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Program Home and Community Care (HACC) program.

Program code HACCP

Service subtype General Nursing

Definition

The HACC program is jointly funded by the Commonwealth, State and Territory governments and provides care in home and community-based settings to frail aged people and younger people with disabilities and their carers.

Under the HACC program, strategies by HACC service providers in allocating their services aim to:

- reduce use of residential and acute care
- reduce risk of premature or inappropriate admission to residential and acute care
- assist clients with high and complex care needs to remain in the community
- improve functioning and support independence of clients in the community
- support carers
- enhance client's quality of life
- reduce unmet need

National Program Guidelines for the Home and Community Care Program, 2007.

Responsibility RDNS general.

Referrals *To* RDNS Customer Service Centre

From Initial referral may be made from any source.

continued

Type of service**Nursing**

Support and maintenance (not age-specific):

- clinical assessment
- direct clinical nursing (includes technical care – tasks and procedures for which nurses receive specific education and require nursing knowledge of expected therapeutic effect, possible side effects and complications and the appropriate actions related to each). Refer to *Appendix 1 – RDNS position on drain and peg tubes/catheter care*
- personal care when in conjunction with an unstable health status and complex needs
- supervision and training of nurses, community care aides and personal care workers providing direct care (in line with RDNS policy)
- provision of health information and education
- coordination of nursing and other home health care services as well as monitoring of the consumer's health status and/or care plan
- the development and implementation of nursing care plans

Physiotherapy

For clients with nursing needs:

- assessment, diagnosis, treatment and prevention of human movement disorders
- manual handling (OH&S)

Social work

For clients with nursing needs:

- assisting individual and carers, including grief counselling, support, recovery from a critical incident, counselling for depression or other emotional/psychological conditions
- 'At risk' management

Community Care Aides

- personal care under nursing supervision for eligible clients. Assistance with tasks which a person would normally do for themselves but because of illness, disability or frailty they are unable to perform without the assistance of another person.

For example, bathing, dressing, grooming, toileting, transfers, mobility, eating, prompting of self medication, taking to appointments.

Respite

HACC activities include respite. Respite can be provided in the form of planned regular respite, emergency respite, crisis respite and occasional respite.

The emphasis of respite services is to give full-time carers a break. Agency discretion can be applied in relation to prioritising requests for respite to enable paid employment or other activities.

Eligibility/criteria for accepting referral

Eligibility to receive care under the HACC Program includes the following criteria:

- the HACC target population (persons who, in the absence of basic maintenance and support service, are at risk of premature or long-term residential care), including:
 - older frail persons with moderate, profound or severe disabilities
 - younger persons with moderate, profound or severe disabilities
 - carers of the above persons
 - persons assessed as requiring assistance with activities of daily living (ADLs)
(ADLs include dressing, preparing meals, house cleaning and maintenance and using public transport. From a nursing perspective they may also include assistance with medication, wound dressings and other technical types of care).

Within the broad HACC target population, it is recognized that there are some special needs groups who may experience particular difficulties in gaining access to HACC services appropriate to their needs.

The designated special needs groups are:

- people from culturally and linguistically diverse backgrounds
- people from Aboriginal and Torres Strait Islander backgrounds
- people with dementia
- people who are financially disadvantaged, and
- people living in remote and isolated areas.

HACC services can be provided to people living in:

- their own homes
- unstable housing circumstances (such as transient accommodation or homelessness)
- Supported Residential Services, retirement villages, independent living units, group homes or rooming houses. Under certain circumstances, people in these settings may be eligible to receive HACC services if that service is not provided by the accommodation service in return for the resident's rent, board or accommodation fee and/or the resident's contract does not include these services.

Clients are not eligible whilst receiving the fee for service programs (for example, DVA, TAC, HITH and WorkCover).

Eligibility is not dependent on age or income.

Victorian Home and Community Care (HACC) Program Manual, 2003.

*Non-residents, refugees,
asylum seekers*

Non-residents of Australia, refugees and asylum seekers are assessed and charged as for any other client, based on whether the client is funded under a program or is self-funded (i.e. under HACC or another funded program depending on eligibility).

HACC Program Manual February 2003, Chapter 7.2 (C)

Health insurance	Not applicable. Some private health insurance programs may pay for private care by RALLY Healthcare.
Fees	According to the HACC fees policy identified on the RDNS <i>HACC fees information and agreement</i> (refer to <i>RDNS policy reference</i> below). Health Care Card holders are eligible for the minimum fee. Residents of Supported Residential Services whose only income is the pension are not charged. Children under 16 years have fees set according to their parent's income. Children 16 years and over have fees set according to their own income.
Liaison charge	No charge.
Consumables	Client is responsible for the cost of consumables.
Continuity of care/Core	Not applicable.
Access responsiveness	Prioritisation according to need.
RDNS policy reference	RDNS Customer Service Centre (CSC) Operations Manual <i>CP-B01 Admission priorities and process</i> <i>CP-B04 Referrals for clients in residential aged care facilities</i> <i>CP-B06 Determining client fees</i>
Contract/agreement	Funding and Service Agreement.
<i>Contract responsibility</i>	CEO
<i>Contact responsibility</i>	General Manager/Director of Nursing North and West Regions. General Manager/Director of Nursing South and East Regions. General Manager Finance and Assets Management.
<i>Expiry date</i>	Agreement renewed every year.

Other programs permitted

CAPS (where personal care is provided by a Community Care Aide and RN).

DVA 24 Hour Response Program.

HOC.

Linkages for core hours.

Personal Alert Victoria (PAVIC).

Post Acute Care program (where the care is in addition to HACC maintenance of effort/core/continuity of care).

Stomal Therapy - referral non financial RDNS programs.

Supported Residential Service.

Terminally Ill Client - Palliative Care.

Veterans Home Care.

Comments

Reference/source of information

Victorian Home and Community Care (HACC) Program Manual, 2003.

http://www.health.vic.gov.au/hacc/prog_manual/index.htm

National Program Guidelines for the Home and Community Care Program, 2007.

http://www.health.wa.gov.au/hacc/Publications/docs/pg_npg.pdf

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