

Aged Care Services

*Form H1: Quarterly Return—HACC Funded
Clients*

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Reporting Requirements

Form 113/H1 is used for reporting services delivered out of funds from the Home and Community Care (HACC) Program. Previously this was a monthly collection. It is now quarterly and agencies must complete a single form covering all three months.

Report all the activities that have been funded by the HACC Program and client fees. The collection form lists all the HACC activities (formerly called service types). To decide which of these activities should be reported, check your agency's DHS Service Agreement. The Service Agreement will list all the activities funded by HACC, showing the output targets negotiated for 2000-01. Most agencies have been funded for only a few of the possible activities.

Do not report activities that have not actually been funded by the HACC Program. For example, your agency may be carrying out assessments but not have received HACC funding for this, according to the Service Agreement. In this case, Line 1 on the Collection Form should be left blank.

New Data Item—Outputs Attributed to Client Fees

From 1 July 2000, agencies are asked to report the quantities of HACC services delivered that are attributed to fees raised from clients receiving HACC services. The form has been redesigned with an extra column for this. (Previously these extra HACC outputs were included in the outputs attributed to Commonwealth/State HACC funds. Now they are shown separately.)

The HACC Fees Policy requires fees to be collected from HACC clients (depending on the client's income) in the case of most HACC service types. Generally, the fees collected are used by the agency as a source of funds for extra service delivery. The fees raised from one activity can generally be allocated to expanding the same or another activity (details will be recorded in your Service Agreement with DHS). Exceptions to note:

- Assessment and Care Management—Fees are not to be charged. However, fees raised from other activities can be used to expand Assessment and Care Management.
- Delivered Meals—Fees collected from clients should be used to defray the cost of the meal, and are not to be spent on providing additional meals or other HACC activities.
- Linkages—Fees collected from Linkages clients are to be used for service enhancement for Linkages clients, and not to fund additional packages.
- Volunteer Coordination—No fees are to be charged for services provided solely by volunteers, such as Friendly Visiting. Fees raised from other activities cannot be used to expand Volunteer Coordination.
- If an agency collects only a small amount of fees, the money can be used for service enhancement rather than expansion, if the DHS regional office agrees. This must be documented in the Service Agreement. Such fees should not be reported in this quarterly return, but will be reported in the annual acquittal form.

Details are in the full *Guidelines for the HACC Program's Quarterly Output Data Collection*, available from the Aged, Community & Mental Health Division, DHS, 10/555 Collins Street, Melbourne. They are also available on the Department's web site for the Primary Health Knowledge Base www.dhs.vic.gov.au/phkb.

Return of Forms

The HACC Output Data Collection will be quarterly from 1 July 2000. Hospitals are to submit electronic data to the Department by the *15th day following the end of the quarter*.

Rural hospitals are to submit data to their regional office via email or diskette.

Hospitals in the metropolitan regions are to send data to the Management Information Unit, Acute Health using one of the following methods:

- email: send to aimsmail@aims.dhs.vic.gov.au
- diskette: send to AIMS Collection Officer, Management Information Unit, Acute Health Division, 4/555 Collins Street, Melbourne, 3000, or
- modem: contact Management Information Unit Helpline 9616 8595 to obtain the modem number.

Printouts of the original signed forms must be retained by the hospital and be available to officers of the Department upon request.

Correction of Forms

Where an error is detected for any data item previously submitted to the Department, then a correction must be submitted. A correction can be made at any time. The AIMS Agency Module transmits all data for the current financial year, that is, from July onwards, therefore if a correction is made to the July data whilst preparing the October return, it will be resent with the October export file.

Output 113	Aged Care Services
Form H1	Quarterly Return—Home and Community Care Program

Instructions for Completing Form H1/113

Hospital, Agency

The registered name of the metropolitan health service or public hospital and the hospital site/campus that is submitting the return.

Agency Code

The AIMS identification number of the agency submitting the return. For example, the code for Maryborough District Health Service is 3312.

Month, Year

Calendar month and year for the return being prepared.

HACC Activities and Measurement Units

The recurrent HACC activities (service types) and units of measure to be included in the output data collection.

Number of Individuals Assisted

A client is a person directly assisted with HACC services by the hospital. The number of individuals is a count of clients serviced by the hospital during the month. Each client is to be counted once only. That is, if the same person received a nursing visit on three occasions during the month, you count them as one individual.

Hours of Direct Client Contact

The unit of service defined for most service types is an hour of direct client contact. In most cases, it records the total time used in direct service delivery only and excludes staff travel time incurred in getting to or from a person's home. Hours recorded would usually correspond to the amount of time for which a client was invoiced.

For linkages services, hours should include all hours of linkages-funded direct services provided to clients (both provided by hospital direct or purchased for the client) plus case-management.

Number of Assessments

This is the total number of times an assessment has been received by clients from the hospital during the month of reporting. An assessment is defined further below. It is not merely an initial assessment of eligibility to receive HACC services, nor merely an assessment of the ways in which the hospital can respond to a person's identified needs (although this latter type of assessment may often be a part of a comprehensive assessment).

Number of Meals

Number of meals is used only in delivered meals. Count only those meals eligible for a HACC subsidy, whether delivered to a client's home or in a centre. Do not count meals provided during a day centre activity.

Average Individuals (Linkages)

Average Individuals (Linkages) means the average number of clients who were provided linkages-funded services on any day during the month. This can be calculated as the total number of clients who were provided with a least one linkages-funded service on any day during the month, divided by the number of days in the month. For instance, if two clients are provided linkages-funded services for 30 days in a month of 30 days, and three clients are provided services for 20 days in the same 30 day month, the average individuals recorded should be 4. ($2 \times 30 = 60$ plus $3 \times 20 = 60$, total 120 days and then divide by 30 days = 4 clients average per day).

Volunteer Coordinator Hours

Some services are predominantly about the coordination of volunteers. For these services, the unit of service is a 'coordination hour'. That is, all hours of work by a volunteer coordinator in coordinating, administering or managing volunteers for the specified HACC service. This applies to the following services:

- Respite—Volunteer Coordination (mainly Interchange)
- Social Support—Volunteer Coordination

Person Hours

For Planned Activity Groups, the unit of service is the 'person hour'. It is the hours of *direct* service received by the clients and excludes time spent travelling to and from the group or its regular venue. The amount of hours is calculated on a per-person basis and is *not* equivalent to the opening hours of the venue. For instance, if three clients attend the session for four hours and two clients attend for three hours, you should record a total of 18 person hours ($3 \times 4 = 12$) + ($2 \times 3 = 6$).

Equivalent Full Time (EFT) Positions

Full Time Equivalent Staff means the total number of hours worked by staff in an ordinary week divided by 38 or the normal hours as specified in the relevant industrial award.

Total Number of Separate Individuals Assisted in the Month

Record the number of individuals provided with services during the month for which the return is prepared. On occasions, a client could be receiving multiple services from the same hospital. It is important that an individual person is counted only once for the month of the return, regardless of the number of times that client was provided services or the number of services that client received during the month.

Form 113/H1 Data Items

Assessment & Care Management

Assessment and Care Management is an activity that can include:

- Holistic assessment of an individual's need for community support services. Needs for both HACC and non-HACC services are identified, plus an assessment of strengths and abilities.
- Development and implementation of a care plan.
- Monitoring the effectiveness of the care plan in meeting the person's needs.
- Regular review and re-assessment of the person's needs.

Only Assessment and Care Management services purchased by the HACC program should be reported. Record the accumulated whole hours of services delivered during the three month period.

Record four data items:

- the number of separate individuals assessed or care managed,
- the hours spent doing assessment and care management, attributed to Government HACC funds,
- the hours of assessment and care management attributed to fees raised from HACC clients,
- the number of assessments completed.

Health Care and Support—Nursing

Nursing comprises professional nursing care provided by a registered nurse who is employed in a nursing capacity. Services include direct clinical care such as catheter and colostomy care, oxygen therapy, medication, injections and dressings, clinical assessment and the provision of education and information. Nursing may be provided either at home or in a centre. Record the accumulated whole hours of services delivered during the three month period.

Record three items:

- the number of individuals provided with nursing,
- the hours of nursing provided, attributed to Government HACC funds,
- the hours of home nursing provided, attributed to fees raised from HACC clients.

Health Care and Support—Allied Health

This activity includes six paramedical disciplines and professions, namely podiatry, physiotherapy, occupational therapy, speech pathology, dietetics and trained counselling (social worker or psychologist). Record only those allied health services funded by HACC. Record activities in the nature of clinical assessment, treatment, therapy or professional advice.

Allied health services may be provided in either at home or in a centre. One hour spent with an individual client and a one-hour group session are both recorded as one hour of service. If two allied health workers jointly run a group for one hour, record two hours of service.

Record three items:

- the number of individuals provided with allied health services,
- the hours of allied health provided, attributed to Government HACC funds,
- the hours of allied health services provided, attributed to fees raised from HACC clients.

Health Care and Support—Delivered Meals

Record this activity only if your agency has received a HACC subsidy for delivered meals. Count only those meals eligible for a HACC subsidy, whether delivered to a client's home or served in a centre.

Do *not* count meals serviced during a planned activity group. These meals are not eligible for the delivered meal subsidy because the cost of meals is already included in the unit price of planned activity groups.

Record two items:

- the number of separate individuals supplied with HACC subsidised meals,
- the number of meals delivered during the three month period.

Home Care

Home Care services can include vacuuming, cleaning, dishwashing, making beds, laundry, ironing, shopping, bill paying and meal preparation, plus some cyclical tasks such as spring cleaning.

Record three items:

- the number of individuals provided with home care services,
- the hours of home care provided, attributed to Government HACC funds,
- the hours of home care services provided, attributed to fees raised from HACC clients.

Property Maintenance

This refers to assistance with maintenance and repair of the client's home, garden or yard to keep their home in a safe and habitable condition. Examples are minor repairs to the dwelling, changing light globes, replacing tap washers, carpentry and painting, unblocking drains, replacing guttering, lawn mowing and the removal of rubbish. Home modification refers to assistance with modifications or renovations to the client's home to help them cope with a disabling condition. Examples are the installation of grab rails, ramps, shower rails, special taps and emergency alarms.

Record three items:

- the number of separate individuals provided with property maintenance (and modification) during the three month period, attributed to Government HACC funds,
- the number of separate individuals provided with property maintenance (and modification) during the three month period, attributed to client fees,
- the accumulated whole hours of service provided to all individuals.

Personal Care

Personal Care describes assistance with tasks which a person would normally do for themselves but which because of illness, disability or frailty they are unable to perform

without the assistance of another person. Examples of personal care are bathing, dressing, grooming, toileting, assisting with getting in and out of bed, and assistance with mobility and eating.

A person attending a planned activity group may require assistance with going to the toilet or getting in and out of a chair. Do not record this as personal care since it should be recorded as part of the output for the planned activity group.

Record three items:

- the number of individuals provided with personal care services,
- the hours of personal care provided, attributed to Government HACC funds,
- the hours of personal care services provided, attributed to fees raised from HACC clients.

Respite—Home and Community

The purpose of respite services is to support the caring relationship by providing carers of frail older people and people of any age with a disability, with a break from their caring responsibilities. Respite can be provided in a consumer's home or in the community. It can be provided in the form of planned regular respite, emergency respite, crisis respite, and occasional respite. It may involve the substitute carer accompanying both the usual carer and the care recipient on an outing or holiday.

For the purposes of this data collection, the client in a respite service is the frail or disabled person, not the family carer.

Record three items:

- the number of individuals provided with respite services,
- the hours of respite provided, attributed to Government HACC funds,
- the hours of respite provided, attributed to fees raised from HACC clients.

Respite—Overnight

Overnight respite is provided in the home of a client or paid carer in a 10-hour block. It includes occasions where the worker sleeps overnight, while being available to respond to a call for assistance.

Where the client requires *regular* assistance at night, and therefore the worker cannot normally be sleeping during the shift, the appropriate activity to purchase is Respite—Home & Community, or Personal Care.

Record three items:

- the number of individuals provided with overnight respite services,
- the hours of overnight respite provided, attributed to Government HACC funds,
- the hours of overnight respite provided, attributed to fees raised from HACC clients.

Note that overnight respite is purchased by DHS in 10-hour blocks. One 10-hour block should be recorded as 10 hours.

Volunteer Coordination

The types of service funded through volunteer coordination are respite (including the host carer program provided by Interchange for families of children with disabilities), friendly visiting, telelink, carer support programs, and stand-alone transport services that use volunteer drivers.

Definition of hours to be reported:

In column 3 of the form (number of hours attributed to government HACC funds) you should report the accumulated hours of unpaid work done by volunteers who assist in providing a range of services such as friendly visiting, providing transport to clients, providing respite care to families of children with disabilities, or to frail older people, either in the volunteer's home or in the home of the older person.

In Column 5 (headed 'coordinator hours') you should report the accumulated hours of paid employment by a volunteer coordinator spent on recruiting, training and coordinating volunteers for the specified HACC service.

Record three data items:

- The number of individual clients assisted by the volunteers (*not* the number of volunteers).
- The total number of whole hours of services received by clients through the unpaid work of volunteers. One hour spent with an individual client and a one-hour group session with one volunteer are both recorded as one hour. If two volunteers jointly run a group, record two hours.
- The number of whole hours of paid work performed by a person employed in volunteer coordination during the three month period.

Flexible Service Response

Formerly called 'Innovative Service Response', this activity type will vary according to your agency's service agreement with DHS. This activity is not funded by output, but has nevertheless been included in the data collection for planning purposes. Two types of service funded under the category of flexible service response are reported in other DHS data collections. These are community connections projects (accommodation support) and the HACC response service. Do not report them here.

Record three items:

- the number of individuals provided with direct services,
- the hours of provided, attributed to Government HACC funds,
- the hours of services provided, attributed to fees raised from HACC clients.

Planned Activity Group

Planned Activity Groups focus on maintaining an individual's ability to live at home and in the community, by providing a planned program of activities directed at enhancing skills required for daily living. These activities also provide opportunities for support and social interaction as well as respite and support for carers. The group may meet in a centre, at a local venue, or go on outings.

Note: Planned Activity Groups is an activity type that subsumes two former types—Centre Based Group Activity and Community Based Group Activity.

For Planned Activity Groups, the unit of service is the *person hour*. It is the hours of *direct* service received by the clients and excludes time spent travelling to and from the group or its regular venue. The amount of hours is calculated on a per-person basis and is *not* equivalent to the opening hours of the venue. For instance, if three clients attend the session for four hours and two clients attend for three hours, you should record a total of 18 person hours ($3 \times 4 = 12$) + ($2 \times 3 = 6$).

A Planned Activity Group may have received HACC funding to deliver a mixture of two kinds or levels of activity. In case of doubt, the DHS service plan should be consulted to determine what output targets have been agreed.

- 'Core' person hours are defined as hours of service devoted to clients who are physically relatively independent and do not require specialist dementia care or personal care to participate in the activities.
- 'High' person hours are defined as hours of service devoted to clients who require assistance with personal care and/or who require specially trained staff for moderate to severe dementia care, and/or who have behaviour management problems.

Record three items:

- the number of individuals provided with services,
- the number of person hours provided, attributed to Government HACC funds,
- the number of person hours provided, attributed to fees raised from HACC clients.

Linkages

Linkages (or Community Options) is a service based on case management with the availability of brokerage funds for purchase of additional services for consumers whose needs cannot be met by mainstream HACC services.

Record the number of separate individuals who were provided Linkages funded services or equipment during the three month period.

In counting the number of whole hours of Linkages service, you should include hours of case management, hours of service provided directly by your agency, and hours of service purchased by your agency but provided by another.

Linkages packages is the number of packages (if any) which your agency has been funded to deliver, as at the time of reporting. The number will be found in your agency's DHS service agreement or variations.

Record three data items:

- the number of separate clients assisted during the quarter;
- the number of whole hours of direct service to clients,
- the number of Linkages places that your agency was funded to provide during the quarter.

Service System Resourcing

Service System Resourcing is a category for recording activities that assist service providers to better meet the needs of all people in the HACC target group and to assist consumers to gain better access to those HACC services that are relevant to their needs. It covers services that use advocacy, training and information to improve the service system and to ensure it is responsive to all HACC consumer groups. It includes maintenance grants for Senior Citizens Centres (but quarterly data returns are *not* required for Senior Citizens Centres). It generally includes the funds used to employ Community Service Officers (CSOs), but some CSOs are attributed to Assessment & Care Management (check your DHS Service Plan).

Equivalent Full Time Staff means the total number of hours worked by staff in an ordinary week divided by 38 or the normal hours as specified in the relevant industrial award.

Record the total number of HACC-funded Equivalent Full Time staff, such as community service officers, who worked in Service System Resourcing during the three month period.

Total Number of Separate Individuals Assisted

In order to gain an accurate picture of the number of people assisted by the HACC program, this item is used to record the number of individuals provided with services during the three month period. Since a single client could have received more than one HACC service on more than one occasion during the three month period, it is important to avoid double counting, regardless of the number of times that client was provided services or the number of services that client received.

Record the number of individuals who received any kind of HACC-funded service from your agency during the three month period.

Blank Lines

Lines 20 to 21 of the form have been left blank. They are intended to be used for new activities defined during 2000–2001. Instructions will be provided if this occurs.

Signature of Chief Executive Officer and Date

The hospital's Chief Executive Officer should sign and date each form submitted, acknowledging the data contained on the form and the accuracy of these data.