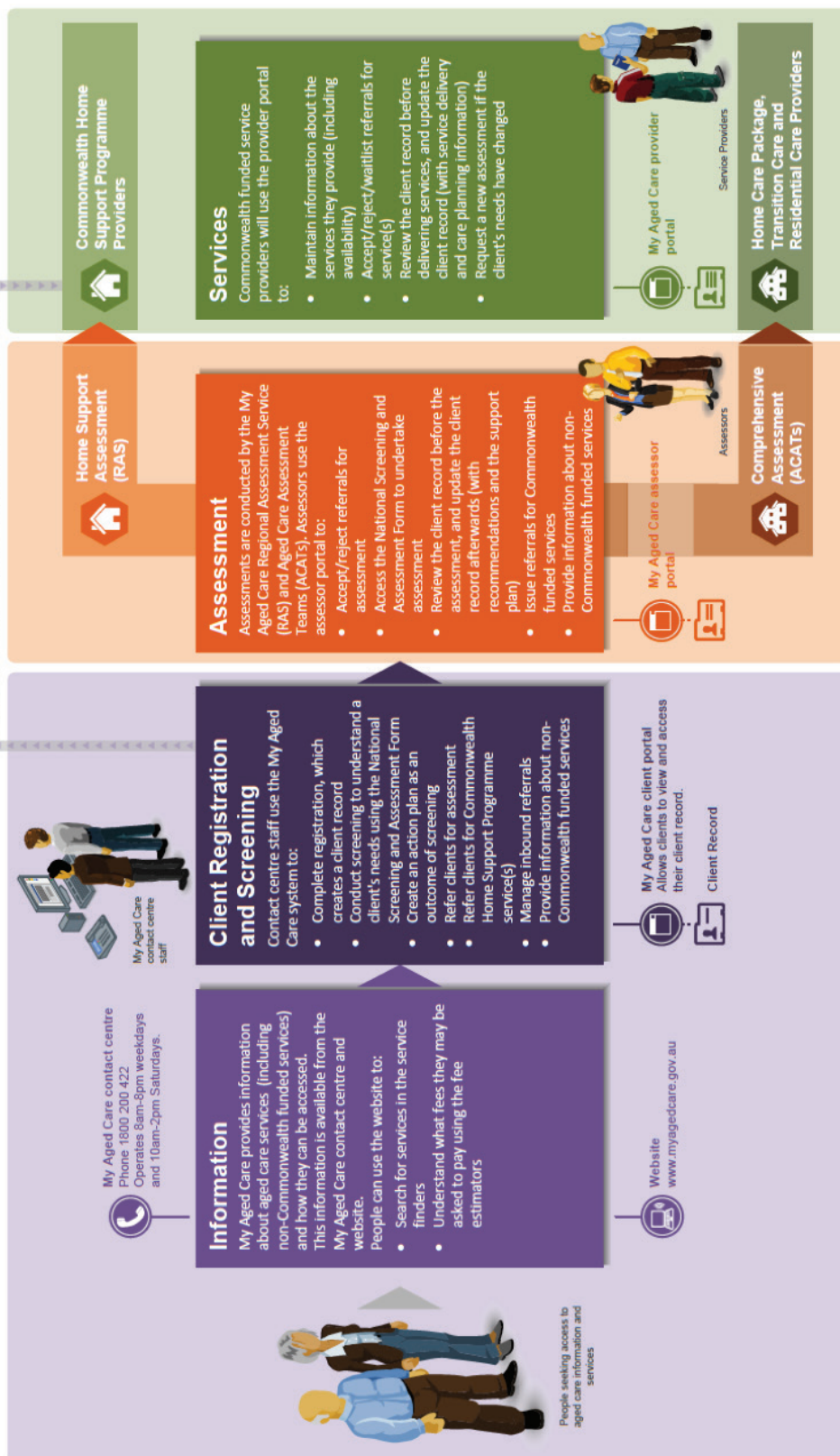
My Aged Care Commonwealth Funded Service Provider Interactions

An overview of how a Commonwealth Funded Service Provider interacts with My Aged Care.



APPENDIX B – Client Interactions with My Aged Care

My Aged Care Client Pathways



APPENDIX C – Useful Resources

Publications

Productivity Commission inquiry – Caring for Older Australians
<http://www.pc.gov.au/projects/inquiry/aged-care/report>

Websites

Australian Taxation Office
<https://www.ato.gov.au/>

Australian Privacy Principles
<http://www.oaic.gov.au/privacy/privacy-act/australian-privacy-principles>

Commonwealth Department of Social Services
<http://www.dss.gov.au>

Dementia Services and Support
<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/older-people-their-families-and-carers/dementia/australian-government-programmes-to-support-people-with-dementia-their-families-and-carers>

Dementia Behaviour Management Advisory Services
<http://dbmas.org.au/>

Dementia Care Essentials

Dementia Training Study Centres
www.dtsc.org.au

Western Australia/ South Australia
<http://dementia.acswa.org.au/>

New South Wales/ACT
<http://www.dementiacentre.com.au/education/dce>

Victoria
<https://vic.fightdementia.org.au/vic/education-and-consulting/for-health-professionals/accredited-programs>

Northern Territory
http://www.hstac.com.au/new/index.php?option=com_content&view=article&id=1305:dementia-care-essentials-training-alzheimer-s-australia&catid=8&Itemid=118

Tasmania
www.tastafe.tas.edu.au

Queensland
Alzheimer's Australia Helpline and Counselling Services
<https://fightdementia.org.au/>

Resources relating to quality

Home Care Standards

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/home-care-standards-and-quality-reporting-documentation>

Resources relating to My Aged Care

My Aged Care

<http://www.MyAgedCare.gov.au>

My Aged Care is made up of the My Aged Care contact centre (1800 200 422) and website. Together they can provide consumers with information on aged care, whether for the client, their family or carer.

The My Aged Care contact centre can be phoned on 1800 200 422 between 8.00am and 8.00pm on weekdays and between 10.00am and 2.00pm on Saturdays. The My Aged Care contact centre is closed on Sundays and national public holidays.

My Aged Care provider portal

<http://www.myagedcare.gov.au/updating-service-provider-details>

The My Aged Care provider portal will be the key tool for managing referrals and updating client information.

Further information to support the use of the provider portal (including fact sheets, videos, FAQs) is available on the Department of Social Services (www.dss.gov.au/MyAgedCare) website.

The My Aged Care service provider and assessor helpline is available on [1800 836 799](tel:1800836799) to assist providers with technical support.

Resources relating to support for people with disability

Guide Dogs Australia

<http://www.guidedogsaustralia.com/>

National Disability Services

<http://www.nds.org.au/>

Optometry Australia

<http://www.optometry.org.au/your-eyes/your-eye-health/vision-and-ageing>

Perkins Scout

<http://www.perkinselearning.org/scout/tips-working-seniors-vision-loss>

Royal Society for the Blind

<http://www.rsb.org.au/site/DefaultSite/filesystem/documents/Allied%20Health%20Resources/2%29%20Enhancement%20and%20Substitution.pdf>

Vision Australia

www.visionaustralia.org

APPENDIX D – Policies and Guidelines

Aged Care Planning Regions

<http://webarchive.nla.gov.au/gov/20060827215006/http://health.gov.au/internet/wcms/Publishing.nsf/Content/ageing-acar2004-Regions-australia.htm>

Aged Care Complaints Scheme

<http://agedcarecomplaints.govspace.gov.au/about-us/about-the-scheme>

APS Code of Conduct

<http://www.apsc.gov.au/aps-employment-policy-and-advice/aps-values-and-code-of-conduct/code-of-conduct>

Australian Government's 'National Ageing and Aged Care Strategy for People from Culturally and Linguistically Diverse Backgrounds

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/older-people-their-families-and-carers/people-from-diverse-backgrounds/national-ageing-and-aged-care-strategy-for-people-from-culturally-and-linguistically-diverse-cald-backgrounds>

Carer Recognition Act 2010

www.comlaw.gov.au/Details/C2010A00123

Charter of Care Recipients' Rights and Responsibilities for Home Care

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/for-providers/guidance-for-providers/charter-of-care-recipients-rights-and-responsibilities-residential-care-home-care>

CrimTrac

www.crimtrac.gov.au/links/index.html

DSS Data Exchange Protocols

<https://www.dss.gov.au/grants/programme-reporting/dss-data-exchange-web-based-portal/the-dss-data-exchange-protocols>

Home Care Standards Guide

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/home-care-standards-and-quality-reporting-documentation>

National Lesbian, Gay, Bisexual, Transgender and Intersex Ageing and Aged Care Strategy

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/older-people-their-families-and-carers/people-from-diverse-backgrounds/national-lesbian-gay-bisexual-transgender-and-intersex-lgbti-ageing-and-aged-care-strategy>

My Aged Care Concept of Operations

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/aged-care-reform/my-aged-care/my-aged-care-concept-of-operations>

My Aged Care Guidance of Providers

www.dss.gov.au/MyAgedCare

My Aged Care Provider Portal User Guide

www.dss.gov.au/MyAgedCare

On the record – Guidelines for the prevention of discrimination in employment on the basis of criminal record

http://www.humanrights.gov.au/human_rights/criminalrecord/on_the_record/index.html

APPENDIX E – Contacts

Queensland

Aged Care Assistant State Manager
Queensland State Office, Department of Social Services
Switchboard: 07 3037 4770

South Australia

Aged Care Director
South Australian State Office, Department of Social Services
Switchboard: 08 8318 2155
Email: sa_hacc@dss.gov.au

Tasmania

Aged Care Assistant State Manager
Tasmanian State Office, Department of Social Services
Switchboard: (03) 6221 1432

New South Wales/ACT

Section Manager, Aged Care Programmes
NSW/ACT State Office, Department of Social Services
Switchboard: (02) 9282 0520
Email: NSWACT.HACC@dss.gov.au

Northern Territory

Aged Care Assistant State Manager
Northern Territory State Office, Department of Social Services
Switchboard: (08) 8919 3497

Victoria

Victorian State Office, Department of Social Services
Switchboard: 1800 002 612

Please note: Service providers funded under the Victorian HACC Program that have questions regarding their HACC funding or Service Agreement, should contact their Victorian Department of Health and Human Services Program and Service Advisor.

Western Australia

Aged Care Assistant State Manager
Western Australia State Office, Department of Social Services

APPENDIX F – Commonwealth Home Support Programme - Police Certificate Guidelines - July 2015

1 Introduction

The DSS Comprehensive Grant Agreement sets out the conditions under which grant recipients are funded by the Commonwealth Government for activities under the Commonwealth Home Support Programme.

The Police Certificate Guidelines form part of the Commonwealth Home Support Programme Manual. The Guidelines have been developed to assist grant recipients with the management of police check requirements under the Commonwealth Home Support Programme.

Police checks are intended to complement robust recruitment practices and are part of a grant recipient's responsibility to ensure all staff, volunteers and executive decision makers are suitable to provide services to clients of the Commonwealth Home Support Programme.

2 Your Obligations

Grant recipients must ensure that all staff, volunteers and executive decision makers working in Commonwealth Home Support Programme services are suitable for the roles they are performing. They must undertake thorough background checks to select staff in accordance with the requirements under the DSS Comprehensive Grant Agreement and the Home Care Standards (the Standards).

As part of this, grant recipients must ensure national criminal history record checks, not more than three years old, are held by:

- staff who are reasonably likely to interact with clients
- volunteers who have unsupervised interaction with clients
- executive decision makers.

Grant recipients must ensure they have policies and procedures in place to assess police certificates. A grant recipient's decision to employ or retain the services of a person with any relevant recorded convictions will need to be rigorous, defensible and transparent. For information about assessing police certificates for staff, volunteers and executive decision makers see: 5 Assessing a Police Certificate in these Guidelines.

3 Police Certificates

3.1 Police Certificates and Police Checks

A police certificate is a report of a person's criminal history; a police check is the process of checking a person's criminal history. The two terms are often used interchangeably in aged care.

3.2 Police Certificate Requirements

A police certificate that satisfies requirements under the DSS Comprehensive Grant Agreement and Commonwealth Home Support Programme Manual is a nation-wide assessment of a person's criminal history (also called a "National Criminal History

Record Check” or a “National Police Certificate”) prepared by the Australian Federal Police, a state or territory police service, or a CrimTrac accredited agency.

For more information about assessing police certificates, including the different types, please see: 5 Assessing a Police Certificate.

3.3 CrimTrac Certificates

Police certificates or reports prepared by CrimTrac accredited agencies are considered by the Department as being prepared on behalf of the police services and therefore meet the Department’s requirements. More information about CrimTrac is available at: Crimtrac (www.crimtrac.gov.au/).

3.4 Statutory Declarations

Statutory declarations are generally only required in addition to police checks in two instances:

- for essential new staff, volunteers and executive decision makers who have applied for, but not yet received, a police certificate
- for any staff, volunteers or executive decision makers who have been a citizen or permanent resident of a country other than Australia after the age of 16.

In these two instances, a staff member, volunteer or executive decision maker can sign a statutory declaration stating either that they have never, in Australia or another country, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence. Note that a person is entitled to sign a statutory declaration stating that they have not been convicted of an offence if they have been convicted of an offence but the conviction is a ‘spent’ conviction (see 5.8 Spent convictions).

Statutory declarations relating to police certificate requirements must be made on the form prescribed under the Commonwealth Statutory Declarations Act 1959 (the Declarations Act). Anyone who makes a false statement in a statutory declaration is guilty of an offence under the Declarations Act.

A statutory declaration template is provided at Appendix 3b of these Police Certificate Guidelines. More information about statutory declarations is available at: Statutory Declarations (www.ag.gov.au/statdec).

4 Staff, Volunteers and Executive Decision Makers

4.1 Staff, Volunteers and Executive Decision Makers

Police certificates, not more than three years old, must be held by:

- staff who are reasonably likely to interact with clients
- volunteers who have unsupervised interaction with clients
- executive decision makers.

4.2 Definition of a Staff Member

A staff member is defined, for the purposes of the Guidelines, as a person who:

- has turned 16 years of age
- is employed, hired, retained or contracted by the grant recipient (whether directly or through an employment or recruitment agency) to provide care or other services under the control of the grant recipient
- interacts, or is reasonably likely to interact, with clients.

Examples of individuals who are staff members include:

- employees and subcontractors of the grant recipient who provide services to clients (this includes all staff employed, hired, retained or contracted to provide services under the control of the grant recipient whether in a community setting or in the client's own home)
- employees and subcontractors who contact the client by phone.

4.3 Definition of Non-staff Members

Individuals who are not considered to be staff members, for the purposes of the Guidelines, include:

- employees who, for example, prepare the payroll, but do not interact with clients
- independent contractors.

Generally, an independent contractor is a person:

- who is paid for results achieved
- provides all or most of the necessary materials and equipment to complete the work
- is free to delegate work to others
- has freedom in the way that they work
- does not provide services exclusively to the grant recipient
- is free to accept or refuse work
- is in a position to make a profit or loss.

For the purposes of these Guidelines, a subcontractor who has an ongoing contractual relationship with the grant recipient is not taken to be an independent contractor but is regarded as a staff member. A person who is contracted to perform a specific task on an ad hoc basis may fall within the definition of an independent contractor.

Having an Australian Business Number does not automatically make a person an independent contractor.

4.4 Definition of a Volunteer

A volunteer is defined, for the purposes of these Guidelines, as a person who:

- is not a staff member
- offers his or her services to the grant recipient

- provides care or other services on the invitation of the grant recipient and not solely on the express or implied invitation of a client
- has, or is reasonably likely to have, unsupervised interaction with clients.
- A student undertaking a clinical placement in the community who is over 18 years and has, or is reasonably likely to have, unsupervised interaction with clients would be a volunteer.
- Examples of persons who are not volunteers under this definition include:
 - persons volunteering who are under the age of 16 (except where they are a full-time student, then under the age of 18)
 - persons who are expressly or impliedly invited into the client's home by a client (for example, family and friends of the client)
 - persons who only have supervised interaction with clients.

4.5 Definition of Unsupervised Interaction

Unsupervised interaction is defined as interaction with a client where a volunteer is unaccompanied by another volunteer or staff member.

In regard to volunteers, if volunteers are visiting a client in pairs it is not a requirement for either of those volunteers to have a police certificate.

4.6 Definition of an Executive Decision Maker

An executive decision maker is:

- a member of the group of persons who is responsible for the executive decisions of the entity at that time
- any other person who has responsibility for (or significant influence over) planning, directing or controlling the activities of the entity at that time
- any person who is responsible for the day-to-day operations of the service, whether or not the person is employed by the entity.
- In determining who are executive decision makers, grant recipients need to consider the functional role individuals perform rather than their job title.

4.7 New Staff

While grant recipients must aim to ensure all new staff members, volunteers and executive decision makers have obtained a police certificate before they start work, there are exceptional circumstances where new staff, volunteers and executive decision makers can commence work prior to receipt of a police certificate.

A person can start work prior to obtaining a police certificate if:

- the care or other service to be provided by the person is essential
- an application for a police certificate has been made before the date on which the person first becomes a staff member or volunteer
- until the police certificate is obtained, the person will be subject to appropriate supervision during periods when the person interacts with clients

- the person makes a statutory declaration stating either that they have never, in Australia or another country, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence.

In such cases, the grant recipient must have policies and procedures in place to demonstrate:

- that an application for a police certificate has been made
- the care and other service to be provided is essential
- the way in which the person would be appropriately accompanied
- how a person will be appropriately accompanied in a range of working conditions, e.g. during holiday periods when staff numbers may be limited.

4.8 Staff, Volunteers and Executive Decision Makers who have Resided Overseas

Staff members, volunteers and executive decision makers who have been citizens or permanent residents of a country other than Australia since turning 16 years of age must make a statutory declaration before starting work with any Commonwealth Home Support Programme grant recipient, stating either that they have never, in a country other than Australia, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence.

This statutory declaration is in addition to a current national police certificate, as this reports only those convictions recorded in Australian jurisdictions.

5 Assessing a Police Certificate

5.1 Police Certificate Format

Police certificates may have different formats, including printed certificates or electronic reports.

Every police certificate or report must record:

- the person's full name and date of birth
- the date of issue
- a reference number or similar.

A grant recipient must be satisfied that a certificate is genuine and has been prepared by a police service or a CrimTrac accredited agency. An original police certificate or a certified copy must be provided rather than an uncertified photocopy.

It is up to the grant recipient to be satisfied that a certificate meets the requirements, and enables them to assess a person's criminal history. Any police certificate decision must be documented by the grant recipient. For more information on record keeping, and the sighting and storing of police certificates, see: 6 Police Check Administration.

5.2 Purpose of a Police Certificate

A police certificate that best satisfies requirements under the Commonwealth Home Support Programme police check regime is one obtained for the purposes of aged care. However, a national criminal history record check undertaken for another purpose

will generally also satisfy the requirements. It is best practice to specify the purpose of the police check to the police service or CrimTrac agency issuing the certificate.

In place of a national criminal history record check, grant recipients may accept staff members and volunteers who hold a card issued by a state or territory authority following a vetting process that enables the card holder to work with vulnerable people. Executive decision makers are required to have a national criminal history record check see: 5.5 Assessing information obtained from a police certificate for executive decision makers.

5.3 Police Certificate Disclosure

A police certificate discloses whether a person:

- has been convicted of an offence
- has been charged with and found guilty of an offence but discharged without conviction
- is the subject of any criminal charge still pending before a Court.

The information on the certificate is drawn from all Australian jurisdictions and is subject to relevant state and territory spent conviction schemes. For more information about spent convictions, see: 5.8 Spent convictions.

5.4 Assessing Information Obtained from a Police Certificate for Staff and Volunteers

Commonwealth Home Support Programme grant recipients may use discretion when assessing a person's criminal history to determine whether recorded offences are relevant to the job. The principle that grant recipients must apply is to determine the risk of harm to clients.

Grant recipients must ensure they have policies and procedures in place to assess police certificates. A grant recipient's decision to employ or retain the services of a person with any relevant recorded convictions will need to be rigorous, defensible and transparent.

For more information see: 5.7 Refusing or terminating employment on the basis of a criminal record.

A Risk Assessment Approach

The following considerations are intended as a guide to assist grant recipients to assess a person's police certificate for their suitability to be either a staff member or volunteer for a Commonwealth Home Support Programme grant recipient:

- **Access:** the degree of access to clients, their belongings, and their personal information. Considerations include whether the individual will work alone or as part of a team, the level and quality of direct supervision, the location of the work, i.e. community or home based settings
- **Relevance:** the type of conviction and sentence imposed for the offence in relation to the duties a person is, or may be undertaking. A grant recipient must only have regard to any criminal record information indicating that the person is unable to perform the inherent requirements of the particular job
- **Proportionality:** whether excluding a person from employment is proportional to the type of conviction
- **Timing:** when the conviction occurred

- Age: the ages of the person and of any victim at the time the person committed the offence. The grant recipient may place less weight on offences committed when the person is younger, and particularly under the age of 18 years. The grant recipient may place more weight on offences involving vulnerable persons
- Decriminalised offence: whether or not the conduct that constituted the offence or to which the charge relates has been decriminalized since the person committed the offence
- Employment history: whether an individual has been employed since the conviction and the outcome of referee checks with any such employers
- Individual's information: the findings of any assessment reports following attendance at treatment or intervention programs, or other references; and the individual's attitude to the offending behaviour
- Pattern: whether the conviction represents an isolated incident or a pattern of criminality
- Likelihood: the probability of an incident occurring if the person continues with, or is employed for, particular duties
- Consequences: the impact of a prospective incident if the person continues, or commences, particular duties
- Treatment strategies: procedures that will assist in reducing the likelihood of an incident occurring including, for example, modification of duties.

5.5 Assessing Information Obtained from a Police Certificate for Executive Decision Makers

Commonwealth Home Support Programme grant recipients may use limited discretion when assessing a person's criminal history to determine whether any recorded offences are relevant to performing the functions and duties of an executive decision maker.

A Commonwealth Home Support Programme grant recipient must not allow a person whose police certificate records a precluding offence to perform the functions and duties of an executive decision maker.

The offences that preclude a person under the Commonwealth Home Support Programme police check regime from performing the functions and duties of an executive decision maker are:

- a conviction for murder or sexual assault
- a conviction and sentence to imprisonment for any other form of assault
- a conviction for an indictable offence within the past 10 years.

Whether or not an offence is an indictable offence will depend on legislation within the jurisdiction. Grant recipients might need to seek legal advice if there is any doubt. If a conviction for what would otherwise be a precluding offence is considered 'spent' under the law of the relevant jurisdiction (see: 5.8 Spent convictions), the conviction does not preclude the person from performing the functions and duties of an executive decision maker.

While a grant recipient may not use discretion to allow a person whose police certificate records a conviction for a precluding offence to perform the functions and duties of an executive decision maker, grant recipients may use discretion in determining whether any other recorded convictions are relevant to performing those functions and duties. The risk assessment approach set out in 5.4 may be used as a guide to assist grant recipients to assess the relevance of any non-

precluding offences to performing the functions and duties of an executive decision maker.

A grant recipient's decision to allow a person with any recorded convictions to perform the functions and duties of an executive decision maker must be rigorous, defensible and transparent. The overriding principle that grant recipients must bear in mind is to minimise the risk of harm to clients.

5.6 Committing an Offence During the Three Year Police Certificate Expiry Period

Grant recipients must take reasonable measures to require each of their staff members, volunteers and executive decision makers to notify them if they are convicted of an offence in the three year period between obtaining and renewing their police check. If an executive decision maker has been convicted of a precluding offence they must not be allowed to continue as an executive decision maker.

5.7 Refusing or Terminating Employment on the Basis of a Criminal Record

If a grant recipient refuses or terminates employment on the basis of a person's conviction for an offence, the conviction must be considered relevant to the inherent requirements of the position. If in any doubt, grant recipients must seek legal advice regarding the refusal or termination of a person's employment on the basis of their criminal record.

Under the *Fair Work Act 2009* there are provisions relating to unfair dismissal and unlawful termination by employers. More information about the *Fair Work Act 2009* is available at: Fair Work Commission (www.fwa.gov.au/). In addition, under the *Human Rights and Equal Opportunity Act 1986*, the Australian Human Rights Commission has the power to inquire into discrimination in employment on the ground of criminal record.

If a person feels they have been discriminated against based on their criminal record in an employment decision of a grant recipient, they may make a complaint to the Australian Human Rights Commission. Further information on discrimination on the basis of criminal record is available at: Australian Human Rights Commission (www.humanrights.gov.au/).

5.8 Spent Convictions

Convictions that are considered 'spent' under state, territory and Commonwealth legislation will not be disclosed on a police certificate unless the purpose for the application (for example, working with children) is exempt from the relevant spent conviction scheme. If a conviction has been 'spent' the person is not required to disclose the conviction. The aim of the scheme is to prevent discrimination on the basis of old minor convictions, once a waiting period (usually 10 years) has passed and provided the individual has not re-offended during this period.

Spent conviction legislation varies from jurisdiction to jurisdiction. In some circumstances or jurisdictions certain offences cannot be spent.

Further Information on spent convictions can be found at: Spent Conviction Scheme (www.afp.gov.au/what-we-do/police-checks/spent-convictions-scheme.aspx).

6 Police Check Administration

6.1 Record Keeping Responsibilities

Grant recipients must keep records that can demonstrate that:

- there is a police certificate, which is not more than three years old, for each staff member, volunteer and executive decision maker
- an application has been made for a police certificate where a new staff member, volunteer or executive decision maker does not have a police certificate
- a statutory declaration has been provided by any staff member, volunteer or executive decision maker who has not yet obtained a police certificate or was a citizen or permanent resident of a country other than Australia.

How a grant recipient demonstrates their compliance with record keeping requirements is a decision for their organisation to make based on their circumstances.

6.2 Sighting and Storing Police Certificates

The collection, use, storage and disclosure of personal information about staff members and volunteers must be in accordance with the *Privacy Act 1988* (Commonwealth). State and territory privacy laws can also impact on the handling of personal information such as a police certificate. Further information about privacy is available at: Office of the Australian Information Commissioner (www.privacy.gov.au/).

When individuals undertake to obtain their own police certificate, or employment agencies hold police certificates, grant recipients must sight an original or a certified copy of the police certificate and the information and reference number must be recorded on file.

If it is impossible to assess a person's police certificate for any reason, the individual may be required to obtain a new police certificate in order for the grant recipient to meet their responsibilities under the Commonwealth Home Support Programme police check regime.

6.3 Cost of Police Certificates

Grant recipients have a responsibility to ensure all staff members, volunteers and executive decision makers undergo police checks. However, the payment of the cost of obtaining a police certificate is a matter for negotiation between the grant recipient and the individual.

Individuals may be able to claim the cost of the police certificate as a work-related expense for tax purposes. Further advice on this issue is available from the Australian Taxation Office through their website at: Australian Taxation Office (www.ato.gov.au/).

Volunteers may be eligible to obtain a police certificate at a reduced cost whether the certificate is requested by an individual or by a grant recipient on behalf of a volunteer. This must be confirmed with the agency issuing the police certificate.

6.4 Obtaining Certificates on Behalf of Staff, Volunteers or Executive Decision Makers

A person may provide a police certificate to the grant recipient or give consent for the grant recipient to obtain a police certificate on their behalf.

Grant recipients can obtain consent forms from the relevant police services or a CrimTrac accredited agency. In some jurisdictions, parental consent may be required to request a police certificate for an individual under the age of 18 years.

6.5 Police Certificate Expiry

Police certificates for all staff, volunteers and executive decision makers must remain current and need to be renewed every three years before they expire. If a police certificate expires while a staff member is on leave, the new certificate must be obtained before the staff member can resume working at the service. Grant recipients must note that the application or renewal process can take longer than eight weeks.

6.6 Documenting Decisions

Any decision taken by a grant recipient must be documented in a way that can demonstrate to an auditor the date the decision was made, the reasons for the decision, and the people involved in the decision, i.e. the grant recipient, the individual, a legal representative, board members etc.

6.7 Monitoring Compliance with Police Check Requirements

Grant recipients must have policies and procedures in place to demonstrate suitable management and monitoring of the police certificate requirements for all staff members, volunteers and executive decision makers. This includes, for example:

- three-year police check renewal procedures
- appropriate storage, security and access requirements for information recorded on a police certificate
- evidence of a grant recipient's decisions in respect of all individuals, or where staff are contracted through another agency, evidence of contractual arrangements with the agency that demonstrates the police certificate requirements.

For more information see: 6.1 Record keeping responsibilities.

Attachment 3a – Police Service Contact Details

Australian Federal Police (for ACT)	<p>Phone: (02) 6202 3333</p> <p>National Police Checks www.afp.gov.au/what-we-do/police-checks/national-police-checks.aspx)</p>
New South Wales Police Service	<p>Phone: (02) 8835 7888</p> <p>NSW Police Force www.police.nsw.gov.au/about_us/structure/specialist_operations/forensic_services/</p>
Victoria Police	<p>Phone: 1300 881 596</p> <p>www.police.vic.gov.au/content.asp?Document_ID=274)</p>
Queensland Police Service	<p>Phone: (07) 3364 6705</p> <p>Queensland Police www.police.qld.gov.au/corporatedocs/purchase/Police-Certificate-(Australia-Wide-Criminal-History).htm)</p>
Western Australia Police Service	<p>Phone: (08) 9268 7645</p> <p>Western Australia Police www.police.wa.gov.au/ABOUTUS/</p>
South Australia Police	<p>Phone: (08) 8204 2455</p> <p>South Australia Police www.police.sa.gov.au/services-and-events/apply-for-a-police-record-check)</p>
Tasmania Police	<p>Phone (03) 6230 2928</p> <p>http://www.police.tas.gov.au/services-online/police-history-record-checks/)</p>
Northern Territory Police	<p>Phone: 1800 723 368</p> <p>Northern Territory Police www.pfes.nt.gov.au/Police/Publications-and-forms.aspx)</p>

Attachment 3b - Statutory Declaration Template

Commonwealth of Australia
STATUTORY DECLARATION
Statutory Declarations Act 1959

I,¹

1 Insert the name, address and occupation of person making the declaration

make the following declaration under the *Statutory Declarations Act 1959*:

2 Set out matter declared to in numbered paragraphs

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

3 Signature of person making the declaration

3

4 Place

Declared at⁴ on⁵ of⁶

5 Day

6 Month and year

Before me,

7 Signature of person before whom the declaration is made (see over)

7

8 Full name, qualification and address of person before whom the declaration is made (in printed letters)

8

Note 1 A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years — see section 11 of the *Statutory Declarations Act 1959*.

Note 2 Chapter 2 of the *Criminal Code* applies to all offences against the *Statutory Declarations Act 1959* — see section 5A of the *Statutory Declarations Act 1959*.

A statutory declaration under the *Statutory Declarations Act 1959* may be made before–

(1) a person who is currently licensed or registered under a law to practise in one of the following occupations:

Chiropractor	Dentist	Legal practitioner
Medical practitioner	Nurse	Optometrist
Patent attorney	Pharmacist	Physiotherapist
Psychologist	Trade marks attorney	Veterinary surgeon

(2) a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described); or

(3) a person who is in the following list:

Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
Australian Consular Officer or Australian Diplomatic Officer (within the meaning of the *Consular Fees Act 1955*)

Bailiff

Bank officer with 5 or more continuous years of service

Building society officer with 5 or more years of continuous service

Chief executive officer of a Commonwealth court

Clerk of a court

Commissioner for Affidavits

Commissioner for Declarations

Credit union officer with 5 or more years of continuous service

Employee of the Australian Trade Commission who is:

(a) in a country or place outside Australia; and

(b) authorised under paragraph 3 (d) of the *Consular Fees Act 1955*; and

(c) exercising his or her function in that place

Employee of the Commonwealth who is:

(a) in a country or place outside Australia; and

(b) authorised under paragraph 3 (c) of the *Consular Fees Act 1955*; and

(c) exercising his or her function in that place

Fellow of the National Tax Accountants' Association

Finance company officer with 5 or more years of continuous service

Holder of a statutory office not specified in another item in this list

Judge of a court

Justice of the Peace

Magistrate

Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the *Marriage Act 1961*

Master of a court

Member of Chartered Secretaries Australia

Member of Engineers Australia, other than at the grade of student

Member of the Association of Taxation and Management Accountants

Member of the Australasian Institute of Mining and Metallurgy

Member of the Australian Defence Force who is:

(a) an officer; or

(b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with 5 or more years of continuous service; or

(c) a warrant officer within the meaning of that Act

Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants

Member of:

(a) the Parliament of the Commonwealth; or

(b) the Parliament of a State; or

(c) a Territory legislature; or

(d) a local government authority of a State or Territory

Minister of religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*

Notary public

Permanent employee of the Australian Postal Corporation with 5 or more years of continuous service who is employed in an office supplying postal services to the public

Permanent employee of:

(a) the Commonwealth or a Commonwealth authority; or

(b) a State or Territory or a State or Territory authority; or

(c) a local government authority;

with 5 or more years of continuous service who is not specified in another item in this list

Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made

Police officer

Registrar, or Deputy Registrar, of a court

Senior Executive Service employee of:

(a) the Commonwealth or a Commonwealth authority; or

(b) a State or Territory or a State or Territory authority

Sheriff

Sheriff's officer

Teacher employed on a full-time basis at a school or tertiary education institution

Glossary

Term	Definition
Advocacy	The process of speaking out on behalf of an individual or group to protect and promote their rights and interests.
Aged Care Assessment Team (ACAT)	The assessment team that will determine the care needs and eligibility for a Home Care Package or residential care (referred to as Aged Care Assessment Services in Victoria).
Aged Care Funding Instrument (ACFI)	The ACFI is a tool to assess the level of care needed for residents of residential aged care services. The classification primarily determines the level of care funding payable for that resident. This tool consists of questions and collects information about mental and behavioural disorders, medical conditions, and other care needs. The information is used to categorise residents as having nil, low, medium or high needs in each of the three care domains.
Aged Care Complaints Scheme	The Aged Care Complaints Scheme provides a free service for anyone to raise their concerns about the quality of care or services being delivered to people receiving aged care services subsidised by the Australian Government, including residential care, Home Care Packages and Commonwealth Home Support Programme (CHSP) services.
Assistance with Care and Housing for the Aged (ACHA)	The former ACHA Program supported older people who were homeless or at risk of becoming homeless.
Australian Aged Care Quality Agency	The agency to administer the Australian Government's Quality Reporting Programme including conducting quality reviews of home care services from 1 July 2014.

Care Leaver	A person who was in institutional care or other form of out-of-home care, including foster care, as a child or youth (or both) at some time during the 20th century. Care-leavers include Forgotten Australians, former child migrants and people from the Stolen Generation.
Carer	A person such as a family member, friend or neighbour, who provides regular care and assistance to another person without payment for their caring role . The definition of carer excludes formal care services such as care or assistance provided by paid workers or volunteers arranged by formal services.
Charter of Rights and Responsibilities for Home Care (the Charter)	A Charter that specifies the rights and responsibilities of people in receipt of Australian Government funded community aged care services. Commonwealth Home Support Programme grant recipients must comply with the Charter (excluding the rights expressed at 3A).
Client	A person who is receiving care and services under the Commonwealth Home Support Programme funded by the Australian Government.
Client's home	The client's home is considered to be where the older person is currently living. This may be the home of both the older person and their carer, in cases where the client and carer share a residence. See 1.2.13 of this Programme Manual for settings where Commonwealth Home Support Programme services will not be delivered.
Co-habiting Clients	Co-habiting Clients means spouses, children and other dependants who share the housing situation of the Principal Client and whose relationship with the Principal Client requires continuation of co-habitation.

Commonwealth Respite and Carelink Centres (CRCC)	Commonwealth Respite and Carelink Centres provide a link to carer support services and assist carers with options to take a break through short-term and emergency respite, based on assessed need. CRCC services target carers of frail older people, people with dementia and younger people with moderate, severe or profound disabilities who are living at home.
Culturally and Linguistically Diverse (CALD)	<p>Clients may be defined as Culturally and Linguistically Diverse where they have particular cultural or linguistic affiliations due to their:</p> <ul style="list-style-type: none"> • place of birth or ethnic origin • main language other than English spoken at home • proficiency in spoken English.
Day Therapy Centres (DTC) Program	The former DTC Program provided a range of therapies and services including allied health support.
Department, the	The Australian Government Department of Social Services (DSS).
Existing client	Existing clients are considered to be those clients with a current booking for service or currently accessing a service as at 1 July 2015, who accessed services (perhaps intermittently) at least three times over the previous financial year or who received care for a continuous period of six months or more in the previous financial year (i.e. from 1 July 2014-1 July 2015).
Financially or Socially Disadvantaged	Individuals who, for whatever reason, are without on-going financial support as a result of incurred debt, unemployment, age or a disability. These individuals may also be socially vulnerable as a result of perception or inaccessibility, or have a tendency for self-isolation.

Frail	For the purposes of the Commonwealth Home Support Programme, frail refers to older people who have difficulty performing activities of daily living without help due to functional limitations (for example communications, social interaction, mobility or self-care).
Full cost recovery	Where access to a service is at full cost recovery, this means that the Commonwealth Home Support Programme provider would charge the provider the full cost to the service provider of service provision.
Grant Agreement	<p>Grant agreements are performance based, legally enforceable agreements between two or more parties that set out the terms and conditions governing a business relationship.</p> <p>The standard departmental grant agreement includes the Terms and Conditions of aged care funding and the Grant Schedule.</p>
Grant recipient	Grant recipient refers to service providers or organisations funded to provide services under the Commonwealth Home Support Programme.
Home and Community Care Program (HACC)	The Commonwealth HACC Program was consolidated into the Commonwealth Home Support Programme. It provided 19 basic maintenance, support and care services to assist people to remain in the community. The HACC Program continues to operate in Western Australia and Victoria.
Home Care Packages	A Home Care Package is an Australian Government-funded co ordinated package of services tailored to meet the person's specific care needs, with eligibility determined by an Aged Care Assessment Team. There are four levels of packages.
Home Care Standards Guide	A guide that has been developed to assist Grant recipients to prepare and participate in a quality review using the Home Care Standards for ensuring quality in community care.

Homeless	<p>Homeless means people who are:</p> <ul style="list-style-type: none"> • without any acceptable roof over their head e.g. living on the streets, under bridges, in deserted buildings etc. (absolute homelessness or sleeping rough) • moving between various forms of temporary or medium term shelter such as hostels, refuges, boarding houses or friends • constrained to living permanently in single rooms in private boarding houses • housed without conditions of home e.g. security, safety, or adequate standards (includes squatting).
Housing Stress	<p>The Australian Institute of Health and Welfare defines housing stress as households which spend more than 30 per cent of their household income on housing costs. Low-income households in housing stress are of particular concern since the burden of high housing costs reduces their ability to meet their other living expenses.</p>
Lesbian, gay, bisexual, transgender and intersex people (LGBTI)	<p>People who are lesbian, gay, bisexual, transgender and intersex.</p>
Low Income	<p>Low Income is equivalent to:</p> <ul style="list-style-type: none"> • incomes in the bottom two-fifths of the population • the maximum gross income or less necessary to qualify for or retain a Low Income Health Care Card, as issued by Centrelink • whichever amount is greater.
My Aged Care	<p>My Aged Care was introduced on 1 July 2013 and assists older people, their families and carers to access aged care information and services via the My Aged Care website and My Aged Care contact centre (1800 200 422).</p>

National Aged Care Advocacy Program (NACAP)	The National Aged Care Advocacy Programme is funded by the Australian Government and provides individual advocacy support and promotes the rights of people who are seeking or are receiving Australian Government funded residential aged care or Home Care Packages.
National Aged Care Alliance (NACA)	The National Aged Care Alliance (NACA) is a representative body of peak national organisations in aged care, including consumer groups, providers, unions and health professionals, working together to determine a more positive future for aged care in Australia.
National Disability Insurance Scheme (NDIS)	The National Disability Insurance Scheme provides community linking and individualised support for people with permanent and significant disability, their families and carers.
National Respite for Carers Program (NRCP)	The National Respite for Carers Program contributes to the support and maintenance of caring relationships between carers and care recipients by facilitating access to information, respite care and other support appropriate to the carer's individual needs and circumstances, and those of the care recipient.
Not having secure accommodation	Not having secure accommodation refers to accommodation where the person's tenure is precarious or there is a likelihood that they will have to move on because of an escalation in rental cost, exploitation or unsuitability of the accommodation for their needs. This may include boarding and lodging arrangements, public housing and staying with friends or relatives. It may also include accommodation owned by the client from which they are in immediate circumstances of losing ownership and accommodation rights.
National Screening and Assessment Form (NSAF)	To ensure a nationally consistent and holistic screening and assessment process, the NSAF will be used by My Aged Care contact centre staff, the RAS and existing ACATs.

Older people	For the purposes of the Commonwealth Home Support Programme, older people are people aged 65 years and over and Aboriginal and Torres Strait Islander people aged 50 years and over.
Out-of-scope	Services and items that must not be purchased using Commonwealth Home Support Programme funding.
Planning Framework	Approach used to plan for funding and ongoing programme management of aged care service delivery at a regional level. The Commonwealth Home Support Programme uses Aged Care Planning Regions.
Principal Clients	Principal Client means the sole client or the older client in a household.
Quality review	The process of reviewing the quality of services delivered against the Home Care Standards that can include notification; self-assessment; an on-site visit and a quality review report.
Reablement	Like wellness, reablement aims to assist people to maximise their independence and autonomy. However, reablement supports are more targeted towards a person's specific goal or desired outcome to adapt to some functional loss, or regain confidence and capacity to resume activities. Supports could include training in a new skill, modification to a person's home environment or having access to equipment or assistive technology.
Regional Assessment Services (RAS)	The My Aged Care RAS is responsible for assessing the home support needs of older people. The service will provide timely support for locating and accessing suitable services based on the preferences of older people. Assessors will be appropriately skilled, and trained by My Aged Care, to undertake assessments and identify services appropriate to a diverse range of clients.

Residential respite	Residential respite that is delivered under the Aged Care Act 1997 is defined as residential care or flexible care (as the case requires) provided as an alternative care arrangement with the primary purpose of giving a carer or care recipient a short-term break from their usual care arrangement.
Residential day respite	Residential day respite provided under the Commonwealth Home Support Programme is defined as day respite provided in a residential facility – it does not include consecutive days or nights.
Restorative Care	<p>For a smaller sub-set of older people, restorative care may be appropriate, where assessment indicates that the client has potential to make a functional gain.</p> <p>Restorative care involves evidence based interventions that allow a person to make a functional gain or improvement in health after a setback, or in order to avoid a preventable injury. Interventions are provided or are led by allied health workers based on clinical assessment of the individual. These interventions may be one to one or group services that are delivered on a short term basis which are delivered by, or under guidance of an allied health professional.</p>
Review	<p>A review is undertaken by the grant recipient and refers to a check of the effectiveness and on-going appropriateness of the services the client is receiving. A review of a client may take place where:</p> <ul style="list-style-type: none"> • The assessor sets a review date in the support plan for a short term service. • A service provider identifies a change in the client's needs or circumstances that affects the existing support plan. • A client identifies a change in their needs or circumstances, or seeks assistance to access new services or change their service provider.

Reassessment	Reassessment is undertaken by the My Aged Care RAS and focuses on the strengths and needs of the individual client. RAS assessors are appropriately skilled, and trained to undertake assessments (and reassessments) and identify services appropriate for a diverse range of clients.
Sector Support and Development	Activities that support and improve service delivery to clients and build the capacity of grant recipients and the sector.
Serious Incident	<p>Serious incidents are defined as those which may:</p> <ul style="list-style-type: none"> • have an adverse impact on the health, safety or wellbeing of a client • seriously affect public confidence in the Commonwealth Home Support Programme.
Special Needs Groups	<p>Under the Commonwealth Home Support Programme Special Needs groups are:</p> <ul style="list-style-type: none"> • people from Aboriginal and Torres Strait Islander communities • people from culturally and linguistically diverse backgrounds • people who live in rural and remote areas • people who are financially or socially disadvantaged • veterans • people who are homeless, or at risk of becoming homeless • people who are lesbian, gay, bisexual, transgender and intersex • people who are care leavers • parents separated from children by forced adoption or removal.
Veterans' Home Care (VHC)	The Veterans' Home Care program provides low level home care services to eligible veterans and war widows and widowers.

Volunteers	<p>A volunteer is defined, for the purposes of this Programme Manual, as a person who:</p> <ul style="list-style-type: none"> • is not a staff member • offers his or her services to the service provider • provides care or other services on the invitation of the service provider and not solely on the express or implied invitation of a client • has, or is reasonably likely to have, unsupervised interaction with clients.
Wellness	<p>Wellness is a philosophy based on the premise that even with frailty, chronic illness or disability, people generally have the desire and capacity to make gains in their physical, social and emotional wellbeing and to live autonomously and as independently as possible. A wellness approach in aged care services therefore aims to work with individuals and their carers, as they seek to maximise their independence and autonomy.</p>
WH&S	<p>Work Health and Safety.</p>

