

# **Home and Community Care (HACC) Program**

## **Eastern Metropolitan Region Annual Plan 2007-08**

The HACC Program in Victoria is supported by funding from the Australian and Victorian Governments.

## 1. Introduction

The Commonwealth and Victorian Governments have signed a new HACC Agreement that came into effect 1 July 2007. The Review Agreement introduces Triennial Planning for Home and Community Care (HACC) growth funding across Australia. The initial Triennium will be 2008-11 with the first Triennial Plans due in March 2008. The transition to Triennial Planning will take place over 2007-08 and a review of resource allocation methods and expenditure priorities for the new national triennium will take place.

This document sets out how the Region allocated 2007-08 HACC growth funds on the basis of the strategic directions identified in the **Regional Triennial Plan 2006-09 (Triennial Plan)**. The Region analysed funding per capita (\$pcf), service provision, demographic data, research/evaluation reports in drawing conclusions on how best to allocate HACC growth funds in alignment with the Triennial Plan.

The draft Eastern Metropolitan Region Annual Plan 2007-08 (23 July 2007) was used as a basis for consulting with service providers and other stakeholders about the proposed 2007-08 funding allocations.

## 2. Broad HACC Program Directions

Considerable progress is being made with key 'The Way Forward' reforms in consultation between the Australian Government and the Victorian State Governments. Work is being progressed in the areas of 'Access Points' and the ACCNA & CENA assessment tools (as part of the HACC Assessment Framework and SCoTT) and how these elements may be designed for the most effective local level implementation through two proposed 'Access Point Demonstration Sites', namely in the Eastern and Grampians Regions of Victoria. The outcomes of these Demonstration Sites are expected to inform how Victoria may implement better access to service strategies into the future and may consequently form part of the broader HACC consultations and planning in the next HACC Triennium.

In 2007-08, the HACC Program in Victoria will continue with the initiatives set out in the 2006-09 Regional Triennial Plans.

### 2.1 Assessment

The new Framework for Assessment in the HACC Program in Victoria has been finalised and is available on the Victorian HACC Program web site at [www.health.vic.gov.au/hacc/assessment.htm](http://www.health.vic.gov.au/hacc/assessment.htm)

The Victorian HACC Assessment Framework sets out the revised program policy for Assessment as a HACC funded activity. It details the requirements for the delivery of **Living at Home Assessments** that include home-based holistic assessment of need and service-specific assessments as key components.

- **Assessment Framework Implementation**

Implementation will occur over a two-year period.

The first step is to formally identify HACC organisations that are currently funded for Assessment and that have the commitment and capacity to meet the criteria to deliver Living at Home Assessments. The criteria for designating HACC Assessment Services are detailed in Part 3 of the Framework. This process will occur between July and December 2007.

Once a group of organisations that are designated HACC Assessment Services is established, work with these organisations (and other relevant organisations) will continue to develop the next key pieces of work in the implementation process. These are:

- The development of a funding model for Living at Home Assessments – this work has already begun and should be completed within a year

- Developing a HACC Assessment tool based on national and state screening tools (Australian Community Care Needs Assessment and the Victorian Service Coordination Tool Templates)
- Continue to work on a Professional Development Strategy for HACC Assessment staff
- Develop and pilot the Supported Access activity in order to support Culturally and Linguistically Diverse (CALD) and Aboriginal and Torres Strait Island (ATSI) clients to access mainstream services.

### ***Growth Funding for Assessment***

Growth funding will be allocated to Assessment in 2007-08 and subsequent years as the Assessment Framework is progressively implemented.

Allocations to LGA will be considered as part of the regional planning process and allocations to organisations within LGAs will be recommended as the designation process is finalised.

The Triennial Plan identified that funding would be provided to EMR LGAs in 2007-08 to move towards the alignment of Assessment pcf within EMR. Growth funding provided in 2007-08 for Assessment is for this purpose only. The Region has considered the assessment allocation in light of timelines and the developmental work that still needs to be undertaken regarding the implementation of the 'Framework for Assessment in Home and Community Care in Victoria' (the Assessment Framework). Complete implementation of the Assessment Framework is expected to take several years.

It is proposed that some pilot funding will be made available to organisations across the State to model and implement the Assessment Framework. This process is planned to commence in early 2008.

EMR proposes to allocate growth funding in 2008-09 to designated assessment organisations, following initial developmental work on the Assessment Framework.

#### **2.1.1 Access Points Demonstration**

EMR is one of only two regions state-wide to be selected to participate in the Access Points Demonstration project (the other demonstration project region is the Grampians Region). The Access Point Demonstration project aims to simplify entry to services and assessment process for the HACC program. The scope of the Access Point Demonstration project is limited to the HACC program, other State funded Aged Care Programs and Commonwealth funded community care programs.

The project will be led by the HACC Program and the Outer East Primary Care Partnership. A Steering Committee is being established to guide the progressive development of the Access Point Operational Plan and implementation of the project by December 2007. The Steering Committee will be comprised of health sector representatives from the outer east primary care partnership catchment. The Access Point Demonstration project has a current timeline of two years.

#### **2.2 Active Service Model**

The Active Service Model initiative aims to incorporate more capacity building, adaptive or restorative approaches to HACC service delivery to increase clients' ability to continue to maintain themselves and perform activities of daily living.

The key steps for 2007-08 are:

- Working with LaTrobe University to conduct a Literature Review and Model Identification project and explore implementation issues for Victoria. This will include consultation with academics, researchers and the sector in August/September 2007.
- Working with the Commonwealth, States and Territories to develop and implement a national policy focussed forum to explore the evidence base and implications of incorporating wellness, capacity building and restorative approaches to HACC service delivery. The Promoting Independence Forum will take place on February 21-22 2008 to

an invited range of key stakeholders from the academic and research, government and service provider sectors.

- Applying ASM principles through the implementation of the HACC Assessment Framework.
- Continuing to support and learn from a number of ASM pilots.
- Developing a policy document to present to Minister(s) by June 2008.

The Triennial Plan identified that funding would be allocated in 2007-08 and 2008-09 within each LGA to assist with the implementation of the ASM. However, as detailed under point 2.2, the development of a policy position is now anticipated in June 2008. In 2007-08, the funding that was tentatively allocated for selected LGAs in the Triennial Plan will now be redirected into HACC Basic Services in those LGAs. Funding identified for selected LGAs in the Triennial Plan for implementation of the ASM in 2008-09 will need to be reviewed in light of the development of a new Triennial Plan, as well as the progress of the ASM project. It is proposed that growth funding will be allocated to each LGA in EMR to assist in the implementation of the ASM.

### 2.3 Social Support

Social support programs have been a part of HACC since its inception in 1985. They have remained largely unchanged. A review of the provision of social support funded by the HACC Program was forecast in the 2006-09 Triennial Plan. The Review will be launched mid 2007 through a series of regional consultations to enable stakeholders to raise issues. The results of these consultations will inform the scope of the review. For the purposes of the Review, social support includes: respite, planned activity groups and volunteer coordination, which includes friendly visiting and transport provided by volunteers.

#### ***Growth Funding for Social Support***

In 2007-08 the priority for social support is a maximum service expansion for Planned Activity Groups of 5% across Priorities 1&2.

### 2.4 Priority 1

The Victorian HACC Priorities Statement 2006-09 recommended that all metropolitan regions move towards a per capita funding amount of \$523 by the end of the Triennium. EMR examined the per capita funding of the seven LGAs and ascertained that the LGAs of Knox and Monash were most removed from the per capita funding benchmark.

The LGAs of Manningham, Maroondah and Whitehorse were closer to the funding per capita whilst Boroondara and Yarra Ranges were over the funding per capita, being \$569 and \$625 respectively.

In 2006-07, EMR enhanced the per capita funding in the LGAs of Monash and Knox. This growth in per capita funding continued for these two municipalities in 2007-08, to move these LGAs towards a per capita funding of \$523.

The following table identifies the intended movement in per capita funding by LGA from 2006-07 and 2007-08.

LGA	pcf (\$) 06-07 – Pre-Growth	pcf (\$) 06-07 – Post Growth
Boroondara	569	581
Knox	414	445
Manningham	445	474
Maroondah	480	497
Monash	434	449
Whitehorse	455	474
Yarra Ranges	625	639

In 2007-08, EMR expanded funding to PAGs to CALD communities in the LGAs of Whitehorse and Knox. EMR intends to undertake a submission process for the establishment of a new or expansion of existing PAG in these areas. The process will occur following Ministerial approval of this Plan.

In 2007-08, EMR allocated **95%** of growth funding to Priority 1, to meet demand, continue growth of HACC Basic Services and strengthen Allied Health.

In 2007-08, EMR will commence work on an innovative Access and Equity Dementia Project; funded through existing Access and Equity funds. The project will encourage and support people with dementia to participate in PAGs. It is anticipated that this initiative will provide carers with an opportunity for respite. The project will initially be implemented in the LGAs of Boroondara, Monash and Whitehorse. The project may be expanded to the remaining EMR LGAs following the successful development of the service model and appropriate protocols and procedures to support the project.

## **2.5 Priority 2 – CALD Access to HACC Services**

The aim of Priority 2 was to improve access to services for people from CALD backgrounds. This is core business for the HACC Program in a State where over 21% of the aged population speaks a language other than English. It is imperative that integration of the lessons learned from the diverse range of projects that constituted Culturally Equitable Gateways Strategy (CEGS) are assimilated into general service provision.

Over 2007-08, Regions will work towards incorporating the lessons learnt from CEGS into all organisations, implementing the outcomes of the evaluation of the Cultural Planning Strategy and undertaking a comprehensive review of the current CALD initiatives funded through HACC to ensure a more co-ordinated strategy for improving access.

In 2007-08, the focus for Priority 2 continues to be on expanding social support. The Review of Social Support planned for 2007-08 will further inform the planning process for social support, respite and volunteer co-ordination in the future.

In EMR, in 2007-08, **5%** of growth funding has been targeted to establish new PAGs provided by ethno-specific community sector organisations (CSOs) to CALD communities in the LGAs of Whitehorse and Knox. Both LGAs are under represented in PAGs targeting the CALD communities.

## **2.6 Priority 3 – More Services and Improved Access for Aboriginal People**

Where there is a demonstrable need and in line with the Strengthening HACC in Aboriginal Communities Strategy, regions have considered the expansion of local services to support Aboriginal communities.

Over 2007-08, the work of Strengthening HACC in Aboriginal Communities (SHAC) will continue. The Strategy aims to improve access for eligible Aboriginal people to a range of HACC services, improve cultural appropriateness of service responses from generic providers and ensure sustainable HACC services are available to Aboriginal communities.

### **The following themes are key areas for development by the department:**

- A client centred approach: improving service coordination between Aboriginal and generic providers by funding service coordination training and networking forums at the local level
- Capacity building: support Aboriginal organisations to develop the capacity to assist clients in navigating the service system
- Model development: identify sustainable models of HACC service delivery based on the needs of each local Aboriginal community.

In 2006-07, EMR allocated funding to expand existing PAGs to Aboriginal clients as well as assisting Aboriginal organisations to act as a gateway to the broader HACC service system.

The Triennial Plan identified that growth funds would be allocated in 2007-08 to grow in-home support services to Aboriginal clients in the Shire of Yarra Ranges. A range of issues has meant that funding will not be required in 2007-08 and therefore this funding will be redirected into HACC Basic Services. Additional funding to Priority 3 will be reviewed in 2008-09.

The Triennial Plan also identified that funding would be provided in 2007-08 to create a HACC Aboriginal Liaison Officer Position. This position would aim to increase the understanding and use of HACC mainstream services by the Aboriginal community, specifically focusing on increasing the use of Domestic Assistance by Aboriginal HACC eligible clients. The implementation of this project has been delayed and growth funding has not been allocated to this project in 2007-08. However, growth funding may be considered for this project in 2008-09.

Funds tagged for this project in 2007-08 will be redirected into HACC Basic Services across LGAs.

### 3. Consultation

For the 2007-08 financial year, EMR emailed the draft 2007-08 Plan to all regional HACC funded organisations with a copy to the Commonwealth. Discussions were also held with Community Health Services and meetings with individual councils. The consultation period occurred in early August 2007. All organisations were encouraged to review the draft plans and provide feedback.

#### Consultation Outcome

Two organisations provided minor comment on the draft plan relating to funding for social support and respite services. Others were in agreement with the proposed allocations.

### 4. Budget Allocation by Regions

The funding available to regions for service expansion in 2007-08 was adjusted to accommodate additional funding to price indexation, allocations to statewide organisations and administration. The most significant allocation of additional funds was to price indexation.

In 2007-08 the Commonwealth indexation rate was 2.3% and the Victorian Community Service Organisation (CSO) indexation rate was 2.9%. Significant pressure has grown on HACC organisations from the low indexation rate allowed by the Commonwealth. The Minister and the department recognise this and as a consequence the Minister has made a decision to match the CSO indexation rate of 2.9% in HACC. A topslice from matched growth funding of \$1.2m, was approved by the Commonwealth, and transferred to indexation with the difference being allocated from State funds.

Region	Allocation of matched growth funds 2007-08
Barwon South West	\$1,368,974
Gippsland	\$1,495,468
Grampians	\$594,132
Hume	\$790,512
Loddon Mallee	\$740,229
Eastern Metro	<b>\$2,468,631</b>
Southern Metro	\$3,175,927
North West Metro	\$5,952,127
<b>TOTAL</b>	<b>\$16,586,000</b>

## 5. 2006-09 Proposed Distribution

### 5.1 Indicative regional distribution of growth by LGA

Service Region	LGA Name	Regional Preference
Eastern Metro Region	Boroondara (C)	\$15,265
	Knox (C)	\$542,124
	Manningham (C)	\$637,364
	Maroondah (C)	\$170,216
	Monash (C)	\$536,890
	Whitehorse (C)	\$566,772
	Yarra Ranges (S)	\$0
	Eastern Metro Region	\$0
<b>Eastern Metro Total</b>		<b>\$2,468,631</b>

\* excludes State contribution to price.

### 5.2 Comparison to Proposals in 2006-09 Triennial Plan

In 2007-08, the level of growth funding allocated against Priority 3 was reduced, whilst the level of funding provided against Priority 1 increased slightly. Funding may be provided in 2008-09 to support the expansion of Priority 3 activities in the Region, contingent upon reviews of the Priority 3 project developments during 2007-08.

In 2006-09 EMR proposed the following distribution of growth funding:

LGA Name	Year 2 Indicative allocations			
	Proportion of funds to Priority 1	Proportion of funds to Priority 2	Proportion of funds to Priority 3	Total % growth to LGA
Boroondara (C)	2%		4%	2%
Knox (C)	19%	51%	11%	20%
Manningham (C)	28%		6%	27%
Maroondah (C)	5%		11%	5%
Monash (C)	22%		6%	20%
Whitehorse (C)	22%	49%	12%	23%
Yarra Ranges (S)	2%		50%	3%
Eastern Metro Region				
	100%	100%	100%	100%

In 2007-08 the Region allocated growth funds to the following LGAs and priority.

LGA	% of funds to Priority 1	% of funds to Priority 2	% of funds to Priority 3	Total growth % by LGA
Boroondara (C)	0.62%			0.62%
Knox (C)	19.39%	2.57%		21.96%
Manningham (C)	25.82%			25.82%
Maroondah (C)	6.98%			6.89%
Monash (C)	21.75%			21.75%
Whitehorse (C)	20.53%	2.43%		22.96%
Yarra Ranges (S)	0%			0%
Eastern Metro Region	0%			0%
<b>TOTAL</b>	<b>95.01%</b>	<b>5.00%</b>	<b>0%</b>	<b>100%</b>

### 5.3 2007-08 Regional Allocations

#### Summary of Allocation by Priority

In 2007-08, the focus on funding allocation is on equity in line with the Victorian HACC Program Expenditure Priorities Statement 2006-09. EMR aims to improve equity within the Region, with a particular focus on LGAs furthest from equity. This allocation will boost services in Knox, Manningham, Maroondah, Monash and Whitehorse.

In 2007-08, EMR has continued to grow PAG services to CALD communities to a maximum of 5% of growth funding.

LGA	Priority 1 \$**	Priority 2 \$**	Priority 3 \$	Total \$ by LGA**
Boroondara (C)	\$15,265			\$15,265
Knox (C)	\$484,189	\$63,661		\$547,850
Manningham (C)	\$640,483			\$640,483
Maroondah (C)	\$172,497			\$172,497
Monash (C)	\$543,163			\$543,163
Whitehorse (C)	\$508,460	\$60,102		\$568,562
Eastern Metro Region	\$0			\$0
<b>TOTAL *</b>	<b>\$2,364,058</b>	<b>\$123,763</b>		<b>\$2,487,821</b>

\*includes State contribution to price

\*\*Funds have been rounded to the nearest \$.

#### Regional Summary of allocations

EMR growth funding allocations for activities in 2007-08 was based on data that identified the need to grow HACC Basic Services. This position was documented in the EMR Triennium Plan. The growth funding allocations (in all activities other than Service System Resourcing and Respite) will move per capita funding per activity closer to the statewide per capital funding benchmark.

In 2007-08, growth funding for Respite has been allocated to one LGA to meet exceptional, long-term, unmet demand for Respite services to HACC eligible clients.

Activity	Priority 1		Priority 2		Total by Activity	
	Growth Units	Growth \$**	Growth Units	Growth \$**	Growth Units	Growth \$**
Allied Health	6,534	\$514,095			6534	\$514,095
HACC Assessment		\$356,793				\$356,793
Domestic Assistance	11,364	\$304,555			11,364	\$304,555
Nursing Public Sector	6,112	\$440,064			6,112	\$440,064
Nursing Non Public Sector	2,466	\$164,334			2,466	\$164,334
Personal Care	8,946	\$274,016			8,946	\$274,016
Property Maintenance	3,548	\$138,301			3,548	\$138,301
Respite	6,208	\$171,899			6,208	\$171,899
Planned Activity Group - High			8068	\$123,763	8,068	\$123,763
Service System Resourcing						
<b>TOTAL *</b>		<b>\$2,364,058</b>		<b>\$123,763</b>		<b>\$24,878,210</b>

\*Includes State contribution to price

\*\*Growth funds have been rounded to the nearest dollar

## Allocation of Growth Funds by Priority by LGA

LGA	Activity	Priority 1		Priority 2	
		Growth Units	Growth \$**	Growth Units	Growth \$**
Boroondara	HACC Assessment		\$15,265		
Knox	HACC Assessment		\$68,141		
	Domestic Assistance	1,398	\$37,466		
	Nursing – Public Sector	1,424	\$102,528		
	Personal Care	2,054	\$62,914		
	PAG - High			4,150	\$63,661
	Property Maintenance	1,058	\$41,241		
	Respite	6,208	\$171,900		
Manningham	Allied Health	1,802	\$141,781		
	HACC Assessment		\$68,613		
	Domestic Assistance	3,320	\$88,976		
	Nursing – Public Sector	1,862	\$134,064		
	Nursing – Non Public Sector	1,862	\$124,084		
	Personal Care	1,772	\$54,276		
	Property Maintenance	736	\$28,689		
Maroondah	HACC Assessment		\$40,571		
	Domestic Assistance	1,686	\$45,185		
	Nursing – Public Sector	620	\$44,640		
	Personal Care	952	\$29,160		
	Property Maintenance	332	\$12,941		
Monash	Allied Health	2,366	\$186,157		
	HACC Assessment		\$71,008		
	Domestic Assistance	3,906	\$104,681		
	Nursing – Public Sector	1,604	\$115,488		
	Personal Care	1,070	\$32,774		
	Property Maintenance	848	\$33,055		
Whitehorse	Allied Health	2,366	\$186,157		
	HACC Assessment		\$93,195		
	Domestic Assistance	1,054	\$28,247		
	Nursing – Public Sector	602	\$43,344		
	Nursing – Non Public Sector	604	\$40,251		
	Personal Care	3,098	\$94,892		
	Property Maintenance	574	\$22,375		
	PAG - High			3,918	\$60,102
<b>Total *</b>			<b>\$2,364,059</b>		<b>\$123,763</b>

\*includes State contribution to price

\*\*Funds have been rounded to the nearest dollar

## 6. Research and Development

In the Triennial Plan, the Region proposed to utilise service development grants to support organisations to implement recommendations from the statewide initiatives on the HACC Assessment Framework and the Active Service Model. However, the implementation of the new HACC Assessment Framework indicates that additional funding to support organisations with the implementation may not be required until the 2008-09 financial year.

In addition, and as highlighted above in point 2.2, the Review of the Active Service Model will now commence in mid/late 2007, therefore, funding previously tagged to support the implementation of this initiative will not be required during the 2007-08 financial year.

EMR will utilise the 2007-08 service development funds to assist HACC funded CSOs to improve their continuous quality improvement practices. This specific activity has been requested by many smaller HACC funded organisations within the Region. It aims to provide skills and a model to assist organisations to continually improve service standards and guidelines as required in the National Standards Instruments. EMR will seek expressions of interest from selected organisations to manage this project. It is anticipated that the project will commence in early 2008.

## **Attachment 1. Explanation of HACC growth allocations to LGAs in 2007-08**

In 2007-08 funding available for service expansion was adjusted to accommodate additional funding to price indexation (\$1.2m from matched growth funding, approved by the Commonwealth, with the balance from State only funds), allocations to statewide organisations (\$150k) and administration (\$400k).

The HACC growth funding allocated to local government areas (LGAs) in 2007-08 was determined as follows.

Regional allocations were determined according to the HACC equity model, which calculated the amount of funding needed for each region to reach the relevant 2009 benchmark. Then these were reduced – “topliced” - to meet the above noted program commitments.

From the resulting regional totals, LGA allocations were calculated by reference to current funding levels and equity goals.

The aim of modelling at LGA level was to meet two objectives:

- Firstly, to ensure that changes over time, particularly growth, in the HACC target population in each LGA were taken into account. If the target population of a particular LGA was projected to grow, it was necessary to ensure that its share of growth funds kept pace. The ‘target population’ was calculated as the number of people aged 70 plus and the number of younger people with disabilities.
- The second objective was to ensure that the Minister’s commitment to improving equity in the allocation of HACC funds, in terms of dollars per person in the HACC target population, was advanced. The commitment is to move all regions towards the benchmarks of \$598 per capita in rural regions and \$523 per capita in metropolitan regions.

These results were then compared with the previous year’s allocation of growth funding, and were adjusted according to particular local circumstances, including organisation performance in 2006-07 and the consequent expected capacity of organisations to produce real growth in outputs during 2007-08.