



Australian Government
Department of Social Services

DRAFT FOR CONSULTATION AS AT 2 MARCH 2015

Commonwealth Home Support Programme

Programme Manual 2015

DSS XXXX.X.XX



ISBN

Creative Commons licence



With the exception of the Commonwealth Coat of Arms, Department of Social Services Logo, photographs, images, signatures and where otherwise noted, all material presented in this publication is provided under a Creative Commons BY Attribution 3.0 <http://creativecommons.org/licenses/by/3.0/au/> licence.

The details of the relevant licence conditions are available on the [Creative Commons website](http://creativecommons.org/licenses/by/3.0/au/legalcode) (<http://creativecommons.org/licenses/by/3.0/au/legalcode>)

The document must be attributed as the Department of Social Services (**Commonwealth Home Support Programme, Programme Manual**).

Commonwealth Home Support Programme

DRAFT

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 will launch 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
- 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 a:

- Standardised national assessment process through My Aged Care
- Central client record to document aged care information that will be accessible to the client, their nominated representative, and service providers
- Web-based provider portal from which providers can self-manage their service information
- Web-based provider portal from which providers can manage electronic referrals.

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 on a HACC transition for older people in Western Australia are currently underway, but at an early stage. Therefore, basic home services will continue to be provided to the frail aged under the jointly-funded Western Australian HACC Program. Older people in Western Australia will be able to access support under the Commonwealth Home Support Programme that was previously offered under the NRCP, DTC and ACHA programmes.

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

The Government will provide funding of more than \$1.7 billion in 2015-16 for the Commonwealth Home Support Programme which will assist over half a million older people.

Table of contents

Foreword	iii
Table of contents	iv
Part A – The Programme	1
Chapter 1 – Overview of the Programme	1
1.1 Introduction.....	1
1.2 Overview of the Commonwealth Home Support Programme	3
1.2.1 Vision.....	3
1.2.2 Definition of entry-level support.....	3
1.2.3 Position in the Australian Government’s end-to-end aged care system.....	4
1.2.4 Objectives.....	5
1.2.5 Outcomes	6
1.2.6 Key features	6
1.2.7 Service delivery principles	7
1.2.8 Target groups	7
1.2.9 Special Needs Groups.....	8
1.2.10 Programme Philosophies.....	9
1.2.11 What services are funded under the Commonwealth Home Support Programme?..	12
1.2.12 What services must not be purchased using Commonwealth Home Support Programme funding?	13
1.2.13 Where will Commonwealth Home Support Programme services not be provided? .	14
1.2.14 Policy Context.....	14
Chapter 2 – Sub-Programmes: Eligibility and Services	16
2.1 Programme Framework – Commonwealth Home Support Programme.....	16
2.2 Sub-Programme – objective, target population, eligibility and services	18
2.2.1 Community and Home Support Sub-Programme.....	18
2.2.2 Care Relationships and Carer Support Sub-Programme	35
2.2.3 Assistance with Care and Housing Sub-Programme.....	40
2.2.4 Service System Development Sub-Programme	43
Chapter 3 – Access and interactions.....	45
3.1 Interaction between the Commonwealth Home Support Programme and other programmes	45
3.1.1 General principles defining access to more than one programme.....	45
3.1.2 Interaction with specific programmes and services	45
3.1.3 Transition arrangements for existing clients.....	47
3.2 Equity of access.....	49

3.3	Prioritisation of need	49
3.4	Assessment for entry to the Commonwealth Home Support Programme	49
3.4.1	Assessment functions undertaken by My Aged Care	49
3.4.2	Grant Recipient requirements for interacting with My Aged Care	52
3.4.3	Assessment functions undertaken by Commonwealth Home Support Programme Grant Recipients.....	52
3.4.4	Assessment principles	52
Chapter 4 – Fees		54
Part B – Administration of the Commonwealth Home Support Programme		55
Chapter 5 – Grant Recipient and Departmental Responsibilities		55
5.1	Grant recipient responsibilities	55
5.1.1	Quality arrangements for service delivery	55
5.1.2	Client Rights and Responsibilities	56
5.1.3	Police Checks.....	57
5.1.4	Staffing and Training.....	57
5.1.5	Work Health and Safety.....	57
5.1.6	Client not responding to a scheduled visit or service.....	58
5.1.7	Complaints Mechanisms.....	58
5.1.8	Service Continuity.....	59
5.1.9	Acknowledging the Funding.....	59
5.1.10	Subcontracting.....	60
5.2	Funding.....	60
5.2.1	Spending the Grant.....	60
5.2.2	Assets.....	61
5.3	Grant recipient reporting	61
5.3.1	Overview	61
5.3.2	Accounting for the Grant.....	62
5.3.3	Managing Performance	63
5.3.4	Activity Reporting.....	64
5.3.5	Aged Care Workforce Census	64
5.4	IT and system requirements.....	64
5.4.1	System requirements.....	65
5.5	Government Responsibilities	65
5.5.1	Planning Framework.....	65
5.5.2	Government Reporting	65
Appendix A – Grant recipient interactions with My Aged Care.....		66

Appendix B – Useful resources	67
Appendix C – Policies and Guidelines.....	68
Appendix D – Contacts	69
Appendix E – Commonwealth Home Support Programme Police Certificate Guidelines.....	70
1 Introduction.....	71
2 Your Obligations	71
3 Police Certificates	71
3.1 Police certificates and police checks.....	71
3.2 Police certificate requirements	71
3.3 CrimTrac certificates.....	72
3.4 Statutory declarations	72
4 Staff, Volunteers and Executive Decision Makers.....	72
4.1 Staff, volunteers and executive decision makers	72
4.2 Definition of a staff member	72
4.3 Definition of non-staff members	73
4.4 Definition of a volunteer	73
4.5 Definition of unsupervised interaction	73
4.6 Definition of an executive decision maker	74
4.7 New staff	74
4.8 Staff, volunteers and executive decision makers who have resided overseas	74
5 Assessing a Police Certificate.....	75
5.1 Police certificate format	75
5.2 Purpose of a police certificate.....	75
5.3 Police certificate disclosure.....	75
5.4 Assessing information obtained from a police certificate for staff and volunteers.....	75
5.5 Assessing information obtained from a police certificate for executive decision makers.....	76
5.6 Committing an offence during the three year police certificate expiry period.....	77
5.7 Refusing or terminating employment on the basis of a criminal record	77
5.8 Spent convictions	78
6 Police Check Administration	78
6.1 Record keeping responsibilities	78
6.2 Sighting and storing police certificates.....	78
6.3 Cost of police certificates.....	78
6.4 Obtaining certificates on behalf of staff, volunteers or executive decision makers	79
6.5 Police certificate expiry	79

6.6 Documenting decisions.....	79
6.7 Monitoring compliance with police check requirements.....	79
Glossary	83

DRAFT

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) – 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.

Should this Programme Manual need to be updated or varied in the future, grant recipients will be notified and amended documents will be published on the Department of Social Services website.

Consultation

This Programme Manual was informed by advice from the National Aged Care Alliance and its Commonwealth Home Support Programme Advisory Group and feedback (that will be) 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.

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 eligibility for services under the Commonwealth Home Support Programme and the interface

between this and other programmes. In addition, Appendix A provides a diagram of the service provider interactions with My Aged Care.

More information

This Programme Manual is available on the [Department of Social Services website \(http://www.dss.gov.au/chsp\)](http://www.dss.gov.au/chsp)

Inquiries about individual services or funding matters must be referred to the Commonwealth Home Support Programme grant recipient help desk on **xxxx** or email **xxx@dss.gov.au**

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

DRAFT

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, 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 signals that the client may need a Home Care Package.

Client scenario – Entry-level support

While visiting his elderly mother from inter-state, a son notices that his mother is becoming forgetful and neglecting to eat and that her ability to manage household tasks around the house is declining.

They call the My Aged Care contact centre together for advice on what assistance the mother could receive to support her to continue living independently in the family home. The mother consents for the Contact Centre to register her as a client and create a client record. Following initial screening of her needs, the Contact Centre organises for his mother to receive a face-to-face assessment by a My Aged Care Regional Assessment Service.

The assessor discusses with the mother what her needs and goals are and how they can be met. Her Support Plan includes delivery of meals, domestic assistance for general house cleaning and social support. The service providers will complete the Service Plan indicating the expected service levels to be provided to the client (e.g. delivery of meals three times a week). The social support service provider will take the mother shopping and assist her with some other basic chores such as paying bills.

The level of these services provided under the Commonwealth Home Support Programme is lower than the cost or amount of services that may be delivered through a Home Care package. In addition, the mother's needs and the relatively few services delivered do not require ongoing case management.

This entry-level support helps the mother to fulfill her wish to 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 and their carers.

My Aged Care incorporates a website and phone-based screening process undertaken by a contact centre and network of regionally based assessment organisations (Regional Assessment Services and progressively the Aged Care Assessment Teams) across Australia that will assess a client's needs and eligibility for services across programmes through a face-to-face assessment.

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.

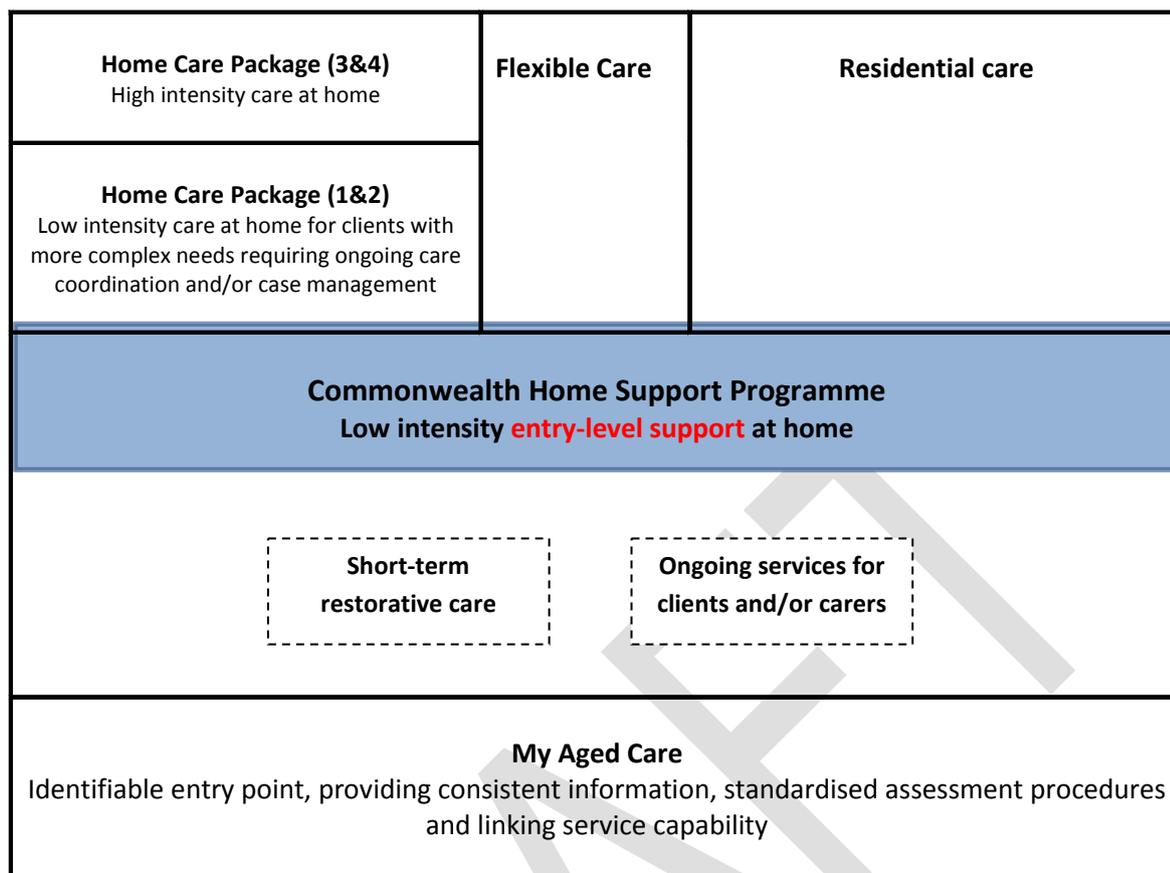
The Commonwealth Home Support Programme complements the Australian Government's Home Care Packages Programme, which is designed to support older people living in the community whose care needs exceed the level of support which can be provided through the Commonwealth Home Support Programme, and provides consumers with higher intensity, on-going services as well as an individualised budget that the consumer controls. Frail, older people who require higher levels of on-going 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 expansion of the National Aged Care Advocacy Program will begin from 1 July 2016.

Aged care system from 1 July 2015



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
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 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 through My Aged Care by:
 - a standardised national assessment process
 - a central client record to document aged care information that will be accessible to the client, their nominated representative, and service providers
 - a web-based provider portal from which providers can self-manage their service information
 - a web-based provider portal from which providers can manage electronic referrals from My Aged Care.
- Deliver services and support with a strong focus on wellness and reablement
- Provide targeted sector support and development activities
- Promote equity and sustainability through a nationally consistent fees policy
- 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, where this is specifically agreed between DSS and the grant recipient.

These circumstances include where DSS determines the arrangement is justified because:

- 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, DTC and ACHA programmes within the Commonwealth Home Support Programme
- DSS determines that other circumstances justify the delivery of services to the 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 under Commonwealth Respite and Carelink Centres, the National Carer Counselling Program and Carer Information Support Service. Work is currently underway by the Commonwealth to develop options for future carer services in the context of, and in alignment with, the aged care and disability reforms, to work toward a more integrated response for carer services.

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 men, bisexual, transgender and intersex people (including people who are perceived to be, or have in the past lived as such)
- 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 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'.

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

Restorative Care Approach (incorporating wellness and reablement)

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 autonomy and independence of living and active involvement by clients to maximise service outcomes, to increase or retain community engagement and to maximise quality of life. The terms reablement and restorative care may be used to describe specific and time limited interventions and supports used to achieve measurable improvements in an individual's capacity or function in relation to particular tasks or activities, with a view to reducing reliance on or the need for on-going support services, or giving carers a break from their caring role.

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.

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 assessment, referral and service pathway. It will be supported by My Aged Care Regional Assessment Services 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. 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.

Under the Commonwealth Home Support Programme, restorative care interventions will be provided or led by allied health clinicians, general practitioners or other health professionals based on clinical assessment of the individual. Restorative care interventions will be implemented through Commonwealth Home Support Programme providers of allied health and therapy services who will help clients set (functional) goals and review their progress after a defined period.

For grant recipients, a wellness approach under the Commonwealth Home Support Programme will be delivered in the context of the new processes for assessment and support planning.

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

- 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 Regional Assessment Services where appropriate to review the client's support plan
- Grant recipients should consult the Commonwealth Home Support Programme Good Practice Guide for a Restorative Care Approach 2015 (including wellness and

reablement) to assist in the development of good practices within a wellness approach (provide link when available).

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 independent and confidential advocacy services (pending implementation of the reviewed National Aged Care Advocacy Program from 1 July 2016)
- 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 (see link at Appendix C of this Programme Manual).
- Provide clients with a copy of the Charter
- Manage their service information via the My Aged Care web-based provider portal
- Manage client referrals via the web-based provider portal
- Update the service plan for the client on My Aged Care.

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

A client receiving Domestic Assistance may request that, instead of having the house vacuumed that week, her preference is for the worker to clean her fridge and pantry.

A client recently out of hospital is feeling vulnerable and seeking continuity in the staff providing her personal care. The client requests that the same worker comes to help her with showering and dressing on her twice-weekly visit. The grant recipient negotiates with the client to change the days on which she receives her care to enable the same staff member to meet this request and provide her support.

1.2.11 What services are funded under the Commonwealth Home Support Programme?

The following service types are available under the Commonwealth Home Support Programme:

- Domestic Assistance
- Home Maintenance
- Home Modifications
- Personal Care
- Social Support-Individual
- Social Support-Group
- Nursing
- Allied Health and Therapy Services (including podiatry, occupational therapy, physiotherapy, social work, formal counselling from a qualified social worker or psychologist, speech pathology, and nutritional advice from a qualified dietitian or nutritionist)
- Meals
- Other Food Services
- Transport
- Goods, Equipment and Assistive Technology
- Flexible Respite including:
 - 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 including:
 - Centre based day respite
 - Residential day respite
 - Community access – group respite.
- Cottage respite (Overnight Community Respite)
- Assistance with Care and Housing
- Sector Support and Development.

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 such as:

- Advocacy (client) – Independent advocacy for clients, their families, carers and representatives, is currently the subject of further review. Information about this work will be available once completed.
- Counselling, Support, Information and Advocacy (carer) – Separate work is being undertaken by the Department to explore carer support services more broadly. Grant recipients will be informed of the outcome of this work.

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: ACHA 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 by My Aged Care via initial phone-based screening by the My Aged Care contact centre and face-to-face assessments conducted by Regional Assessment Services
- Case Management – short-term case management services will be available for Commonwealth Home Support Programme clients through My Aged Care Regional Assessment Services.

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 people:

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

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:

- From 1 July 2015, My Aged Care was enhanced to become 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.
- This was done by:
 - the introduction of a central client record to document aged care information, hosted on the My Aged Care system, that is accessible to the older person, their nominated representative, and service providers
 - having a central client record which will prevent older people, their families and carers from having to repeat their story to different service providers
 - the introduction of the Regional Assessment Service which is responsible for assessing the home support needs of older people. This new service provides timely support for locating and accessing suitable services based on the needs and preferences of older people
 - assessments that are carried out face-to-face
 - a standardised approach to assessment will help ensure that the allocation of services is based on the needs of older people, and not limited by the scope of services that a particular service provider may offer
 - assessments that focus on assisting older people to continue living independently in the community.
- From 1 July 2015, all Home Care Packages will 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 more consistent and sustainable user fees arrangements
- Removal of the former distinction between high and low care in residential aged care
- The commencement of the Australian Aged Care Quality Agency to monitor 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 and services 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.

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.

The legislation provides for an independent review of the reforms to commence in 2016 with a report to be tabled in both Houses of Parliament by 31 July 2017.

Changes to recognise 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](http://www.comlaw.gov.au/Details/C2010A00123) (<http://www.comlaw.gov.au/Details/C2010A00123>).

Further information:

The Australian Government's reform agenda: [Department of Social Services website \(www.dss.gov.au\)](http://www.dss.gov.au)

Detail on programmes consolidated to form the [Commonwealth Home Support Programme \(www.dss.gov.au/chsp\)](http://www.dss.gov.au/chsp)

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 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.

DRAFT

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	<ul style="list-style-type: none"> To provide entry-level support services to assist frail, older people to live independently at home and in the community 	<ul style="list-style-type: none"> To support and maintain care relationships between carers and clients, through providing good quality respite care for frail, older people so that their regular carer can take a break 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> 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 	<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 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) 	<ul style="list-style-type: none"> Assistance with Care and Housing 	<ul style="list-style-type: none"> Sector Support and Development activities

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.

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)
- has difficulty performing activities of daily living without help due to functional limitations (for example communications, social interaction, mobility or self-care)
- lives in the community.

Service types funded

- 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.

As at 1 July 2015, only some of this Sub-Programme's services will be available in Victoria and Western Australia. These are – Allied Health and Therapy Services provided through former Day Therapy Centres. In those states, other, similar services are available through the joint Commonwealth-State funded HACC Program.

Client scenario

An 82 year old woman who lives alone has been diagnosed with macular degeneration and is losing her vision. The woman no longer drives, has had a few minor falls, and is now nervous about leaving the home. She is also finding it increasingly difficult to do everyday household tasks. She rings the My Aged Care contact centre to see what assistance might be available.

During the screening process she is asked a few questions in order to understand her needs, and to determine the best pathway to meet those needs. My Aged Care also assists the woman to register with My Aged Care and her details are captured on her Central Client Record which she (or her nominated representative) can access via the client portal. Assessors and service providers will be allowed access to some of these details so that the woman does not have to repeat her story at every step of her journey.

In developing the Action Plan the Contact Centre determines that the client would benefit from a face-to-face assessment by the My Aged Care Regional Assessment Service, which the client agrees to. At the face-to-face assessment, the assessor has a conversation with the client about her care needs, goals, strengths and areas of concern. Based on the conversation, the client and assessor agree on some actions to be taken to meet her goals. This is documented in her Support Plan on her Central Client Record, and includes providing support to access services in her community as she no longer drives and domestic assistance for help with household chores.

The assessor also asks the woman if she would be interested in having an environmental assessment to identify trip hazards around the home. The woman agrees and the assessor locates a range of Commonwealth Home Support Programme Allied Health and Therapy services in the area that are able to undertake this assessment. The woman has a personal preference to use one of the service providers and the assessor arranges an electronic referral to that service provider. The service provider receives the referral and contacts the woman to arrange a time for the assessment. One of the outcomes of the environmental assessment is that the woman is also referred to a home maintenance provider to remove a trip hazard near the front door.

Both the domestic assistance provider and the transport provider send staff who have experience working with people with vision loss. In line with the client's goals, the domestic assistance provider is able to make suggestions to help her continue to undertake many of the tasks she now finds difficult, and comes once a fortnight to undertake the tasks she can no longer manage.

As the woman would like to maintain her independence where she can, she uses public transport for shorter trips, such as travelling to the local shops. For more challenging journeys where she needs support, such as visiting her GP in the city, she accesses community transport.

The support provided recognises the challenges the client is facing while continuing to offer opportunities to maintain her independence and autonomy where possible.

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

Service type: Meals

Objective	<p>Primary objective – To provide frail, older people with access to meals.</p> <p>Secondary objective – To provide opportunities for social participation and interaction through provision of meals.</p>
Service type description	<p>Meals prepared and delivered to the client's home and meals provided at a Centre or other setting.</p>
Out-of-scope activities under this service type <i>(.i.e. must not be purchased using Commonwealth Home Support Programme funding)</i>	<p>This service type does not include meals prepared in the client's home.</p>
Service delivery setting <i>e.g. home/centre/clinic/community</i>	<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>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	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations, for example relevant state and territory safe food handling practices.</p>
Output measure	<p>Number of meals provided.</p>
Staff qualifications	<p>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.</p>

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	Assistance with preparing and cooking a meal in a client's home, including providing advice on nutrition, food storage and food preparation. The primary focus of this service is provision of assistance with food preparation to promote knowledge, skills and independence.
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	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.

Service type: Transport

Objective	To provide frail, older people with access to transport services that support their access to the community.
Service type description	The provision of a structure or network that delivers accessible transport to eligible clients. Assistance with transport can be provided either directly or indirectly. Direct transport services are those where the trip is provided by a worker or a volunteer. Indirect transport services include trips provided through vouchers.
Out-of-scope activities under this service type	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.
Service delivery setting e.g. home/centre/clinic/community	Includes, but is not limited to, transport services provided to or from facilities or the client's home.
Use of funds including any target areas	Funding must be used for non-assisted/assisted transport and planned (group) and on-demand (individual) services. The carers of older people accessing Commonwealth Home Support Programme transport services may accompany those clients when using those services where required.
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations, for example holding appropriate licenses and meeting state accreditation standards.
Output measure	Number of one-way trips. Service providers are to count clients and carers separately when reporting outputs.
Staff qualifications	Drivers of transport services must hold an appropriate licence. Grant recipients must also take reasonable care to ensure the safety of all concerned where paid staff or volunteers are providing transport services. 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.

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 includes services such as:</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.
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	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations, for example relating to safe food handling and laundering practices.
Output measure	Time (recorded in hours and minutes as appropriate).
Staff qualifications	Where additional services are performed, such as personal care, in conjunction with domestic assistance, qualifications relating to that additional service apply.

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"> • eating • bathing • toileting • dressing • grooming • getting in and out of bed • medication monitoring • moving about the house. <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>
Out-of-scope activities under this service type	
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 – State and territory legislation governs medication management. Grant recipients must take into account all relevant legislation and guidelines in developing policies and procedures around medication monitoring provided under the Commonwealth Home Support Programme.</p>
Output measure	Time (recorded in hours and minutes as appropriate).
Staff qualifications	<p>For personal care, a Certificate III in aged/community care or equivalent is desirable</p> <p>Providers must also ensure that staff have appropriate levels of skill and knowledge in relation to assistance with medication and duty of care.</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.</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>Services can include a range of maintenance or repair tasks such as:</p> <ul style="list-style-type: none"> • replacing light bulbs and tap washers • installing batteries in smoke/security alarms • gutter or window cleaning • roof repairs • garden maintenance – pruning, lawn-mowing or weeding (where there are issues of safety and accessibility). <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 review.</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>
Service delivery setting e.g. home/centre/clinic/community	<p>Client's home.</p>
Legislation	<p>Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and 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) Cost in dollars (proposed new field).</p>
Staff qualifications	<p>Grant recipients must adhere to any legislative or regulative requirements where the work is undertaken by licensed or registered tradespeople.</p>

Service type: Home Modifications

Objective	<p>To provide home modifications that increase or maintain levels of independence, safety, accessibility and wellbeing.</p>
Service type description	<p>Services are provided to assist eligible clients with the organisation and cost of simple home modifications (such as grab rails) and more complex modifications (such as ramps and other modifications to improve access into and within the home).</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 modifications could include:</p> <ul style="list-style-type: none"> • bathroom redesign (e.g. 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) • grab rails in the shower • appropriate lever tap sets • hand rails next to steps • installation and fitting of emergency alarms and other safety aids. <p>Home modifications are provided to improve safety and accessibility and independence within the home environment for the client.</p> <p>An Occupational Therapy assessment is required for clients to receive Home Modifications service.</p> <p>Where required, the carer of an older Commonwealth Home Support Programme client receiving home modification services may also have modifications to their home made to meet the needs of the older person, where that older person spends significant time at the carer's residence.</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>Modifications that would incur a cost of over \$10,000 to the Commonwealth are not available under the Commonwealth Home Support Programme. The \$10,000 cap applies per client per annum.</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 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>
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>

Objective	To provide home modifications that increase or maintain levels of independence, safety, accessibility and wellbeing.
	For example, home modification funds can be used to deliver or purchase Occupational Therapy assessments for clients requiring a home modification.
Specific funding advice	Funding can be used to cover both the labour costs and the materials cost or only some part of this, and for project management of the modification.
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations. 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.
Output measure	Cost in dollars (count for client and the carer if required). Types of modification provided (proposed new field).
Staff qualifications	Providers must comply with Commonwealth and state and territory legislation regarding who can undertake home modifications.

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>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>Social support includes:</p> <ul style="list-style-type: none"> • visiting services • telephone and web-based monitoring services • 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) • 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/centre/clinic/community	Client's home or community setting.
Use of funds including any target areas	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.

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	Time (recorded in hours and minutes as appropriate).
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. The care can include recording client observations.</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 services are considered out-of-scope because government funding is already provided for them through other government programmes.</p> <p>For example, post-acute care is out-of-scope for the Commonwealth Home Support Programme. However, 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.</p> <p>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	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.
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	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.

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, 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 include:</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 a qualified dietitian or nutritionist. <p>This list of services is not exclusive and not all grant recipients are expected to cater for all types.</p> <p>There are two models of service provision for this service type available depending on intensity. 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</p>

Objective	To provide services that restore, improve or maintain frail, older people's health, wellbeing and independence.
	<p>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 (New field proposed-identify which model/s will be delivered)</p>
Staff qualifications	<p>Allied health providers must meet their respective accreditation and registration requirements.</p> <p>Assistants, such as allied health assistants or dietitian assistants, may be used in the implementation and monitoring of services and programmes. However, they must be guided and supervised by allied health professionals, who are ultimately accountable for client care.</p>

Service type: Goods, equipment and assistive technology

Objective	<p>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.</p>
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 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 categories:</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>Items in scope include those that cost less than \$500 per item per client per year. These items are usually standard products which do not require customisation to the user's requirements, and which pose a low risk to the client or worker.</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	<p>Varied settings.</p>
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. 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. Commonwealth Home Support Programme grant recipients are encouraged to access state and territory aids and equipment programs where appropriate.</p>

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.
Legislation	Grant recipients must comply with relevant Commonwealth and/or state/territory legislation and regulations.
Output measure	Number of items purchased or loaned. Hours of Allied Health and Therapy Services delivered must also be recorded if appropriate.

DRAFT

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.

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

- Flexible Respite including:
 - 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 including:
 - Centre-based day respite
 - Residential day respite
 - Community access – group respite.
- Cottage respite including:
 - Overnight community respite (cottage).

The Commonwealth is currently developing an Integrated Plan for Carer Support Services. This plan will bring together the broader suite of carer support services, for all carers, including carer information and counselling and employment initiatives.

As at 1 July 2015, this Sub-Programme's services are available in Victoria and Western Australia.

Client scenario

A 75 year old woman is the carer of her 83 year old husband who has mild dementia as well as 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 she 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 she calls the My Aged Care contact centre to see what assistance she and her husband may be eligible for. The woman and her husband consent for the Contact Centre to register them as clients and create client records. After screening by the My Aged Care Contact centre both the woman and her husband are referred for assessment by the Regional Assessment Service. This is noted in their Action Plans.

During the assessment process, the care needs and goals of both the woman and her husband are identified, including what help she needs (as his carer) to support the care relationship.

As a result of the assessment, a Support Plan is agreed, and matching of services to needs occurs. Two hours per week of flexible (in-home) respite care is arranged. Her husband 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 the woman to return to line dancing.

Access to this support has benefited her husband and provided his wife with more balance in her life.

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

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	Residential respite that is delivered under the <i>Aged Care Act 1997</i> . (see Glossary). Group based respite.
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 – qualifications relating to that additional service apply.

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 – qualifications 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	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. Where additional services are performed e.g. personal care, in conjunction with respite – qualifications 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

- Assistance with Care and Housing.

As at 1 July 2015, this Sub-Programme's services are available in Victoria and Western Australia.

Client scenario

A 55 year old man has been sleeping rough for several years. His latest accommodation is a boarding house which is all he feels his low income can afford. Here, his bedroom is unable to be locked and he is exposed to harassment from other boarders. He feels increasingly isolated and fearful for his safety and is avoiding the shared kitchen. This is impacting on his physical wellbeing and health, his arthritis has become worse and he has lost weight.

The man has been receiving some help from a local charity which suggests he contact a local Commonwealth Home Support Programme provider that provides Assistance with Care and Housing support. Together the man and service provider ring the My Aged Care contact centre and the provider facilitates the man getting registered as a client and being screened. He is then assessed as being eligible for Assistance with Care and Housing support under the Commonwealth Home Support Programme.

My Aged Care refers him for a face-to-face assessment by the Regional Assessment Service, which is undertaken at the boarding house in conjunction with the Assistance with Care and Housing service provider. A service plan is developed which includes finding better accommodation, connecting with his friends again and referral to a financial counsellor to help him budget.

The Assistance with Care and Housing provider helps the client find more secure accommodation, which has a small self-contained kitchen and fridge provided. He now feels safe to invite friends and family to visit him making him feel connected again, and is located close to public transport and local shops so he can maintain and increase his independence, community networks and social inclusion.

A follow-up visit by the Assistance with Care and Housing provider shows that the client's physical and emotional wellbeing has improved with better food, no sleep disturbances from noisy tenants and feeling safe.

Through linkage to the services he needs, the client has improved his general wellbeing and changed his life for the better giving him a renewed sense of optimism and control.

Service type: Assistance with Care and Housing

Objective	<p>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.</p>
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.</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 • Regional Assessment Services 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 • 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.
Out-of-scope activities under this service type	<p>Permanent support and/or direct care provision are out-of-scope. 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 and comply with the Commonwealth Home Support Programme Police Certificate Guidelines.</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 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.

Existing arrangements for sector support and development in Victoria and Western Australia under the joint Commonwealth-State funded HACC Program will continue while transition negotiations are underway.

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 broader aged care system.
Service type description	
Out-of-scope activities under this service type	
Service delivery setting e.g. home/centre/clinic/community	
Use of funds including any target areas	
Measure	

NOTE: This table will be completed for the final version of the Programme Manual, once the Department completes an analysis of existing sector support and development activities.

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. Any Commonwealth Home Support Programme services delivered to them will generally be paid on a full cost recovery basis from the client's individualised Home Care Package budget.

This ensures that the Commonwealth Home Support Programme is able to provide entry-level support services to as broad a population as possible, 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.

Exceptions may be made in some situations, for example, in an emergency or when a carer is not able to maintain their caring role. These instances will be time limited, monitored and reviewed.

As with other clients accessing Commonwealth Home Support Programme funded services, My Aged Care will be responsible for assessing and referring clients on Home Care Packages to Commonwealth Home Support Programme services where appropriate.

Where a 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.

Client scenario:

An older man has been receiving services under the Commonwealth Home Support Programme on and off for a number of years. For the past 18 months he has been able to stay at home with an hour of domestic assistance a fortnight, accessing community transport for local appointments with his GP and a trip to his local Social Support-Group provider once a week where he enjoys activities and a meal with his friends.

The Social Support coordinator has noticed that over recent months his general appearance and hygiene have deteriorated. The coordinator asks him if there is a problem and he replies that he is having trouble keeping up with things at home. The coordinator suggests that he has a re-assessment to see if his service needs have changed. The man agrees and the coordinator calls My Aged Care with details of the client's change in circumstances and need for increased services. My Aged Care organises for an Aged Care Assessment Team member to come to the man's house at a time and day that suits him.

The assessment determines that he is eligible to receive a Level Two Home Care Package, however there is not one available in the area. In line with the Support Plan that has been developed, My Aged Care staff undertake to keep the man and the service coordinator informed of when a Level Two package becomes available in the area. In the interim, he continues to receive the current level of services from the Commonwealth Home Support Programme.

When a Level Two Package becomes available the man exits the Commonwealth Home Support Programme and commences services under Home Care Packages. He asks his Package Care provider to use his budget to purchase services from the previous centre where he received social support and the transport provider as part of his package of services. This provides continuity of care and a sense of familiarity with providers he trusts. He also receives some personal care and extra domestic assistance.

Through the streamlined assessment process and supported transition to the programme that best meets his needs, the client can move through the aged care system with minimal disruption while receiving the care he needs.

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 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.

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 use of this funding, and the 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 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. This access is determined by their eligibility, assessed need, and any service being provided by other government programmes.

Veterans receiving Veterans' Home Care (VHC) or other Department of Veterans' Affairs funded services are not excluded from receiving Commonwealth Home Support Programme services.

However, in line with the principle of not accessing similar services through multiple government funded programmes, veterans may not access a service they are receiving from VHC with the same service from the Commonwealth Home Support Programme or vice versa.

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, or who accessed services (perhaps intermittently) at least three times over the previous year (see Glossary).

Clients of previous programmes (Commonwealth HACC, NRCP, DTC and ACHA programmes) who are not eligible for similar Commonwealth Home Support Programme services will be supported during a transfer to other appropriate services or grandfathered until suitable services become available.

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

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'

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 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.

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 primary 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 facilities (such as centres delivering social support and transport vehicles owned by Commonwealth Home Support Programme Grant recipients with a capacity of greater than eight people) must be accessible 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 need

Priority of access will be determined by My Aged Care based on evidence based approaches using standardised factors including carer availability, cognition and function. Referrals will include a client prioritisation rating and a capacity for clients to report urgent requirement of services to receive these immediately.

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, the identifiable entry point to the aged care system for older people and their carers.

My Aged Care incorporates a website and phone-based screening process undertaken by a My Aged Care contact centre and network of Regionally Assessment Services (RAS) across Australia that can assess a client's needs and eligibility for services across programmes through a face-to-face assessment.

Both levels of assessment will be supported by a standardised national assessment tool (the National Screening and Assessment Form) and a Central Client Record.

The administration and management of RAS will be undertaken in 52 geographical Aged Care Planning Regions across Australia, excluding Western Australia and Victoria, as these jurisdictions will continue to retain separate responsibility for the provision of assessment services in those jurisdictions.

Core functions delivered by the RAS are:

- Assessment of clients, with a reablement focus
- Matching and referral of assessed clients to appropriate Commonwealth Home Support Programme Services (and other funded aged care services)
- Reassessment of existing clients where a significant change arises in the client's circumstances or needs
- Linking service support to assist clients with high levels of vulnerability and multiple 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 fees for Commonwealth Home Support Programme Services.

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

Further information on the interaction between RAS and Commonwealth Home Support Programme service providers will be incorporated into the final Programme Manual.

Key steps in the client journey

The My Aged Care contact centre will register the client, conduct a screening process over the phone and then either:

- 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 Aged Care Assessment Team if more complex aged care needs are identified through the Screening process
- Provide information about non-Commonwealth funded services, as appropriate.

New clients cannot access Commonwealth Home Support Programme services directly by approaching a service provider. Clients must be registered, screened and/or assessed by My Aged Care to determine eligibility prior to accessing Commonwealth Home Support Programme Services.

Clients approaching service providers directly

In some cases, frail, older people may have special needs that lead them to directly approach a local service provider for support. In the first instance, service providers should refer them to the My Aged Care contact centre.

If the older person is not comfortable doing this, perhaps due to their individual circumstances, or needs immediate service support, the service provider may contact My Aged Care with the client present and seek advice from the My Aged Care contact centre. This may result in the client being screened over the phone with the service provider present.

The assessment process

Direct service delivery

Where a person is eligible for the Commonwealth Home Support Programme and screening identifies that there is no further assessment necessary they may be referred directly to a Commonwealth Home Support Programme service provider to begin receiving services. This pathway will not be appropriate for all service types.

Face-to-face assessment

Where face-to-face assessment is indicated, this will be conducted in the client's home by the RAS using the National Screening and Assessment Form, 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 where required, such as allied health professionals. The client's Central Client Record will ensure they do not need to 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 by My Aged Care, to undertake assessments and identify services appropriate for a diverse range of clients.

My Aged Care RAS assessors will adopt a wellness approach to assessment delivery which emphasises the provision of whole of system support to clients for the purpose of maximising their independence and autonomy.

It is an approach which allows people to realise 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 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, followed by review.

Comprehensive assessments for Home Care Packages and residential care continue to be undertaken by Aged Care Assessment Teams (known as Aged Care Assessment Services in Victoria).

Review of client needs

Service providers have an ongoing responsibility to monitor and review the services they provide their clients to ensure that the client's needs are being met.

There may be circumstances where the Contact Centre or an assessor may recommend a review date for the service provider or where an assessor may undertake a review. A review may also be undertaken by an assessor at the request of the client.

Scheduled review dates may be recommended by the My Aged Care contact centre or RAS. This may occur, for example, where the client is referred for time limited support, or for interim services under the Commonwealth Home Support Programme whilst a client is waiting for access to a Home Care Package. A scheduled review is generally undertaken by the service provider. Where there is no recommended review date, it is expected that a Commonwealth Home Support Programme service provider will undertake a review at least every 12 months.

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 will refer the client to the RAS for a review.

The outcomes of a review may include:

- Identification of additional services
- Extension of existing services
- Recommended cessation of services, should the client's ability to live independently improve
- Assessment – either a Home Support Assessment or a Comprehensive Assessment.

If there is a significant change in the client's needs and/or circumstances that affect the scope of the Support Plan, a further assessment may be undertaken by the RAS. This may be initiated by an assessor's review or by a client or their service provider making a referral to the Contact Centre or a RAS. Clients will be referred to the RAS that last undertook the face-to-face assessment.

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 web-based provider portal
- Accept/reject client referrals via the My Aged Care web-based provider portal
- Refer or facilitate clients to My Aged Care where they have approached them directly
- Enter service and client details into Central Client Records
- Participate in assessment, referral and Central Client Record processes.

3.4.3 Assessment functions undertaken by Commonwealth Home Support Programme Grant Recipients

A range of functions in the assessment process will continue to be undertaken as integral parts of service delivery by Commonwealth Home Support Programme grant recipients. These include:

- Service level assessment activities such as work, health and safety (for both the care worker and client)
- Specialised assessment based on professional expertise (e.g. Nursing and Allied Health and Therapy Services; malnutrition risk assessments by meals providers)
- On-going monitoring of the client, the home environment; and appropriateness of service arrangements
- Referral to My Aged Care for review if care needs change
- Data collection.

In addition, grant recipients are required to 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 3.4.3 and in interacting with My Aged Care as per 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, providers must refer clients to My Aged Care for a review of needs and services and adjustment of the Support Plan.

Avenues for client complaint

If a client has a complaint about the assessment process or outcome, the client should contact the RAS Manager in the first instance. The RAS Manager 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 and the My Aged Care Complaints Framework).

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.

Central Client Record and referral system

Grant recipients must participate in any processes under the My Aged Care framework such as contributing their information to the Aged Care Finder and participating in Central Client Record management and referral systems, to promote a common approach by all providers.

Service level assessment

All assessment functions undertaken for the Commonwealth Home Support Programme must incorporate the eligibility and service information 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

A separate consultation process is occurring on the Commonwealth Home Support Programme national fees policy and schedule.

For further information on Commonwealth Home Support Programme fees please visit: (insert web address when available).

DRAFT

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).

Additional information is available in fact sheets provided on the Department's website at [\(website link to be provided\)](#).

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. This includes policies for managing staff and volunteers, work health and safety, reflecting

Occupational Health and Safety (OH&S) legislative requirements and having complaint mechanisms in place.

Some of the Standards relate to service access and assessment and referral practices. From 1 July 2015, the My Aged Care RAS will be undertaking face-to-face assessments of older people using a standardised framework. Although the responsibility of initial home support assessments will belong to the RAS, grant recipients are expected to continue to undertake service-level assessments 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.

The Standards relate to quality of care and quality of life for the provision of aged care in the community, and have been developed jointly by the Australian Government and state and territory governments as part of broader home care reforms to develop common arrangements that help to simplify and streamline the way community aged care is delivered. A link to the Standards is provided in Appendix B of this Programme Manual.

Grant recipients also must report on their fees policy in place. This must be consistent with the National Fees Policy as detailed in Chapter 4 of this Programme Manual.

Quality Reviews

As of July 2014, 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. Further information is available at [\(insert website link\)](#).

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) established under the *User Rights Principles 2014*, one of the *Aged Care Principles* under the *Aged Care Act 1997*, and provide their clients with a copy of the Charter (see link at Appendix C).

The Charter aims to ensure that grant recipients and their clients are aware of, and confident in exercising, their rights and responsibilities.

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 E 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 from the Australian Taxation Office through their website at: [Australian Taxation Office \(www.ato.gov.au\)](http://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.

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.

This includes with regard to dealing with asbestos. 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

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 at the [feedback facility \(www.dss.gov.au\)](http://www.dss.gov.au) or by email to DSSfeedback@dss.gov.au
- With the Aged Care Complaints Scheme (the Scheme) on phone 1800 550 552 (a free call from fixed lines; calls from mobiles may be charged at a higher rate) or via the [Internet \(http://agedcarecomplaints.govspace.gov.au/\)](http://agedcarecomplaints.govspace.gov.au/). 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
- Clients may also contact the Aged Care Commissioner.

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.

More detailed information is available in the Commonwealth Home Support Programme Performance Framework at [\(insert link when available\)](#).

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 \(www.dss.gov.au\)](http://www.dss.gov.au) for more information".

OR

"Supported by the Australian Government Department of Social Services. Visit [Department of Social Services website \(www.dss.gov.au\)](http://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 ([Insert CHSP email address](#)).

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 at: [Insert link to Guidelines when available](#).

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	31 January	A report on service delivery activities and outcomes.
	1 January to 30 June	31 July	

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.

Fees

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 volume of service outputs specified in the Agreement, but appreciates that some flexibility is needed to accommodate changing client needs.

Within the Community and Home Support Sub-Programme; and Care Relationships and Carer Support Sub-Programme:

- Grant recipients must deliver no less than 80 per cent of the outputs for each funded service type listed in the Programme Schedule
- Grant recipients may use funding that would otherwise be dedicated to the remaining 20 per cent to support the delivery of other needed services within the **same** Sub-Programme.

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 the unrequired Personal Care services to provide additional Nursing services.

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.

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 service providers must provide activity and performance data in line with their Grant Agreement details. As part of a new way of working, the Department is implementing improved programme activity and performance reporting processes in grant agreements.

DSS will progressively introduce standardised, prioritised, and collaborative reporting processes across many of its client-based grants programmes. In line with this process the Department will work towards transitioning Commonwealth Home Support Programme service providers to these new arrangements, including the utilisation of the DSS Data Exchange for data collection and reporting. The Data Exchange is an output-based reporting system but also has the capacity to measure client outcomes. Further details of the DSS Data Exchange can be found on the [Department's website \(https://www.dss.gov.au/grants/programme-reporting\)](https://www.dss.gov.au/grants/programme-reporting).

To support this work the Department will work closely with provider representatives from the National Aged Care Alliance to support Commonwealth Home Support Programme providers' transition to the DSS Data Exchange. This work will include consideration of resources to support providers in utilising this system to meet their reporting and administrative needs.

The Department will provide advice on this performance and activity reporting framework as it applies to the Commonwealth Home Support Programme later this financial year.

Grant administration

Refer to Appendix D 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 providers will need internet access and a suitable internet browser to access the My Aged Care Provider Portal. The Portal will be accessible via Microsoft Explorer, Google Chrome, Safari and Firefox – all current versions and the last two previous versions of these browsers.

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 ongoing evaluation of the Programme.

Appendix A – Grant recipient interactions with My Aged Care

DRAFT

Appendix B – Useful resources

Publications

[Productivity Commission inquiry – Caring for Older Australians](#)

<http://www.pc.gov.au/projects/inquiry/aged-care/report>

Websites

[Commonwealth Department of Social Services](#)

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

[My Aged Care](#)

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

[Australian Taxation Office](#)

<https://www.ato.gov.au/>

My Aged Care is made up of a website and a My Aged Care contact centre (1800 200 422). 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.

[Australian Privacy Principles](#)

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

[Home Care Standards](#)

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

Appendix C – 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>

[Carer Recognition Act 2010](#)

www.comlaw.gov.au/Details/C2010A00123

[Charter of Care Recipients' Rights and Responsibilities for Home Care](#)

<http://www.myagedcare.gov.au/financial-and-legal/rights-and-responsibilities-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>

[Home Care Packages Programme Guidelines July 2014](#)

<https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/aged-care-reform/reforms-by-topic/home-care/home-care-packages-programme-guidelines-july-2014>

[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

[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>

[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>

Appendix D – Contacts

Queensland

Aged Care Assistant State Manager
Queensland State Office, Department of Social Services

Switchboard: (07) 3037 2777

South Australia

Aged Care Assistant State Manager
South Australian State Office, Department of Social Services

Switchboard: (08) 8237 8255

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; 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 Grant 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

Switchboard: (08) 6218 1400

Appendix E – Commonwealth Home Support Programme Police Certificate Guidelines



Australian Government

Department of Social Services

Commonwealth Home Support Programme

Police Certificate Guidelines

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](#).

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. More information about statutory declarations is available at: [Statutory Declarations](#).

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](#). 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](#).

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](#).

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](#).

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](#).

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) Phone: (02) 6202 3333
[National Police Checks](#)

New South Wales Police
Service Phone: (02) 8835 7888
[NSW Police Force](#)

Victoria Police Phone: 1300 881 596
[Victoria Police](#)

Queensland
Police Service Phone: (07) 3364 6705
[Queensland Police](#)

Western Australia
Police Service Phone: (08) 9268 7645
[Western Australia Police](#)

South Australia
Police Phone: (08) 8204 2455
[South Australia Police](#)

Tasmania Police Phone (03) 6230 2928
[Tasmania Police](#)

Northern Territory
Police Phone: 1800 723 368
[Northern Territory Police](#)

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 at ⁴

on ⁵

of ⁶

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 and sustained care and assistance to another person without payment for their caring role other than a pension or benefit. 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.

Term	Definition
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	Cohabiting 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 are information centres that provide free and confidential information on community aged care, disability and other support services available locally, or anywhere within Australia.
Culturally and Linguistically Diverse (CALD)	Clients may be defined as Culturally and Linguistically Diverse where they have particular cultural or linguistic affiliations due to their: <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
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, or who accessed services (perhaps intermittently) at least three times over 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.
Grant Agreement	Grant agreements are performance based, legally enforceable agreements between two or more parties that set out the terms and conditions governing a business relationship. The standard departmental grant agreement includes the Terms and Conditions of aged care funding and the Grant Schedule.
Grant recipient	Grant recipient refers to service providers or organisations funded to provide services under the Commonwealth Home Support Programme.

Term	Definition
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	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.
Lesbian, gay men, bisexual, transgender and intersex people (LGBTI)	People who are lesbian, gay men, bisexual, transgender and intersex people (including people who are perceived to be, or have in the past lived as such).
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	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).
National Aged Care Advocacy Program (NACAP)	The National Aged Care Advocacy Programme is funded by the Australian Government and provides advocacy support and promotes the rights of people who are seeking or are receiving Australian Government funded aged care services.

Term	Definition
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 former National Respite for Carers Program contributed 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.
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; a quality review report; development of an improvement plan; and an annual improvement plan/visit process.
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.

Term	Definition
Regional Assessment Services (RAS)	The My Aged Care Regional Assessment Service (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 <i>My Aged Care</i> , to undertake assessments and identify services appropriate to a diverse range of clients.
Residential respite	Residential respite that is delivered under the <i>Aged Care Act 1997</i> 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 <i>day</i> 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 also 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>
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 men, bisexual, transgender and intersex people (including people who are perceived to be, or have in the past lived as such people who are care leavers • parents separated from children by forced adoption or removal.

Term	Definition
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	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.
WH&S	Work Health and Safety.