

Grampians Region Newsletter

CHSP /HACC PYP*

MAR 2018

SECTOR SUPPORT & DEVELOPMENT TEAM

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As this is my last contribution to the Grampians Newsletter I would like to take this opportunity to thank you for your friendship and support over the past 3 years. I have loved working as the Wellness & Reablement Consultant for the Grampians Region and have enjoyed getting to know all the agencies and you the people working within them. Best wishes as you work with, and support your local communities – I feel confident that Wellness and Reablement will continue to be embedded into your practices and processes. Take care and goodbye. **Wendy Altmann**

Aboriginal Partnership Agreement

Signatories and/or representatives from the services across the region celebrated the signing of the Aboriginal Partnership Agreement between the CHSP and HACC PYP services and the three local Aboriginal Co-operatives, Goolum Goolum, Budja Budja and Ballarat and District Aboriginal Co-operative, in the Grampians Region. (Mary Slater-Diversity Consultant)



Grampians

Congratulations to all:



Central Highlands



Wimmera

Key Messages from State and Commonwealth Departments

CHSP/Home Care Package Interface

Owing to the number of CHSP/Home Care Package interface questions, the department is consolidating responses for RDCs to use. Draft Q & A's are currently being considered. (RS)

DEX Training for CALD, Indigenous and ACH Providers in Victoria

DEX training was recently provided to Indigenous (July 2017), CALD and ACH (February 2018) providers which offered targeted support to each group. RDCs are reminded to direct CALD, Indigenous and ACH providers to the materials provided at the targeted DEX training sessions. (RS)

The DEX 'Handshake Solution

A new data sharing feature, known as the 'handshake solution', is now available. This is a virtual agreement between lead organisations and their delivery partner(s) to allow sharing of data through the standard Data Exchange reports. More information on the Handshake Task Card on the DSS website. (RS)

AUSKey

We have received some feedback from Alliances regarding confusion in some organisations around the AUSKey.

AUSKey is used as the individual authentication tool for assessors and service providers to access the My Aged Care portals. All staff members who need to access the My Aged Care portals need to apply for a separate AUSKey.

There are two types of AUSKeys: Administrator and Standard. Both types have different permissions and can be used to access different participating government online services, in addition to My Aged Care. The AUSKey administrator can assign standard AUSKeys to users.

The Department of Health provides access for one administrator in each aged care organisation. Administrators

need to set up access for additional staff and maintain the correct information for their organisation. Those working for a service provider need to request access to the service provider portal through their organisation's administrator.

Providing AUSKeys to staff will not allow them to access company information from other department's websites. It is recommended that AUSKey Administrators familiarise themselves with AUSKey permissions and administration tools provided by other departments (such as the Australian Taxation Office) to ensure appropriate access to company information via AUSKeys. (Robyn Salt-Regional Development Coordinator)

Progress Report for Sector Support & Development (SSD Activities)

Service providers should now have received a reminder for their performance report for their CHSP SSD activities regarding service delivery for 1 July – 31 December 2017.

GAMs have sent the performance reports individually to providers in Victoria.

The 6-monthly report is due 13 April 2018.

Service providers were reminded to contact their GAM if they have any questions or require further information. (RS)

Review of SSD

Work continues on reviewing the current SSD in Victoria and varying SSD agreements to move direct service delivery to appropriate sub-types.

We also expect there will be a review of SSD positions into the future, which is

anticipated to affect Victorian SSD arrangements after 2020.

No decisions have been made on what positions and how they will be affected. We will keep you informed as more information becomes available. (RS)

CHSP Extension

As announced on 9 May 2017, the Government is extending CHSP funding arrangements for up to two years to 30 June 2020 under the Strengthening Aged Care 2017-18 Budget measure.

As part of this extension, Victorian service providers will have their funding arrangements extended for twelve months from 1 July 2019 to 30 June 2020. Existing CHSP funding arrangements will continue until 30 June 2019.

There are a small number of CHSP agreements in Victoria ending on 30 June 2018. These agreements will be extended under the existing terms and conditions until 30 June 2019. From 1 July 2019, these agreements will transition to the new CHSP grant agreement, which incorporates new funding conditions that provide a greater

focus on pathways to support independence and wellness.

Further information on the new funding conditions will be communicated shortly.

Subsequently, in early 2019, Victorian CHSP service providers will be offered the new CHSP Grant Agreement to deliver CHSP services from 1 July 2019 to 30 June 2020.

Variations to extend existing arrangements for agreements ceasing on 30 June 2018 will be sent to providers from April 2018. (RS)

Unexpended Funds for 2016/17

As advised in our September communique, for last financial year there was in-principle agreement to support requests for CHSP service providers to carry forward any unexpended CHSP funds from 2016/17 into the same 2017/18 activities.

Applicable organisations will have received a Financial Acquittal Outcome Letter identifying the underspend approved to be carried forward to be spent in 2017/18.

Service providers are reminded that additional pro-rata service output is expected to be delivered and included in their performance reports for 2017/18. (RS)

This agreement for rollover of funding is for this year only and generally all unspent funds are expected to be returned to the Commonwealth.

It has also been noted that some CHSP providers are over delivering outputs and are asking if any additional Commonwealth funding is available to compensate for the over delivery.

Please be reminded that there is no scope for additional funding outside a CHSP growth round.

DEX Data Quality Month

The Data Exchange system re-opened on 1 March 2018 and will close on 31 March 2018 for CHSP funded organisations.

This gives organisations the opportunity to correct and ensure the completeness of their data for the 1 July 2017 to 31 December 2017 reporting period.

During this time, organisations should review:

Outputs reported align with the DEX Protocols Appendix B guidance. (RS)

There are minimal 'unidentified clients' recorded.

Data has been reported for relevant outlets.

We have been advised by DSS that in future reporting periods, the Data Exchange will not be re-opened after the close date.

Providers are encouraged to upload data early and frequently to ensure it is complete and accurate before the end of the period.

Financial Acquittals and Outputs

A service provider can acquit funds related to the delivery of services.

This means that they can cover the costs of their staffing and associated costs through the funding provided by CHSP as we understand that they will need to build in overheads into the cost of delivery of CHSP services.

Any unused portion of a grant for each Service Type will need to be returned as clearly services cannot be acquitted against this funding. Providers therefore should not be out of pocket.

New Organisation Data Quality Report

The "Organisation data quality report" is now available to all Data Exchange users.

This report highlights and tracks key data quality issues to help organisations improve and/or maintain the data. The report will show how data quality is changing over time and the variance across outlets.

A webinar on this report was conducted on Thursday 8 March 2018. A recording of the webinar will be available on the Data Exchange website shortly.

To find out more about data quality in the Data Exchange, you can view the fact sheet on the importance of data quality on the DSS website. (RS)

Withdrawals and Novations

There are times when organisations make a decision for one reason or another that they are no longer in a position to provide CHSP services. We call this a withdrawal and the process following, a novation.

A novation/withdrawal from CHSP service delivery does not happen automatically or immediately. The process may take six months or longer, depending on the complexity of the proposed transition.

Messages to the sector must be clear that decisions regarding withdrawals

and novations are pending Commonwealth delegate decision.

It is not advised that service provider negotiations are tabled publicly, which may establish expectations that may not be agreed by the Commonwealth and which may compromise the perception of a thorough probity-based procurement process.

If an organisation in your region is considering a withdrawal, please advise them to contact their GAM as early as possible. (RS)

Recording Outputs in DEX Service Planning

As you are aware, from 1 August 2016 in Victoria funding for assessment, case management and client care coordination was redirected to the My Aged Care RAS who are now responsible for performing these functions.

These types of activities are not separately funded under the CHSP or recorded in DEX.

As service providers are no longer required to complete the intake/assessment process there is no option to select an intake/assessment service type in DEX for the CHSP and would be considered beyond the scope of the service provision.

The above separation of assessment from service provision allows for the application of a nationally consistent and standardised approach to assessment delivery.

However, there are still a small number of service level assessment functions that are required to be undertaken as an integral part of service delivery.

These service level assessment functions are summarised in Section 3.4.3 of the CHSP Manual.

Where functions involve direct client interactions, the amount of assistance provided can be recorded in the Data Exchange as a session of that sub-service type i.e. nursing, occupational therapy etc.

This could include an activity like service introduction as it would be considered part of the service delivery.

Where client needs are more complex than what was identified in the referral, the service provider should refer the client back through My Aged Care for a further assessment by the RAS. (RS)

Useful Resources for Diversity, CALD and Aboriginal Service Providers

Centre for Cultural Diversity in Ageing -New Website with Aged Care Bilingual Inclusive Practice Guides

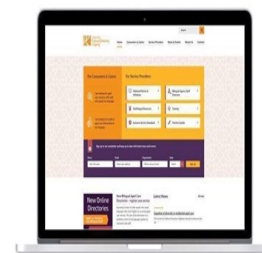
Centre for Cultural Diversity in Ageing has launched a new website with a broad range of useful resources for both aged care service providers and consumers and carers. The new website offers free, downloadable resources such as the brand new *Inclusive Service Standards: A Resource for Aged Care Providers*; Bilingual Aged Care Staff Directories; and updated Culturally Inclusive Practice Guides.

Other resources available on the website are the *Communication Cards* and *Aged Care Signage* in 37 languages, and links to multilingual health information. The website is funded by the Australian Government Department of Health under the Partners in Culturally Appropriate Care Initiative.

Explore the website at www.culturaldiversity.com.au

<https://www.emralliance.org/uploads/9/7/7/9/97794766/>

[connecting through inclusive communication practices complete resource guide.pdf](#) (RS)



'Walk With Us' - Video Resource

"Walk With Us" is short film made by Storyscape and How Far Films that aims to encourage mainstream community/health organisations to be more culturally inclusive, so that more Aboriginal and Torres Strait Islander people access their services.

The film follows Jedda, a young Aboriginal woman, on her journey of discovery in finding out from her Elders why there is a health gap and what she could possibly do about it. She wants to try and get a job in an organisation that's working to close the gap but also wants to make sure it's an organisation that she's going to feel comfortable and supported in. She finds a couple of local organisations who are willing to share their journey and perspectives on being more culturally inclusive.

Through her interviews with people at the [Aborigines Advancement League](#), [Diabetes Victoria](#) and the [City of Darebin](#) we learn about all the things organisations need to be considering and doing. We learn about the importance of the physical environment (having acknowledgements, flags, artwork), the need to attract and retain more Aboriginal employees, having more Aboriginal people represented in leadership positions, as well as changes attitudes and beliefs.

This important video resource compliments a range of other resources in the [Koolin Balit Toolkit](#), an initiative of North West Metropolitan Region Primary Care Partnership Consortium.

[Link](#) (Video) this is an 8 minute video that may be something that can be played at full team meetings? (RS)

Cultural Diversity

Cultural Diversity Week 2018 will be held from 17th – 25th March. Cultural Diversity Week is Victoria's largest multicultural celebration, featuring a week-long program of festivals and events in metropolitan and regional areas. The week invites Victorians to embrace each other's cultural heritage and join in the celebrations. Cultural Diversity Week coincides with the United Nations Day for the Elimination of Racial Discrimination and Harmony on March 21. For more information about what's on and how your organisation can get involved visit <https://culturaldiversityweek.vic.gov.au/>

This newsletter features information and resources to assist you and your organisation to provide service responses that embrace and celebrate the diversity, characteristics and life experiences of all people accessing your service. (RS)

Assessment

New report confirms long delays for high-level home care; Around 3 in 10 older people have been waiting more than 12 months for their required level of care, December government data shows. This means that assessors are now assessing clients with stricter criteria.

– Clients that require a package of care in the next 6 months will be assessed by ACAS otherwise they will be referred to RAS for assessment to CHSP services, anyone that is trying to plan for the future will no longer be able to undergo assessments for *just in case to assist* with the national queue waitlist.

RAS will look at priority of access also when assessing clients due to the tight time lines for CHSP services to commence, HIGH only for High needs. (RS)

The Aged Care Workforce Strategy Taskforce

(the Taskforce) welcomes your input to the development of the Aged Care Workforce Strategy (the Strategy). Please take the time to complete as this will affect the aged care industry in the near future. The Taskforce is building its approach to the strategy around five strategic imperatives:

- Why the aged care industry matters
- Industry leadership, mindset and accountability
- Industry workforce organisation and education (current and future)
- Industry attraction and retention
- Translating research and technology into models of care and practice (RS)

<https://consultations.health.gov.au/aged-care-policy-and-regulation/aged-care-workforce-strategy/>

Testing a New Model of Social Support for Carers

A new research project is investigating the potential of videoconferencing as a tool to combat isolation among carers of people with dementia.

The study by *Central Queensland University* will see small groups of primary carers take part in weekly video chat groups to facilitate social support and share information. The project builds on previous research that demonstrated the effectiveness of video-based peer support groups for people with chronic conditions. "The program is about connecting isolated carers to each other to positively influence their caring experience," "A focus of the project is to use off-the-shelf technology which will be more accessible than specialised bespoke solutions that are currently popular in this area of research,"but of course they need internet...

The Wimmera, Grampians/Pyrenees and Central signatories or representatives of the agencies involved in the signing the Aboriginal Partnership Agreement. (RS)

Dementia Memory Nurse Kits

Funding was provided for supply of resources to assist the great work of the Dementia /Memory Nurses in the Grampians Region. (MS)



Mary Slater, Tineke Carr and Helen Matthews
Djerrairwarrah Health Services



Robyn Leslie Memory Support Nurse
Stawell Regional Health



Mary Slater and Louise Bellizzi Dementia
Nurse Wimmera Health Care Group

Vic PCP Online Health Literacy Course

The Victorian Primary Care Partnerships (PCPs) are pleased to announce the launch of the Vic PCP Online Health Literacy Course.

The course has been designed for Victorian health and human service organisations to build knowledge and skills in health literacy responsiveness.

The course is available free of charge at www.vicpcphealthliteracycourse.com.au (we recommend using Chrome as your internet browser) or you can request a free version to be embedded in your internal Learning Management System from cwgpcp@gmail.com.

After completing the course, staff will have an understanding of:

What health literacy responsiveness is

Their role in improving health literacy responsiveness

How health literacy improvements can be implemented within your organisation.

The course is made up of the following 5 modules:

- **Introduction:** What is health literacy and why is it important?
- **Leadership:** How does my leadership role contribute to health literacy responsiveness?
- **Communication:** What influence does communication have on health literacy?
- **Navigation of physical and virtual environments:** What challenges do individuals face when navigating a service and how can my organisation support them?
- **Partnering with consumers:** How can my organisation work with consumers to improve organisational health literacy responsiveness?

The course is designed so your staff can complete the modules most relevant to their role and are suitable for all staff, regardless of their existing knowledge of health literacy.

This broad approach to increase staff knowledge and skills has been designed to complement health literacy activities within your organisation. ^(WA)

LGBTI Training 2018

Opportunity for LGBTI training for all CHSP Staff, board members and Volunteers in Ballarat on 24th May, please contact Mary Slater on marys@bchc.org.au

CHSP and HCP Roadshow CANCELLED

Recently Pam Edwards and I sent out invitations to the CHSP & HCP interface information sessions to be held across the Grampians Region. I know that there is confusion and doubt about what you can and can't do but the roadshows have been cancelled and will no longer be proceeding in the current format. We are sorry for any inconvenience and we are looking at other avenues on how we can best provide this information in the more appropriate manner. (RS)

I'M SORRY!



CHSP/HACC PYP

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