



Positive Ageing

Reform Readiness Plan
June 2019



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Part A: Executive Summary

Fast Facts

- Faced with the challenges of an ageing population, the Australian Government is changing the way that aged and disability care services will be delivered in the future. The aim is a 'consumer driven, market based, sustainable aged care system' – where local government will no longer be an automatically designated service provider or receive block funding.
- In response to the proposed changes Council's Business Improvement Unit, undertook an extensive review between 2016 – 2018.
- At the July 2018 Council meeting, Council endorsed the Positive Ageing Service Review Option 2 – Plan for Change (PLAN AND ACT).
- To enact this recommendation a Positive Ageing Project Manager was employed and a Positive Ageing Advisory Committee were established in October 2018.
- In line with the PLAN AND ACT directive, this Reform Readiness Plan has been developed and is supported by the Positive Ageing Advisory Committee.

Timeline of actions:



Current status: January 2019 - June 2019

- Research, exploration and development of sustainable service delivery options
- Development of Reform Readiness Plan with the support of the Advisory Committee
- Reform Readiness Plan Version One to be presented to Council June 2019 meeting.

Relevant Council Meetings:

Date Council Meeting	Details
March 2017	Council received <i>Dyson Consulting Group Aged Care Reform Final Report</i>
24 October 2017	Council endorsed the <i>Positive Ageing Service Review Research Paper</i>
27 February 2018	Council endorsed <i>Positive Ageing Service Review Options Paper</i>
12 June 2018	Hearing of Submissions
27 July 2018	Council endorsed the <i>Community Engagement Findings and Recommended Option Paper</i> and <ul style="list-style-type: none"> • Endorsed Option 2 Plan for change (PLAN AND ACT) • Directed the formation of a Positive Ageing Advisory Committee • Requested the development of a Reform Readiness Plan
October 2018	Council appointed Positive Ageing Advisory Committee Members
January 2019	Council adopted Positive Ageing Guiding Principles

Reform Readiness Plan:

The Reform Readiness Plan has been developed in response to the Aged Care Reforms. The Plan presents a proposed set of actions that are subject to further investigation and review. It provides direction for officers and enables discussion and, where applicable, negotiation with all relevant stakeholders. Decisions to alter Council's service in accordance with, or differing from, this plan will be made through resolution(s) of the Council.

Community Concerns

Some of the key learnings from our community, as outlined in the *Positive Ageing service review – community engagement findings and recommended option paper* <https://www.surfcoast.vic.gov.au/About-us/Your-Say/Active-Projects-Your-Say/Positive-Ageing-Review> include:

- Clients trust and are very comfortable with the Council provided service
- Concerns about the cost and quality if Council is not the service provider
- Clients are fearful about change
- Concerns about navigating the new system without Council's involvement
- Council has an ongoing representation / advocacy / community strengthening role
- Provided quality and cost are maintained, who provides the service is less important
- Preference for a longer time for change

Guiding Principles

With these concerns in mind, along with other learnings from the Review and the intimate knowledge the Positive Ageing Advisory Committee provide, the Project's *"Guiding Principles – Client's Perspective"* were developed.

The *"Guiding Principles – Service Provider Perspective"* were developed by the Service, and were underpinned by the learnings of the Business Review, including community feedback.

Both Guiding Principles (*as outlined on Page 17/18 of this report*) have been used as the lens to inform the proposed model to be developed.

Positive Ageing Advisory Committee

The Positive Ageing Advisory Committee have been actively involved in the development and direction of the Reform Readiness Plan. They have provided new insights at all stages of the Projects development, and have reshaped the proposed Model to ensure it meets community's needs and addresses the concerns raised.

Proposed Model for Development

Actions 1 & 2: Potential Implementation by January 2020

Action One:

Develop a model by which Surf Coast Shire Council, Hesse Rural Health and Lorne Community Hospital form an Alliance to provide aged care support services for our community.

Consider dividing the Shire into 3 geographical areas (based on health service's parameters) and dividing service provision accordingly. Consider the formation of an Alliance with the 3 aforementioned services, which would work together to ensure the community's needs were met, concerns could be addressed and a consistency in service provided.

Rationale:

Working with our local health service providers would ensure a strong, sustainable and robust model that addresses the concerns of the community. They are trusted service providers within their respective communities, and their monitoring, standards and quality assurance frameworks are in place.

Action Two:

Re-establish Surf Coast Shire's Entry Level Care Framework. In doing this, consider exiting program areas that do not fall within this Entry Level Care Framework, namely:

- Home Care Packages
- National Disability Insurance Scheme
- Brokerage Services

If exiting these services, development of a transition plan would be key to ensuring a positive experience for clients. Such a Plan would consider a range of tasks including:

- ensuring alternate quality service providers were in place
- working with clients on a 1-1 basis to ensure their individual needs were met
- adequate time was allocated for appropriate handover
- ensuring there were no gaps in service provision.

Rationale:

Re-establishing Entry Level Care as Council's core business, ensures a consistent approach and well defined care parameters for our community.

Clients who have greater needs than Entry Level Care support, deserve to be supported by services who provide the range of supports to truly meet their needs.

Actions 3, 4 & 5: Potential Implementation July 2020

Action Three:

Scope possibilities and engage with an alternate Service Provider to provide aged care support services for our community, in Area 3 (Torquay, Jan Juc, Bellbrae Anglesea). Scoping other health services, and / or non-government organisations with similar values and principles, who may be interested in providing these services, will be pursued. Realigning boundaries with Hesse Rural Health and Lorne Community Hospital if more viable than engaging with a third service provider, will also be considered. Surf Coast Shire Council will continue to be a member of the Alliance, working with the service providers in our local government area, but no longer providing aged care support services.

Rationale

A social model of health framework would continue, and be strengthened. Surf Coast Shire would continue to be active participants in the monitoring, evaluation and development of the service delivery model, within the established Alliance.

Action Four:

In line with Government directive, transition our Regional Assessment Service to the new national assessment paradigm. The Department have confirmed the new assessment service will commence on 1 July 2020 – we will work, as directed by the Department, to support this transition.

Rationale:

Following directive from the Department to move into the new paradigm.

Action Five:

Develop a comprehensive Positive Ageing Strategic Plan (2020 – 2025) which sets a clear directive and includes sufficient resource allocation for Surf Coast Shire's future commitment within the Positive Ageing space.

The Plan will be underpinned by current and innovative frameworks, builds on the set service directions of Actions 1 – 4 and the planning process will involve considerable community consultation.

From the current Reform Readiness Project's learnings, the Plan will include:

- Ongoing support of the established advisory committee
- Capacity building and project development based on the Age Friendly Communities framework
- Monitoring, evaluation and ongoing advocacy role relating to Aged Care Reform agenda outcomes and the new service provision paradigm for our community
- Allocation of sufficient Council resources to execute the 2020 – 2025 Plan

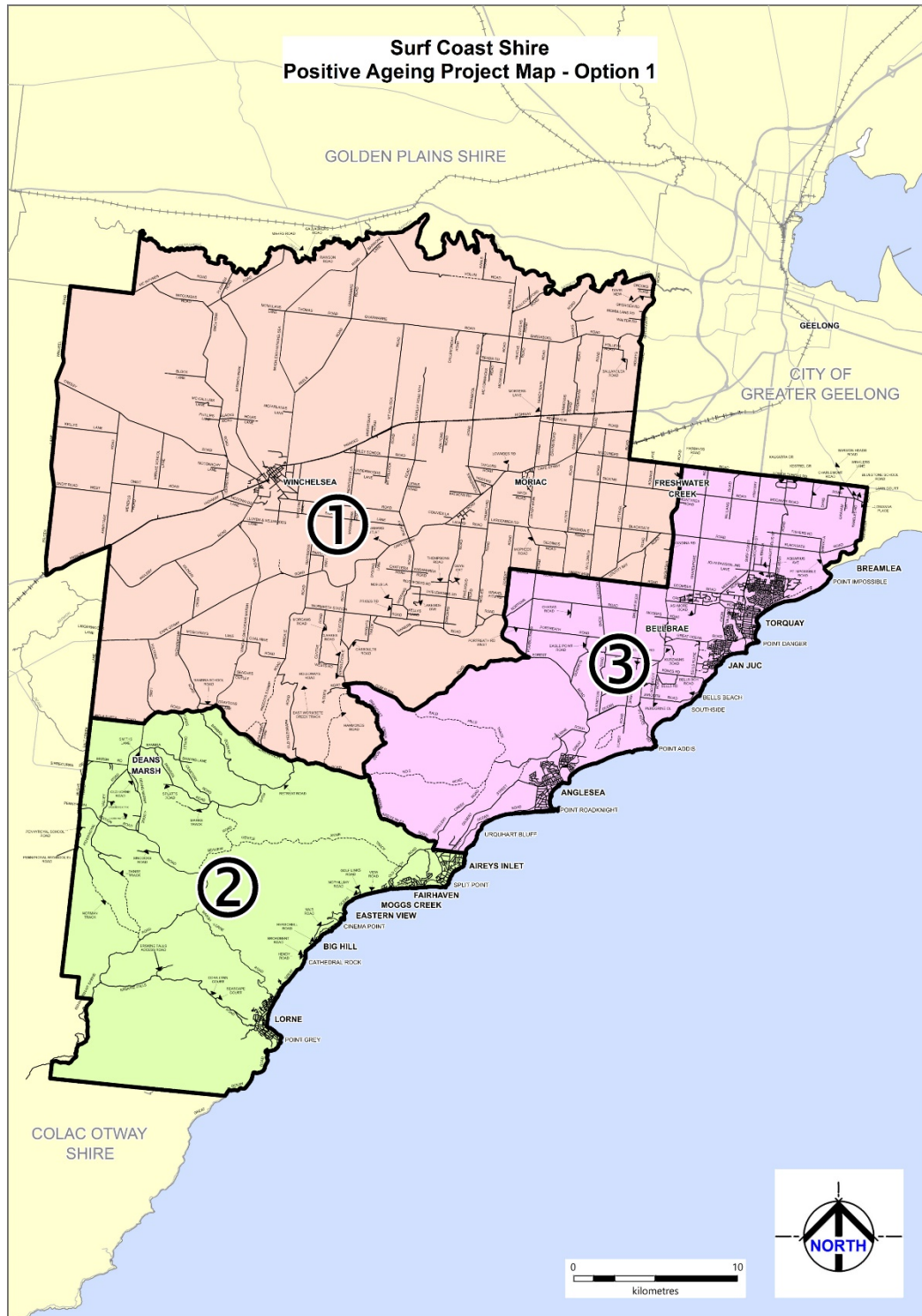
Rationale:

In the past the Positive Ageing service delivery component has serviced approximately 10 % of the Shire's ageing population. With the support needs of these community members being serviced by health services (or organisations with similar values and principles) into the future, Council has greater opportunity to develop Age Friendly Communities that support the needs of all of the ageing population living within our Shire.

Part B: Proposed Reform Readiness Model

Map:

For the purpose of this Plan the Shire is divided into 3 area groupings. The Map below is a rough guide, however as a general parameter, it will align with Health Service Areas.



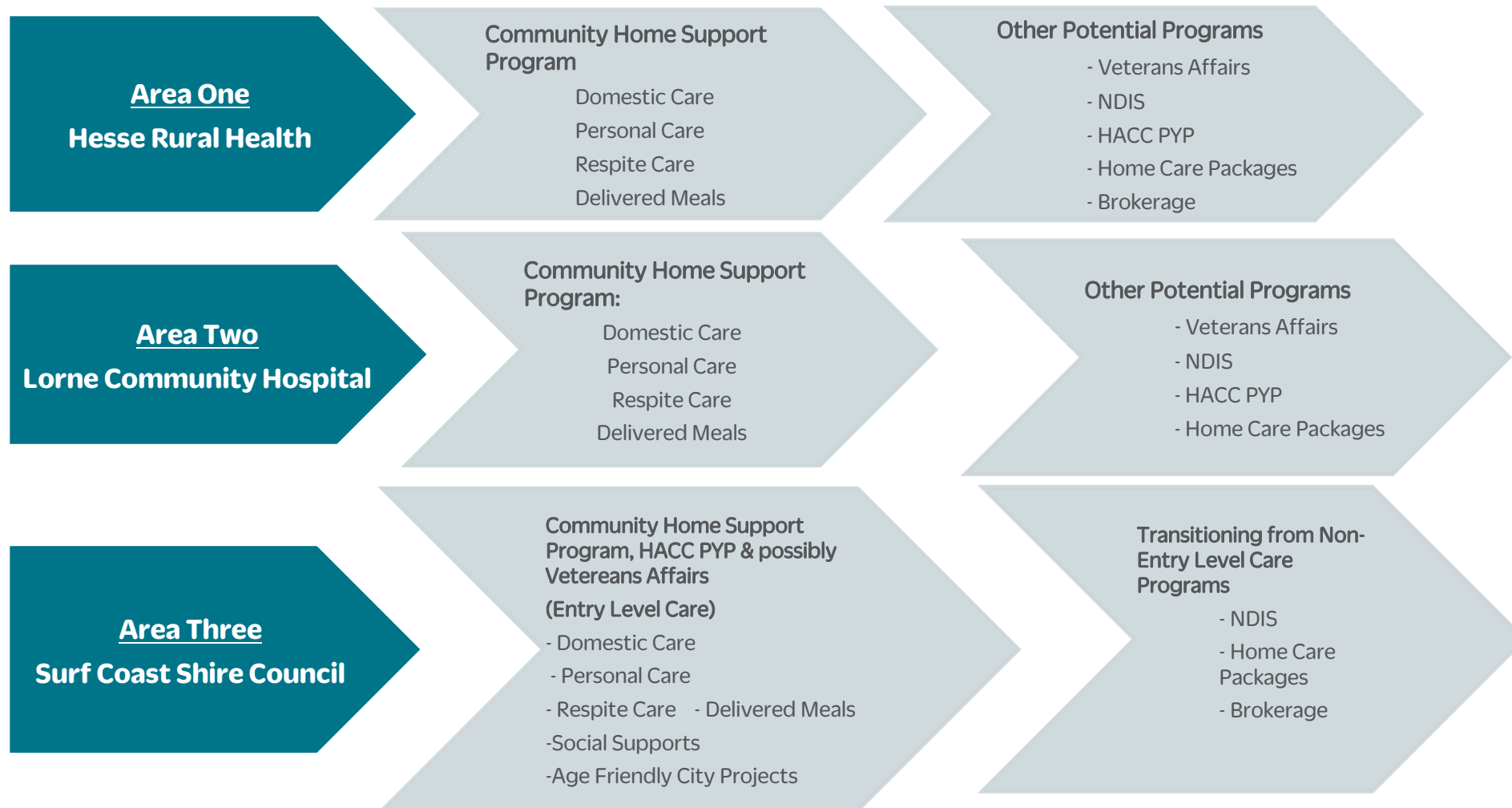
Reform Readiness Plan Actions

	Actions	Program Areas	Timeframe
Action One	<p>Develop a service delivery model for consideration, which includes aged care support services being provided by:</p> <ul style="list-style-type: none"> ➤ Area One: Hesse Rural Health ➤ Area Two: Lorne Community Hospital ➤ Area Three: Surf Coast Shire Council 	<p>Entry Level Care Services:</p> <ul style="list-style-type: none"> ➤ Community Home Support Program (CHSP) ➤ Veterans Affairs ➤ Home and Community Care Program for Young People (HACC PYP) 	<p>July – December 2019</p> <ul style="list-style-type: none"> ➤ Tasks undertaken for transition <p>January 2020</p> <ul style="list-style-type: none"> ➤ Potential date for new service delivery model to commence
Action Two	<p>Explore alternate service provider options for non-entry level care programs. Work with relevant funding bodies and individuals toward transitioning clients.</p> <ul style="list-style-type: none"> ➤ including Hesse Rural Health and Lorne Community Hospital 	<ul style="list-style-type: none"> ➤ National Disability Insurance Scheme (NDIS) ➤ Home Care Packages ➤ Brokerage 	<p>July – December 2019</p> <ul style="list-style-type: none"> ➤ Tasks undertaken for transition <p>January 2020</p> <ul style="list-style-type: none"> ➤ Potential date for new service delivery model to commence

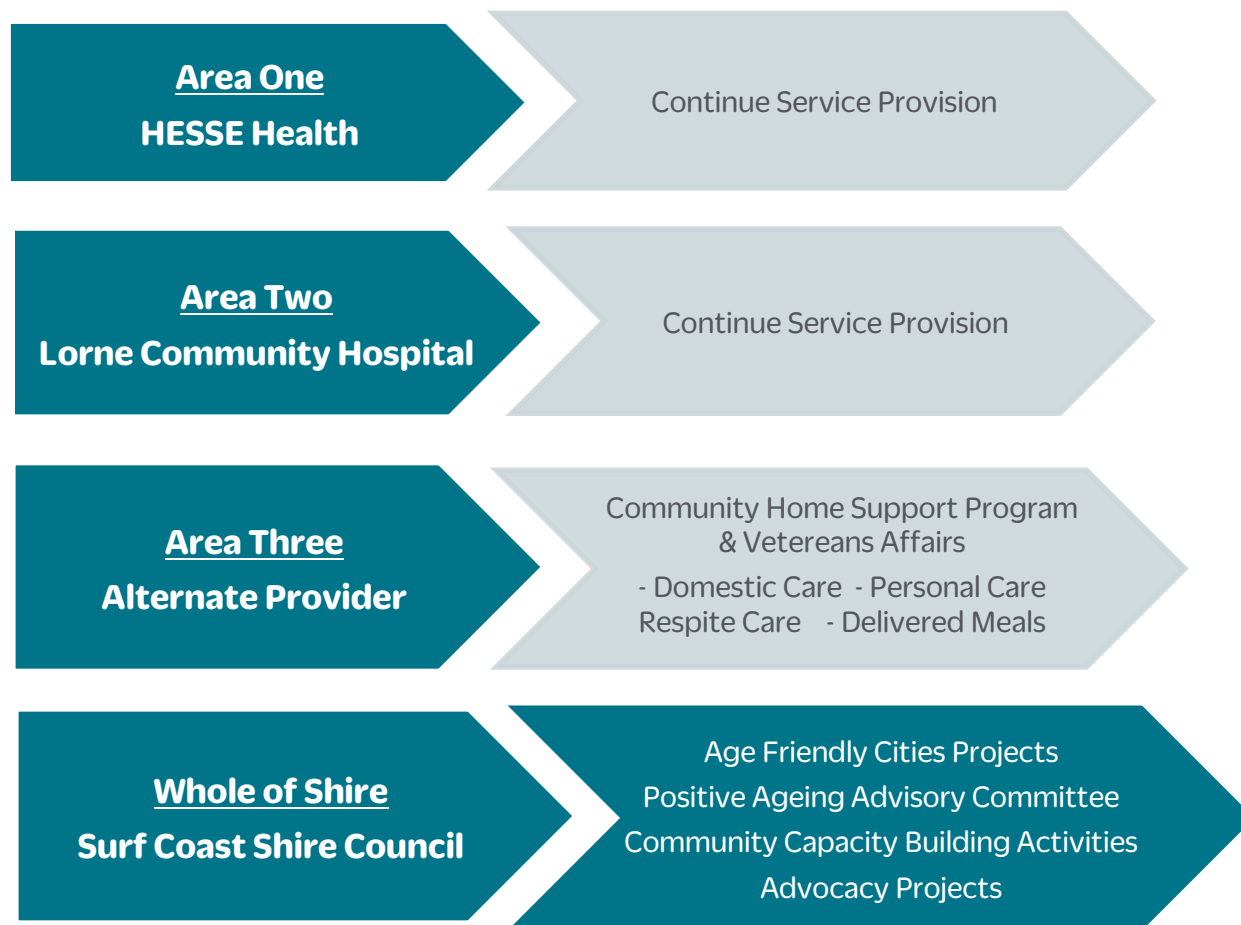
	Action:	Program Areas	Timeframe
Action Three	Explore alternate service providers: <ul style="list-style-type: none"> ➤ Further explore potential service providers for Area Three 	Area 3 – Surf Coast Shire Entry Level Care Services: <ul style="list-style-type: none"> ➤ Community Home Support Program (CHSP) ➤ Veterans Affairs ➤ Home and Community Care Program for Young People (HACC PYP) 	July 2019 – June 2020
Action Four	Support the transition of Rural Assessment Service to the new assessment paradigm as developed by the Department of Health.	Rural Assessment Service	June 2020
Action Five	Develop a comprehensive Positive Ageing Strategic Plan (2020 – 2025) which includes: <ul style="list-style-type: none"> ➤ Ongoing support of the established advisory committee ➤ Capacity building and project development based on the Age Friendly Communities framework ➤ Monitoring, evaluation and ongoing advocacy role relating to Aged Care Reform agenda outcomes and new service delivery paradigm ➤ Allocation of sufficient Council resources to execute the 2020 – 2025 Plan 	Surf Coast Shire Positive Ageing Department	July 2019 – June 2020

Part C: Snapshot of Proposed Model

Potential Implementation January 2020



Potential Implementation July 2020



Part D: Background & Context:

Background

In 2016 the Commonwealth Government determined that reform is necessary to ensure that aged care and disability service system is best placed to meet the needs of an ageing population in an efficient, fair and sustainable way.

The Federal Government's Aged Care Reform Agenda discusses individualized funding, choice and competition that will fundamentally change the way that aged and disability services are delivered in the future. In this new paradigm Council will not automatically be a designated service provider.

Surf Coast Shire has been proactive in understanding the potential impact of these reforms and creating options and pathways forward to ensure its community is best served in the new Aged Care system.

The work which has been undertaken can be categorized into 4 main components:

- Part 1 - Research
- Part 2 – Options Developed
- Part 3 – Identification of Preferred Option
- Part 4 – Planning for Change

This Reform Readiness Plan is Part 4, *Planning for Change*.

For a more comprehensive understanding, all Papers can be found on the Shire's Website, refer to <https://www.surfcoast.vic.gov.au/About-us/Your-Say/Active-Projects-Your-Say/Positive-Ageing-Review>

Part 1 – Research:	<i>Positive Ageing Service Review Research Paper</i>
Part 2 – Options Developed:	<i>Positive Ageing Service Review Options Paper</i>
Part 3 – Identification of Preferred Option:	<i>Preferred Option Paper</i>

Council Decisions

Council Meeting – 24 July 2018:

After an extensive 18-month review, Council's Business Improvement Unit offered 3 possible options for Council's consideration.

Council resolved to:

- Endorse **Option 2 Plan for Change (PLAN AND ACT)** in order to prepare for the implications of national reforms to aged care and disability services.

- Seek feedback from the Positive Ageing Advisory Committee on the draft guiding principles prior to finalising them via Council resolution in order to inform future decision-making.
- Develop a Reform Readiness Plan, with assistance from the Positive Ageing Advisory Committee, in accordance with the resolutions arising from this report.

Council Meeting – 28 August 2018:

Council resolved to:

- Adopt the Positive Ageing Advisory Committee Terms of Reference.
- Commence the Expression of Interest process for the Positive Ageing Advisory Committee.
- Receive a report at its October 2018 Ordinary Meeting with recommendations on the membership of the Positive Ageing Advisory Committee.

Council Meeting - 23 October 2018:

Council resolved the membership of the Positive Ageing Advisory Committee.

Council Meeting 22 January 2019

Council resolved to:

- Adopt the Guiding Principles for the Reform Readiness Plan
- Noted the Progress of the Positive Ageing Reform Project
- Noted the latest developments in the Federal Government's Aged Reform Agenda

Latest developments in the Aged Care Reform Agenda

There are many developments impacting on the Federal Government's Aged Care Reform Agenda, which include:

1. *Royal Commission into Aged Care Quality and Safety* - Draft Report is due October 2019, with the final Report due April 2020.
2. *Regional Assessment Service* - Council has the current contract for this service, which was to cease in June 2019. This contract has recently been extended until June 2020. The Commonwealth Department are stating there will be no further extensions.
3. *Community Home Support Program (CHSP)* – This is Council's main service delivery component. This funding was to cease June 2020. The 2019 Australian Government budget package announcement on Tuesday 2 April 2019 provided notice of funding certainty for CHSP to 30 June 2022.
4. *Federal Election* - Potential changes with outcome of election, may impact on the set direction and model development.

Regardless of these developments, the direction of the Reform remains the same - change is needed to meet the growing population demand. Council's challenges to remain a service provider are also unaffected by these latest developments – we need to explore new models to ensure the best outcomes for our clients. The Reform Readiness Plan meets these challenges, and provides a model that is robust moving into the future.

Part E: Frameworks and Guiding Principles

Framework Background:

Historically, (1985 – 2015) the Commonwealth and Victorian Governments funded Local Governments to provide Home and Community Care services to people aged 65 years + & younger people with disabilities.

HACC services, included:

- ✓ assessment & care co-ordination
- ✓ domestic assistance, personal & respite care
- ✓ home maintenance & minor home modifications
- ✓ delivered meals & other food services
- ✓ social support services
- ✓ community transport

During the 2000's, key national reports were developed:

- Productivity Commission's **Caring for Older Australians**
- National Aged Care Alliance's **Blueprint for Aged Care Reform**
- **Aged Care Roadmap** by the Aged Care Sector Committee

They identified:

- Significant **growth** (up to 350%) in the number of people requiring aged care from 2011 to 2050.
- The **cost** of providing adequate care for older people in future would be **unaffordable** as a nation.
- The presence of **significant system weaknesses** (difficult navigation, limited services, variable quality & no consumer choice) & **inefficiencies** (duplication of effort, no competition & high cost structures).

In response, a number of fundamental changes were made to program design, funding & operation of aged & disability services, resulting in the end of the HACC Program & establishment of the:

- **1. National Disability Insurance Scheme** (NDIS) for eligible HACC clients, managed by the National Disability Insurance Agency
(~ 10% of Councils former HACC clients)
- **2. Commonwealth Home Support Program** (CHSP)
(65 years +, managed by the Commonwealth Govt.)
(~ 80% of Councils former HACC clients)
- **3. HACC Program for Young People** (HACC PYP)
(< 65 years, managed by the Victorian Govt.)
(~ 10% of Councils former HACC clients)

Whether funded under the older HACC funding model or the newer CHSP model, **Entry Level Care** is the framework Local Governments have always been funded to provide.

Entry Level Care:

Entry Level Care is the framework that underpins the work Council is funded to provide.

As stated within the Community Home Support Program (CHSP) Manual 2018:

“As an ‘entry-level’ program, the CHSP is designed to provide relatively low intensity (small amounts) of a single service or a few services to a large number of frail older people who need only a small amount of assistance or support to enable them to maintain their independence, continue living safely in their homes and participating in their communities. The CHSP is not designed for older people with more intensive, multiple or complex needs, nor is it intended to replace or fund support services under other systems, such as the health care system.”

Due to a variety of factors, Surf Coast Shire has provided services beyond Entry Level Care and accepted funding for Program areas which offer higher levels of care, namely:

- Home Care Packages
- National Disability Insurance Services
- Brokerage Services

Providing services beyond Entry Level Care has many challenges including:

- Meeting compliance / standards
- Appropriate training of staff
- Recruitment of appropriately qualified staff
- Limited resources to meet client's needs
- Inability to refer clients internally for higher care needs
- Limited capacity to assess client's needs as they change
- External providers responsible for care planning – limited information access for Shire staff
- Increase in reporting and financial acquittal of diverse program areas and brokers

This Reform Readiness Plan re-establishes Entry Level Care as our core business and ensures we provide a consistent approach and well defined care within this framework.

Clients who have greater needs than Entry Level Care support, deserve to be supported by services who provide the range of supports to truly meet their needs. Ensuring appropriate resources are allocated and extended transitional timeframes are in place, the transition for clients will be a positive one

Guiding Principles:

Guiding Principles are the lens used when making decisions and recommendations for the future of Positive Ageing. They are fundamental to ensuring our community continues to be provided with quality services that are needed, whether by us or by another service provider. They also ensure that as a Local Government Authority, quality assurance standards are adhered to when making recommendations.

The Positive Ageing Advisory Committee were instrumental in the development of the “Guiding Principles – Client’s Perspective”,

The “Guiding Principles – Service Provider Perspective” were developed by the Service, and were underpinned by the learnings of the Business Review, including community feedback.

Positive Ageing Guiding Principles - Client’s Perspective

These Guiding Principles are the lens we use, from a client’s perspective, in order to inform future decision making.

1. I am well informed about aged care options and I understand the information because it is clear, up to date and makes sense
2. I have opportunities to discuss and clarify the changes and the new system
3. I have time to understand any changes to my service that may occur
4. I can ring the Council and they will help me work out what’s available for me, how to get it and costs involved
5. I know Council will work hard to ensure the services I receive are of a high standard, meet quality guidelines, are monitored well and always work towards continuity of care
6. I can find my way through the service system easily either on my own or with assistance
7. I can choose my preferred service provider or if I’m unable to choose I can get help to make the best choice
8. Services and supports are flexible and will meet my needs

Positive Ageing Guiding Principles - Service Provider Perspective

These Guiding Principles are the lens we use, as a service provider, in order to inform future decision making.

Council will:

1. Only make significant changes to existing services through formal resolution
2. Ensure its services meet quality standards and are efficient and viable
3. Support staff through changes associated with the age care reforms
4. Ensure its actions do not inhibit the creation of a competitive market
5. Prepare for an open and competitive aged care market by moving towards competitive neutrality
6. Ensure that the community is not left without access to services currently provided by Council
7. Treat reductions in Council's cost of services as a contribution towards the business improvement program savings target

Part F: Positive Ageing Advisory Committee

In September 2018 *Expressions of Interest* were called for within the Surf Coast Shire, to create membership for the soon to be established Positive Ageing Advisory Committee. Interviews were undertaken and at the October 2018 Council meeting, Council appointed the membership of the Advisory Committee.

Purpose & Role

The Committee's mandate is to:

"Collect and consider evidence, ideas and community input about how Council can best create an Age Friendly Surf Coast where older people are valued, supported and empowered to live well....."

More specifically to the Reform Readiness Project, the Terms of Reference state:

"In considering community support and health services, the Committee will consider Council's future role in providing services, programs and facilities to older people, within the context of the federal government's Aged Care Reforms and changing community needs. The Committee will provide advice to Council as it undertakes Reform Readiness Planning, which may include consideration of:

- *Continuation of existing Council services to older people*
- *Expansion, growth, reduction or adaptation of existing Council services, including creating efficiencies and reviewing fees and charges for current Council services.*
- *Transitioning clients of identified existing Council services to other service providers over time.*
- *Supporting the growth of the aged and disability service sector within Surf Coast Shire*
- *Establishing new or additional services, programs or facilities for older people.*
- *Development of principles that will guide the planning of Council's future role in providing services and facilities for older people. "*

Composition of the Membership

There are currently 10 Surf Coast Shire resident Committee Members. There was active consideration, as far as possible, to ensure we had residents from diverse locations across the Shire. The Membership currently consists of:

Magdalena Wheatland, Torquay	<i>Current Vacancy</i> , Deans Marsh
Brian Butterworth, Torquay (Vice Chairperson)	Keith Perkin, Fairhaven
Pam Aylward, Torquay	Gary Allen, Lorne
Kristen McDonald, Aireys Inlet	Jenny Mathison, Winchelsea
Christine Brookes, Aireys Inlet (Chairperson)	Elizabeth Bills, Anglesea

Additionally, Cr Margot Smith also has membership on this committee, along with council officers who are there to support and provide relevant project information.

Committee Activities

The Advisory Committee meets every 4-6 weeks. They are actively involved in seeking information and providing input into the direction of the Project. Some of the activities the Advisory Committee have been involved in thus far include:

- The development of “*Guiding Principles – Client’s Perspective*”(used as a lens to support decision making)
- Input into the Communication Plan
- Attaining an understanding of Age Friendly Communities framework
- Input, advice and feedback into proposed model development for service provision at all stages
- Attendance at Council meetings

Reform Readiness Input

29 March 2019

At the March 2019 Advisory Committee meeting, the Reform Readiness Plan was presented and discussed.

The Committee supported the Recommendations, for Areas 1 & 2, namely continue developmental work with Lorne Community Hospital and Hesse Rural Health.

The proposal at this stage had identified several potential service providers for Area 3. Healthy discussions were held regarding the various providers.

The Committee put forward their suggestion to further explore options for Area 3.

Minutes of Meeting are below for an accurate summation.

“Discussion:

A phased approach due to different needs of the communities. Concerns with West and South being “thin markets” and thus more vulnerable to ensuring services are provided in these areas within the context of a privatised market.

There are many private / NGO’s who would be interested in the North – further exploration of options encouraged. “

“Further discussion:

- *Members expressed overwhelming support for the model to be pursued.*
- *Supported further development / discussions with Hesse Rural Health and Lorne Community Hospital.*
- *Encouraged Barwon Health option to be further explored.*
- *Support for partnerships/alliance in which Surf Coast Shire would be a stakeholder as part of the model”*

3 May 2019

At the Meeting held on May 3rd 2019 the Committee reviewed the direction of the non-entry level care specific services, namely:

- National Disability Insurance Scheme (NDIS)
- Department of Veterans Affairs Program (DVA)
- Home Care Packages
- Home and Community Care Program for Young People (HACC PYP)

Once again, a robust discussion was had. The Committee put forward the following:

1. Support exiting NDIS Program.
2. Support exiting Home Care Package Program.
3. Did not support exiting Home and Community Care Program for Young People (HACC PYP). They believed this was an important service that if discontinued would create a gap in services for a very vulnerable cohort, that currently do not directly fit into other program areas. (ie not eligible for NDIS and too young for CHSP). They proposed continuation of this Program.
4. Requested further information regarding the Department of Veteran Affairs program, including profile of clients to ensure they were Entry Level Care.
5. That transitional support for clients of exiting services is of paramount concern. Allocations of appropriate resources and timeframes for this is crucial.

The Reform Readiness Plan was adapted to reflect the input of the Committee, namely retaining Home and Community Care Program for Young People and further review Department of Veteran Affairs program to see whether service provision for this Program fits within the Entry Level Care framework.

31 May 2019

At this meeting the Committee:

1. Supported transitioning out of Brokerage services
2. Could not come up with a collective agreement as to the direction of the Department of Veteran Affairs program. As such, offered the following diverse advice for consideration by Council:
 - See out the current contract which expires November 2019, and do not renew
 - Continue with program as usual and renew contract
 - Exit program – as it falls in the same domain as provision of brokerage services

The members reiterated that they are an “Advisory Committee”, and as such felt no need to come to a final resolution, instead offered input into the decision making process covering a range of determinants.

5 July 2019

The Advisory Committee’s next meeting is 5 July 2019, where we will commence focusing on Age Friendly Community frameworks.

Part G: Situational Analysis

COMMUNITY HOME SUPPORT PROGRAM (CHSP) – MAIN PROGRAM AREA

Program Area	Client Numbers	Proposal	Rationale	Funder Requirements
<p>Community Home Support Program (CHSP)</p> <p>Area 1 & Area 2</p>	161 (approx.)	Develop a model by which Surf Coast Shire Council, Hesse Rural Health and Lorne Community Hospital form an Alliance to provide home and community services for our community.	<p>HESSE & Lorne Hospital:</p> <ul style="list-style-type: none"> • Are trusted service providers within their respective communities • Their monitoring, standards and quality assurance frameworks are in place • Based within relevant locality, the issue regarding 'thin markets' in these areas would no longer be of concern • They are currently accredited providers of the services we provide (CHSP, DVA, HACC PYP, NDIS) • A social model of health framework would continue, by bolstering our Community Health services capacity to provide continuity of care for our clients • Many of our clients already have relationships with these services. As their needs increase they are connected to the allied health supports, services and aged care facilities in their community • Demonstrated commitment to responding to the needs of their communities 	<p>Work with Department of Health to novate the current contract.</p> <p>Provide recommendation to the Department regarding our proposed model.</p> <p>It is the Department's decision ultimately as to who provides services for our Local Government Area.</p>

Program Area	Client Numbers	Proposal	Rationale	Funder Requirements
Community Home Support Program (CHSP) Area 3	416 (approx.)	Surf Coast Shire continue to service this area until a third appropriate provider is engaged. (working toward 1 July 2020 for engagement of new provider).	<ul style="list-style-type: none"> Area 3 does not have the issues of Areas 1 & 2 regarding attracting service providers to such thin markets. There are many service providers who are interested in this this catchment Before handing over to another service provider we need to review our work practice to ensure we are the best and most efficient model we can be for our clients Staggered approach allows us to capture learnings from Areas 1&2 transition More developmental time is needed as this is a bigger cohort Planned staged approach may be better for our community 	As above

SPECIALIST SERVICE DELIVERY PROGRAMS

Program Area	Client Numbers	Proposal	Rationale	Funder Requirements
National Disability Insurance Scheme (NDIS)	10	Transition out of service provision	<ul style="list-style-type: none"> • Very small number of clients • There are over 300 NDIS clients living within our Shire, we provide services to 10 of them. • Linking people in with Disability specific services would be better option than providing limited service – broader range of supports and services for clients to access • There are extensive quality assurance standards that need to be adhered to and reporting requirements. • There are new standards being introduced as of 1 July 2019 that we need to adhere to. It is disproportionate to the amount of reporting and adherence for this number of clients • NDIS has its own payment schedule – we do not receive full cost recovery as we should, but instead are subsidising this service (yet not funded to do so) • Lorne Community Hospital and Hesse Rural Health are NDIS registered providers. 	<p>Clients are controllers of their funding / care and thus will decide direction and support needed for transition.</p> <p>Support to clients to find another service provider.</p> <p>Work with clients Support Coordinators if the client has one or Local Area Coordinators</p> <p>Support clients as directed by clients.</p>

Program Area	Client Numbers	Proposal	Rationale	Funder Requirements
Home and Community Care Program for Young People (HACC PYP)	26 Clients	Maintain contract for Area 3 Transition Clients to Hesse Rural Health and Lorne Community Hospital for areas 1 & 2	<ul style="list-style-type: none"> Our Advisory Committee advocated for the Surf Coast Shire to continue to provide this service in Area 3. They believed this was important service that if discontinued would create a gap in services for a very vulnerable cohort, that currently do not directly fit into other program areas. (ie not eligible for NDIS and too young for CHSP). Lorne Community Hospital have HACC PYP clients as do Hesse Rural Health 	<p>3 months notice to the Department of Health and Human Services for any changes to our contractual arrangements is required</p> <p>Ultimately it is the Department's responsibility to find alternative providers.</p> <p>Current contract expires September 2019.</p>
Department of Veterans Affairs (DVA)	39	<p>Potentially transition Clients to Hesse Rural Health and Lorne Community Hospital for areas 1 & 2.</p> <p>Area 3 Surf Coast Shire maintain and further review.</p>	<ul style="list-style-type: none"> We have small numbers in this program area Veterans have their own payment schedule and underpay for service delivery. Once again, we are subsidising what it is supposed to be a fully funded service. Advisory Committee have mixed views on maintaining or exiting this Program – no collective decision could be made. Currently reviewing client profile – if they fit within Entry Level Care continuation of service delivery may be an option 	<p>Current contract with Department of Veteran Affairs expires 30 November 2019</p> <p>Further discussions with the Department to assist with options is necessary before determining set direction for this program area.</p>

Program Area	Client Numbers	Proposal	Rationale	Funder Requirements
			<ul style="list-style-type: none"> Hesse Rural Health have DVA status 	
Home Care Packages	19	Transition out of Service Provision	<ul style="list-style-type: none"> These clients are not Entry Level Care clients and therefore do not fit within our core business framework. The administration and financial compliance of this program exceeds our internal capacity. Other Providers who have a substantial number of Home Care Packages, have financial and administrative support. Due to our small numbers, our case managers undertake these tasks, which are a different skill set to case management and comprise of approximately 40% of their case management time. We are in an alliance with the G21 Councils. City of Greater Geelong has the contract with the Department – we are an outlet of theirs. There would be many services who would be happy to pick this service up – as if run at a larger scale this is a profitable service Lorne Hospital have Home Care Package clients, as do Hesse Rural Health. 	<p>Home Care Packages are individually funded and each client determines the service providers they wish to engage with.</p> <p>Work individually with clients to assist with finding alternate providers.</p> <p>Work with City of Greater Geelong regarding our contractual arrangements with them.</p>

Program Area	Client Numbers	Proposal	Rationale	Funder Requirements
Brokerage Services	43	Transition out of Service Provision	<ul style="list-style-type: none"> • This client group have higher support needs than Entry Level Care, which is why they have case managers. • Their case managers purchase individual services from a range of service providers, we being often just one of many. • Of the 43 clients, there are a multitude of Service Providers, which all require individual financial invoicing and complex, detailed service provider agreements, which are reviewed annually. • The clients are not Surf Coast Shire Clients as such and thus we do not have access to their case plan or even a summary of needs, instead just itemised service requests. This is in conflict to the wholistic approach we provide to all of our Surf Coast Shire clients and our ability to respond to any perceived needs our care workers may identify. • Surf Coast Shire pays for the travel time and the kilometres travelled for each client – we once again are subsidising this service. 	<p>This is not a “funded Program”.</p> <p>Individual agreements with service providers for individual clients.</p> <p>External service case managers would organise alternate service arrangements. We would support this process as requested.</p>

Part H: Future of Council's Role in Positive Ageing

Alliance Partnership

In the proposal an Alliance model between Hesse Rural Health, Lorne Community Hospital and Surf Coast Shire would be formed.

The Alliance would work together to ensure the needs of the Surf Coast Shire residents are being met and resolve any issues that may arise through the transitional period.

It would be a supportive Alliance, and although not legally binding, good faith would ensure working collaboratively was at the core of the Terms of Reference.

It would be envisaged ongoing agenda items would be such things as:

- Roles / responsibilities
- Referrals and Intake issues
- Geographical overlap
- Monitoring and evaluation requirements
- Quality assurance issues
- Funding opportunities
- Opportunities for expansion
- Communications and messaging
- Sector Updates
- Advocacy needs

Any new Service Providers would obviously be a new member of the Alliance.

Age Friendly Communities

In 2006, the World Health Organisation brought together 33 cities to discover what makes a city a good place to grow old. They identified **eight domains** for age-friendly communities:

- outdoor spaces and buildings
- transportation
- housing
- social participation
- respect and social inclusion
- civic participation and employment
- communication and information
- community support and health services.

In 2016 Surf Coast Shire signed an Age Friendly Victoria Declaration to work toward building age friendly communities (refer to Page 30).

Our Positive Ageing Advisory Committee are committed to being actively involved in all aspects of the 8 domains. As would be evident, the Committee have been focusing on the “community support and health services” domain, due to the Aged Care Reform and look forward to moving on to other domains.

Working together, we look forward to ensuring the Surf Coast Shire is a great place to live and provides Age Friendly Communities, for all stages of life.



Victorian Government and
Municipal Association of Victoria

/AGE-FRIENDLY VICTORIA

DECLARATION

Vision

The vision of the Victorian Government and the Municipal Association of Victoria in signing this Declaration is for better state and local planning for the creation of age-friendly communities. This is the focus of our shared activities on common goals and directions.

Population ageing is a world-wide phenomenon as a consequence of increasing life expectancy. In Victoria, people are living longer and many of today's young Victorians will live beyond 90, even 100, years. We need to create communities that respond to this significant social change and better support people as they age.

It is vital that governments focus on the opportunities as well as the challenges of an ageing population. While older people contribute significantly to our communities, there is more to be done to support and develop the roles and contributions of older people. Ageing populations require actions that promote quality of life and wellbeing, value the contributions that older people make to their communities, remove barriers to participation, and enable people to 'age in place' and maintain local connections and community belonging.

Age-friendly communities encourage active ageing and optimise opportunities for good health, social and economic participation and personal security. They recognise the great diversity of our older population, promote inclusion of older people and respect their decisions and lifestyle choices. They involve service providers, businesses, community leaders and older people in planning to meet ageing-related needs. They enhance quality of life for people as they age, and benefit the whole community.

Local government plays a key role in planning and establishing age-friendly communities and has been assisted in this by the Victorian Government in collaboration with the Municipal Association of Victoria. The Victorian approach is informed by the World Health Organization's *Age-friendly Cities* framework, and the experience of councils' use of World Health Organization's information and tools.

Experience shows that the best way to strengthen the age-friendly capacity of local communities is through partnerships between seniors, governments, communities, businesses, services and support agencies. In partnership with the Municipal Association of Victoria, the Victorian Government has been supporting local government since 2006 with initiatives aimed at improving their capacity to plan for and support seniors, and to create communities that better accommodate their ageing populations.

This partnership approach has raised the awareness of ageing across both levels of government, improved knowledge and understanding of international age-friendly cities and communities, and created local age-friendly initiatives. This Declaration builds on these strengths and furthers the partnership between state and local government to continue to support and assist Victorian councils to create age-friendly communities.



Martin Foley MP
Minister for Housing, Disability and Ageing

Date: 14 April 2016



Cr Bill McArthur
President, Municipal Association of Victoria

Commitment

The Victorian Government and the Municipal Association of Victoria will build the age-friendly capacity of local communities by:

1. promoting an age-friendly Victoria through the role and achievements of local government in creating age-friendly communities and providing leadership to encourage local councils and stakeholders to develop the principles of the age-friendly cities and community directions
2. supporting state and local planning processes to create age-friendly communities and using the knowledge, information and tools available through the World Health Organization's Global Network of Age-friendly Cities
3. providing local councils with leading advice, expertise, access to networks, policy information and other support to encourage local age-friendly initiatives
4. empowering seniors' involvement in local age-friendly initiatives by assisting councils to develop active engagement structures and models of localised seniors community input
5. encouraging seniors to get involved in areas they see as important such as local community transport, volunteering, community participation, diversity of housing options, seniors safety, technology access and lifelong learning
6. addressing the built environment, transport, housing, social participation, respect and social inclusion, civic participation and employment, communication, and community support and health services for age-friendly communities as listed in the 2008 World Health Organization's *Age-friendly Cities: A Guide*
7. valuing stakeholder engagement and working together to promote and strengthen partnerships with peak bodies, community organisations, businesses, retailers and council-run facilities.

The undersigned council endorses and supports the intention and commitments of this Declaration.

Mayor

Council

Date

Rose Hodge
Surf Coast Shire
25/8/16

MAV
MUNICIPAL ASSOCIATION OF VICTORIA

VICTORIA
State Government