



SOUTHERN SERVICES  
REFORM GROUP

**Workgroup: In Home Services**  
**Date: 23 November 2011**

Present: Helen Baxter, Theresa Howard-Jones, Patricia Field, Sally Warnes (SSRG Project Officer), Sue Johninke, Franca Antonello, Fiona Paterson

Apologies: Stacey Robertson, Alison Bowden (Auspice), Bev Bannister, Jacqui Bowden, Karyn Twining, Penny Mosel, Sue Hammill, Jenny Veenvliet

Agenda Items	Discussion	Actions
Welcome & Apologies	Sally welcomed the group.	
Previous minutes	Minutes accepted.	
Business arising from minutes	<p>Actions –</p> <ul style="list-style-type: none"> <li>Funding application completed for HACC Funding Round 27, 2011-2012. Project titled 'Health and Community Choices'. A summary of the application was sent to all members prior to the meeting.</li> <li>New stickers with correct phone numbers for Health Checklist Brochures not yet completed</li> </ul> <p>Discussion continued re Access2HomeCare – appears to still be some confusion. Apparently there is no central waiting list – unclear what happens to those consumers. Accessing packages does not happen through Access2HomeCare – it is primarily for HACC funded services.</p>	<p>The funding application summary to be attached to these minutes. Health Checklist Brochures to be updated before the next meeting.</p>

	Discussion about CACP's packages and the reasons behind the increase in vacancies. These include cost, not wanting to move to another provider and consumers being able to receive up to 4hours with HACC services. The positive aspect of a CACP package is its flexibility	
Discussion re project funding submission....next steps	<ul style="list-style-type: none"> <li>• Discussion about Fiona's role at the Metro Referral unit – includes referrals to hospital avoidance, RDNS, short term services following discharge – services are for public patients only. There is no system in place for private patients. One of the issues is the lack of planning for discharge....it can often only happen half hour before the patient leaves the hospital.</li> <li>• Discussion about whether we are on 'the right track' assuming a resource is required....should we be asking the health sector what they would like? It is vital that any resource has to be kept up-to-date. Should we survey key people in the health sector – GP's, nurses, allied health....or is this outside of our scope?</li> <li>• Early discharge planning is optimal – Noarlunga Hospital has a good model that discharge planners use.</li> <li>• The group felt that more consultation with the health sector would be beneficial.</li> <li>• If the funding application is successful it will confirm the need for a resource to better inform the health sector - If the right information is delivered at the right time and in the right manner, the person is enabled to make informed good choices, providing the opportunity to maximise their capacity and quality of life.</li> <li>• It is acknowledged that many people are unaware of the system – packages and respite services.</li> <li>• Could be beneficial to speak with the author of Alternatives to Care.</li> </ul>	<p>Sally to invite Noarlunga Hospital discharge planners to talk to the group....find out what resource / information would be beneficial.</p> <p>Sally to contact ?Deb McCarthy who was involved with Alternatives to Care.</p>
SSRG Project officer report	<ul style="list-style-type: none"> <li>• Dementia Workgroup - Next project is going to focus on dementia training – first step is a survey being developed, asking care workers re gaps in their dementia knowledge and training.</li> <li>• Consumer Workgroup - discussing training of care workers and skill sets. A consumer discussion paper is almost completed. Referrals to the consumer group still required.</li> </ul>	<ul style="list-style-type: none"> <li>• Send consumer directed care forum flyer with minutes</li> </ul>

	<ul style="list-style-type: none"> <li>• Social Inclusion Workgroup – exploring creatively connecting people to social activities and the skills workers require to better understand valued social roles.</li> <li>• HACC Service Principles Forum – Presentations on each of the principles – workshopping the barriers to achievement and solutions. At Edinburgh Hotel on 14 December, 1pm. All invited.</li> </ul>	
Discussion re agency reports	<p>Helen suggested that it may be beneficial for agencies to share their client numbers, vacancies and waitlists at the In Home Services workgroup meetings. The Northern Collaborative Project does this on a regular basis and is found to be very beneficial.</p> <p>The group were unsure if this is necessary....are A2HC filling this role?</p>	This recommendation to be discussed again at the next meeting.
Next Meeting	<p>No December meeting scheduled.</p> <p>Next meeting- Wednesday 22 February 2012 Time – 2:30 to 4:30 pm Venue to be confirmed</p>	

Summary of Funding Application  
HACC Funding Round 27, 2011-2012.  
November 2011

**Project title: Health and Community Informed Choices**

This project proposal is the product of collaboration between representatives from 12 community organisations that are involved in the SSRG In Home Services Workgroup. Smooth transition for consumers from acute care to community care has been identified as an area that requires innovative improvement to ultimately add value to the existing services - carelink and Access 2 HomeCare (A2HC). The project aims to work with the current structures but enhance their ease of use and success, thus increasing consumer satisfaction. The underlying assumption is that if the health sector had a better understanding of the community sector and what it offers, consumers would have better quality information to make informed choices about how they return or remain living in the community. If the right information is delivered at the right time and in the right manner, the person is enabled to make informed good choices, providing the opportunity to maximise their capacity and quality of life. (HACC Service Principle 1)

Currently the Southern Adelaide Health Service has a publication titled Alternatives to Hospital Care. Although very useful the information is currently out of date and the explanations about community care are brief, lacking any detail regarding what services may include or their

degree of flexibility. This project will not only be the development of a resource, but will be delivered through presentations, a 'hands on' approach, and become embedded in TAFE curriculum.

The system will be developed by a project officer with skills matching the requirements of the task over a 12 month period. Although the information collated will be specifically aimed for use by the health sector it will not exclude the distribution to service providers within the community sector. The information will encompass all available community services in the southern region with sufficient detail to assist consumers to make informed choices.

The information will be able to be accessed in a number of formats - power point presentations, information packs, lecture materials and website page. Presentations will be delivered to the health sector as requested and to targeted students at universities, TAFE and registered training organisations. Maintenance of the information will be addressed through developing memorandums of understanding with community organisations to make a commitment to update information as necessary. Information will be a mix of generic and organisation specific.