

Aligning ASM to Wellness and Reablement

Information for HACC providers March 2016

Introduction

Home and Community Care (HACC) Services in Victoria are busy preparing for the transition to the Commonwealth Home Support Programme (CHSP) on the 1 July 2016. During this transition period the Department has been asked by agencies what will happen to the Active Service Model (ASM) work that agencies have been implementing since 2010. This information bulletin will provide agencies with the understanding of how well aligned the ASM approach is with the guiding principles of the CHSP.

Background

The Commonwealth have published two key documents that describe grant recipients (agencies) requirements and practices under the Commonwealth Home Support Programme (CHSP) these resources can be found at:

<https://www.dss.gov.au/ageing-and-aged-care/programs-services/commonwealth-home-support-programme/resources>

The CHSP programme manual broadly describes service provision from a Wellness, Reablement or Restorative Care approach. In the programme manual the Commonwealth states that Wellness is for everyone, some people will get a reablement service and some will get a restorative care approach. The CHSP Good Practice Guide provides the following definitions:

Wellness: *is an approach that involves assessment, planning and delivery of supports that build on the strengths, capacity and goals of individuals, and encourage actions that promote a level of independence in daily living tasks, as well as reducing risks to living safely at home.* (page 10)

Reablement: *involves time-limited interventions that are targeted towards a person's specific goal or desired outcome to adapt to some functional loss, or regain confidence and capacity to resume activities.* (page 12)

Restorative Care: *involves evidence-based interventions led by allied health workers that allow a person to make a functional gain or improvement after a setback, or in order to avoid a preventable injury* (page 13)

Key Messages for HACC providers

The terms of wellness, reablement and restorative care also describes the range of work we do in the Victorian HACC program under the Active Service Model. Victorian HACC providers need to continue implementing their 'ASM' approach as this approach encompasses and incorporates the concepts of wellness, reablement and restorative care in the CHSP.

The table below shows how the principles for ASM and the CHSP service delivery align and overlap. Through the ongoing implementation of ASM Victorian HACC providers are well placed to transition to the CHSP in July 2016 adopt the new principles and concepts of Wellness, reablement and restorative care.

Further discussions about this will occur at Alliance forums and network meetings.

Alignment CHSP and HACC ASM Principles

CHSP Wellness (CHSP Manual)	HACC ASM (Victorian HACC program manual)	HACC ASM key components (Victorian HACC program manual)
<p>Promote each client's opportunity to maximise their capacity and quality of life through:</p> <ul style="list-style-type: none"> ○ being client-centred and providing opportunities for each client to be actively involved in addressing their goals ○ focusing on retaining or regaining each client's functional and psychosocial independence ○ building on the strengths, capacity and goals of individuals 	<p>People want to remain autonomous.</p> <p>People have potential to improve their capacity.</p> <p>People's needs should be viewed in a holistic way.</p>	<p><i>Actively involving clients in setting goals and making decisions about their care</i></p>
<p>Provide services tailored to the unique circumstances and cultural preference of each client, their family and carers</p>	<p>HACC services should be organised around the person and family or carer. The person should not be slotted into existing services.</p>	<p><i>Promoting a wellness or active ageing approach that emphasises optimal physical and mental health of older people (Diversity – inclusive services & practice)</i></p>
<p>Ensure choice and flexibility is optimised for each client, their carers and families</p>	<p>People want to remain autonomous.</p> <p>People's needs should be viewed in a holistic way.</p>	<p><i>Providing timely and flexible service provision to support people to reach their goals.</i></p>
<p>Emphasise responsive service provision for an agreed time period and with agreed review points</p>		<p><i>Goal Directed Care planning: progress towards goals is systematically monitored with regular reviews</i></p>
<p>Support community and civic participation that provide valued roles, a sense of purpose and personal confidence</p>	<p>People's needs should be viewed in a holistic way.</p>	<p><i>Social activities are based on each person's interests. Care planning should consider functional, social and emotional needs as well as opportunities for meaningful social participation, social connectedness and life enjoyment</i></p>
<p>Develop and promote strong partnerships and collaborative working relationships between the person, their carers and family, support workers and grant recipients.</p>	<p>A person's needs are best met where there are strong partnerships and collaborative working relationships between the person, their carers and family, support workers and service providers.</p>	<p><i>HACC assessment practice and Goal Directed Care Planning. The service should be organised around the person and carer</i></p>

For further information please contact your regional ASM Industry Consultant or HACC Program and Service Advisor.

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