SWAN HILL

Rural City Council

Best Value Report

AGED & DISABILITY SERVICES

February 2003

SWAN HILL
Rural City Council

Contents

Executive Summary 1
Introduction 2
Corporate Plan Direction 3
Community Focus 4
Services Provided 5
Community Need For These Services 13
- Need Recognised by Other Government Departments and Agencies 13
- Community Needs 14
- Need Recognised by Council 16

Consultation 17
Service Responsiveness To Community Needs 19
Accessibility Of Services To Target Groups 20
Best On Offer (Benchmarking) 22
Regular Reporting To Community On Service Standards And Levels Achieved 23
How Continuous Improvement Is Being Achieved 24
Partnerships With Third Parties To Achieve Service Objectives 26
Competitive Neutrality 28
Future Improvement Options 29
Quality And Cost Standards To Measure Performance Outcomes 30
Appendix 1 ..... Reference Documents
Appendix 2 ..... Community Survey Outcomes
Appendix 3 ..... Process and Outcomes – Consultation with Target Groups
Appendix 4 .. HACC – Eligible Target Groups and Priority of Access to Services

Executive Summary

Aged and Disability Services consist of fifteen Council programs, which together provide a wide range of services to the aged and disabled members of the community designed to enhance the independence of people in these groups, and to avoid their premature, or inappropriate, admission to long-term residential care. The services are provided in accordance with funding and service guidelines determined by the State and Commonwealth Governments

The latest Census data (2001) reveals that there are over 2,900 people aged 65 years and over in the municipality within a total population of 20,710. Each year Aged and Disability services expend in excess of $2.9 Million, of which the State and Commonwealth Governments provide $2.4 Million.

The Commonwealth and State Governments determine the target groups, service levels, methodologies and policies to be employed in the delivery of Aged and Disability services. As a result Council has limited discretion in the services delivered by these programs.

The Best Value Review has identified that the services have achieved the requirements of 'Best Value'. Specifically the services have:

- Assessed, in various ways with the community, the level of services required,
- Determined that the services are responsive to community needs
- Ensured accessibility by the intended target groups
- Developed standards to measure the quality and cost of the services delivered
- Continuously improve the services provided, and
- Regularly consult with appropriate members of the community in the development and delivery of the services.

The services are subject to constant review, both by government departments and program staff, who actively seek innovation in the way the services are delivered and the standards achieved.

Benchmarking of aspects of the services is being pursued in a number of forums, but results are unlikely to be available before next year.

This report demonstrates that the Aged and Disability group of programs have substantially achieved the principles of Best Value.

Introduction

The Aged & Disability Services Best Value Report has been developed in response to the Best Value requirements in the Local Government Act (1989). The Aged & Disability Services programs, itemised below, are grouped together because they share a common service objective, that is, the provision of supportive services that enable the frail aged and those with disabilities to maintain a level of independence in their homes, live safely, and participate in the community.

The community also views the programs as complimentary to each other. The services are provided throughout the municipality and, combined, facilitate the independent and safe living of the frail aged and those with disabilities.

It is the view of Council that Best Value relates to good management practice. Accordingly, grouping these services together is an appropriate way to review how they meet the greater objectives of Council, as set out in the Corporate Plan. Completing individual service reviews may not necessarily achieve this greater goal.

The programs that make up Aged and Disability Services for Swan Hill Rural City Council are:

Program No	Program Name	
5728	Aged Accommodation	
5729	Aged & Disability Service Management	
5750	Brokered Works	
5732	General Home Care	Home and Community Care (HACC) State Funded by Department of Human Services
5734	Home and Property Maintenance	
5736	Personal Care	
5737	Respite Care	
5738	Social Support- Volunteer Co-ordination	
5740	Food Services	
5758	Senior Citizens Centres	
5883	Social Support – Planned Activities	
5887	Home Care - Specific Target Areas	
5884	Commonwealth Respite	Commonwealth Funded
5885	Community Aged Care Packages- Internal	
5888	Community Aged Care Packages- External	

Corporate Plan Direction

The corporate plan has been developed by Council to provide direction and guidance to the organisation in developing and providing services to the community.

The Community Development and Well-being Goal provides direction for Aged and Disability services. Specifically:

> ***"To enhance community well-being, by facilitating community participation, and the provision of support networks and services that maintain the dignity, health, safety and well-being of our diverse community".***

The corporate plan goals are supported by strategies to achieve the desired outcomes. Aged & Disability services specifically address the following strategy:

> *"Facilitate or provide appropriate services necessary to support the well-being of the community".*

The outcome to be achieved through this strategy is a healthy and independent Community.

Within this context, the broad service objective for Aged & Disability Services is "to provide community care services to the frail aged and younger people with disabilities, and their carers, so as to enhance the independence of people in these groups, and to avoid premature or inappropriate admission to long-term residential care.

The Aged and Disability Programs aim to:

- Provide a comprehensive, coordinated and integrated range of basic maintenance and support services for the frail aged, people with a disability, and their carers.
- Support these people to be more independent at home and in the community, thereby enhancing their quality of life and/or preventing inappropriate admission to long-term residential care.
- Provide flexible, timely services that respond to the needs of its community.

Community Focus

Community expectations of Aged and Disability Services varies considerably, and at times is in conflict with the actual service delivered by Council. These expectations range from those that closely mirror the existing service arrangements, through to anticipating 24 hour "live in care" at no cost. Expectations vary from the belief that the services should only be provided to 'those who genuinely need it' to an expectation that the service should be made freely available to all pensioners. The different expectations of individuals within the community is affected by their own experiences, need for assistance, and knowledge of types of services available.

Community expectations of the type of work that can be performed is at times unrealistic or beyond what can be undertaken within legal or Occupational Health and Safety parameters. This ranges from tasks such as administering medication to moving heavy furniture.

Overall there is an expectation by the community that Council provides a service to those in need, to maintain their independence, and allow them to maintain their existing lifestyle.

Services Provided

Overview

The services are directed towards the frail, aged and people with disabilities and their carer/s, and are provided on the bases of assessed need and eligibility for any of Council's services.

People wishing to use the service, their family or friends may apply, and referrals are also received from other services such as Medical Practitioners and District Nursing. Council Assessment Officers undertake a comprehensive assessment that looks at the individual requiring assistance as a whole person in the context of their social situation, as well as their physical abilities. After receiving a request for assistance, an initial screening is done to determine the likely appropriateness of referral and likely eligibility. An appointment is then made for an Assessment Officer to visit the person in their home. Information, advice and assistance is provided to enable the person to make a choice from the service options available.

Specialist disability services are not provided, as they do not fall within the scope of Funding and Service Agreements with State and Commonwealth Governments. People with more complex needs are referred to a specialist agency, who may then access Council Aged and Disability services as part of the overall care of the individual.

Staff undergo a Police Check in accordance with Commonwealth and State guidelines. Home Carers are trained to become "multi-skilled" so that they are able to perform General, Personal and Respite Care. Some Home Maintenance Officers are trained in

some forms of therapy assistance, to provide support in authorised situations. All staff are trained to provide "social support".

Regular training specific to the client group is provided to all staff and targets areas for further development options are identified, either through the staff performance review process, or through the changing profiles of client groups.

New staff must demonstrate experience in the work to be undertaken. Opportunity is provided for traineeships to develop skills in other areas, such as personal care, and to receive a the minimum required formal qualifications of Certificate 3 in Community Services (Aged Care or Disability or Personal Care), and Level 2 First Aid through TAFE.

5730 Aged & Disability Service Management.

This program undertakes all aspects of managing and coordinating the variety of programs provided under Aged and Disability Services to achieve the best outcome for each individual client. This includes;

- Budget development and control
- Funding - submission preparation and grant acquittals
- Strategic planning
- Consultation with agencies and the community
- Staff management, training and review
- Service evaluation and improvement
- Ongoing service planning and management
- Evaluating potential clients' eligibility (includes demand management)
- Periodic review of existing client needs/satisfaction

From the service delivery perspective the major function of this program is the assessment of the needs of the potential client, planning their care, and periodic reviews that identify how well the care plan meets existing and emerging needs.

A significant focus of the assessment, in addition to determining service eligibility, and development of an overall care plan, is the development of a rapport with the client and their carer(s), to enable a full assessment of the person and their support network, rather than a formal form-filling process. This may involve a number of follow up visits.

A Client Information and Referral Record (CIARR) is used to document client information, with consideration to the following details:

- Level of need - dependence on service, family or other support networks.
- Involvement of other agencies - potential to liaise with these using "case management" or team approach to service delivery.
- Individual requests, requirements etc, especially identifying the tasks clients require to be completed.
- Respite or Specific care - additional details of client's routine, therapy or implementation of other programmes, medications, specific requirements.
- Financial details for calculating service cost.

- Aids - presence of ramps, rails etc, or whether they may be necessary.
- Safety check - type and state of floor surfaces, e.g. slippery tiles, rugs, uneven edges, presence of animals, smoke detectors, other alarm systems, ability of the person to use the telephone.
- Ownership of necessary equipment, cleaning agents etc.

A flow chart of the formal assessment undertaken for Home and Community Care services is on the following page.

Service recipients' health, wellbeing and needs are monitored non-intrusively by the direct care worker, or during contact with other members of the team. Any significant changes are documented in the client's record and, where appropriate, further referrals and/or reports are provided to other health care providers. More formal monitoring occurs through formal care plan meetings with other providers, the client and their carer.

5732 General Home Care

General Home Care is provided by experienced staff who are qualified or are undertaking training to gain Certificate 3, as stated above. The program allows clients to remain in their own home by undertaking household tasks that they are unable to perform. Typical services provided include;

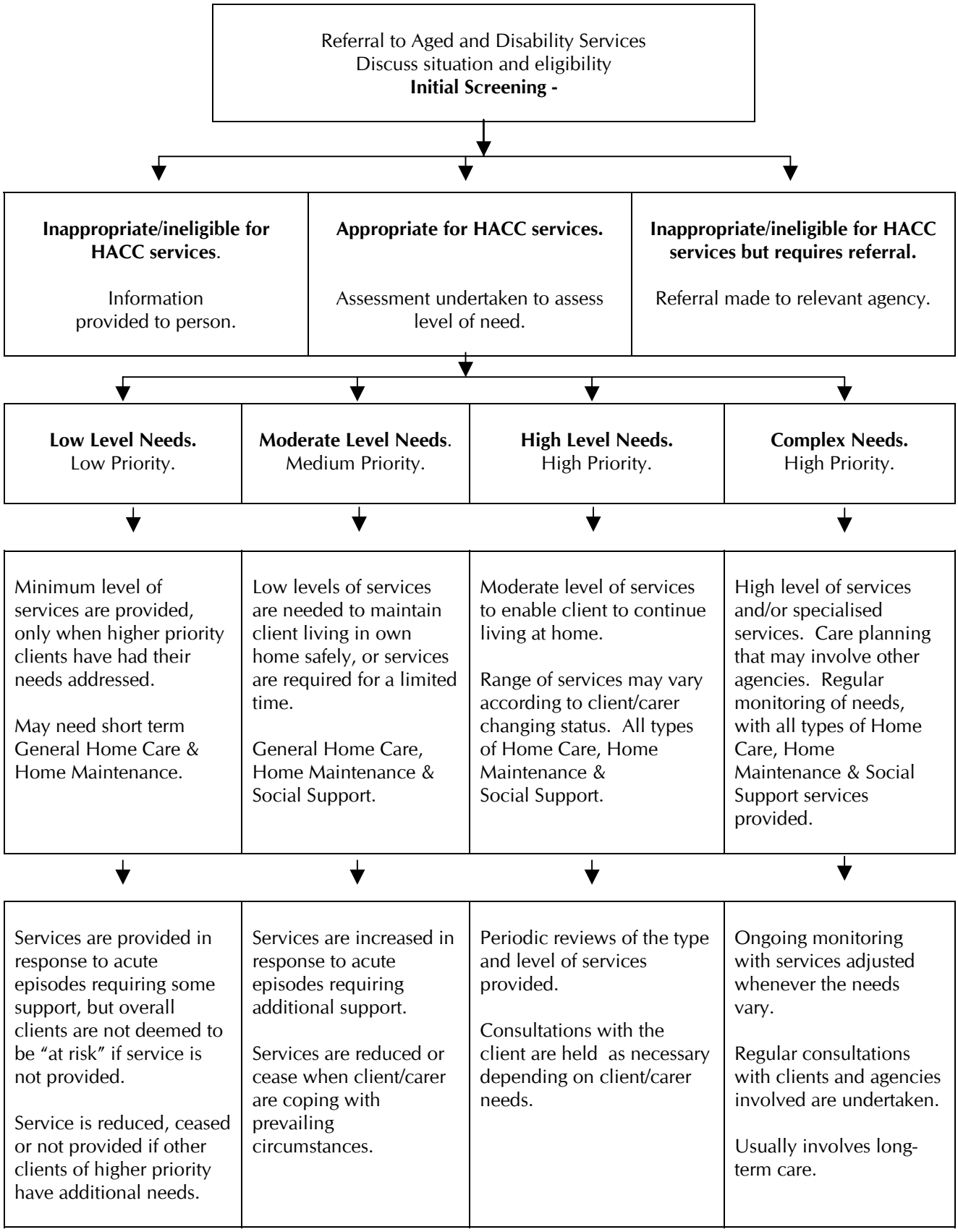
- Household cleaning including vacuuming, washing floors, cleaning bath, shower, toilets.
- Washing and ironing.
- Bed making and changing linen.
- Mending and sewing.
- Shopping, banking, paying bills.
- Driving - provision of transport assistance for clients for purposes such as medical appointments or shopping.

5734 Home and Property Maintenance

This is provided by specialised Home Maintenance Officers, which have experience and recognised trade certificates such as, Horticulture, Building, and Level 2 First Aid. The service allows for minor maintenance to be undertaken on a client's home facilitating their safe independent living. Maintenance undertaken includes;

- Internal minor repairs.
- Changing batteries in smoke alarms.
- External window cleaning.
- Cleaning of spouting and downpipes.
- Garden maintenance tasks.
- Tree trimming and removal of clippings.
- Installation of various safety aids such as ramps and handrails.

Flow Chart - Eligibility for HACC Services



Indicators For Each Level Of Need

Level 1 - Low	Level 2 - Medium	Level 3 - High
• Experiences regular or irregular difficulty with minor tasks of daily living. • Infrequent but regular general health difficulties. • Socially or geographically isolated. • Carer stress.	Any combination of: • Unstable health. • Little family or other support. • Unable to monitor own medication. • Experiences difficulty with one or two tasks of daily living. • Moderate frailty/some confusion. • Socially or geographically isolated. • Limited mobility. • Carer stress.	Any combination of: • Unstable health - long term. • Lives alone or with a carer who is frail, ill, stressed or who has a disability. • Unable to make own decisions. • Unable to monitor or administer medication. • Experiences difficulty with a range of tasks of daily living. • Socially or geographically isolated. • At risk/vulnerable. • Complex needs.

Client Characteristics

Level 1 - Low	Level 2 - Medium	Level 3 - High
• This person's health is stable. • They do not normally require a package of care but a minimal ongoing service or specific assistance such as Allied Health or General Home Care	• This person has either unstable health, or their disability requires ongoing support, with a package of care from a range of services. • They are generally able to make own decisions but require ongoing monitoring. • May require after hours services.	• This person is most frail or vulnerable, and are possibly unable to make their own decisions (dementia sufferers). • They may be at risk if regular and frequent assistance is not provided. • They require specialist trained workers and a more co-ordinated approach. • Access to 24-hour services if a crisis occurs.

Services are directed to clients in the following order:

Level 3 – HIGH PRIORITY Level 2 – MEDIUM PRIORITY Level 1 – LOW PRIORITY

5736 Personal Care

The Personal Care program provides assistance with personal hygiene tasks and can include assistance with a range of activities of daily living, and appropriate skills development. This program is aimed to assist younger people with disabilities, and their carers, as well as older frail people. Staff providing personal care have recognised qualifications such as, Nursing, Personal Care Attendant or TAFE Certificate 3 (including units on Personal Care).

Typical services provided under the Personal Care program include;

- Support, including personal care for the person with a disability.
- Implementation of specific individual program plans, and therapeutic programs developed by professionals under their guidance and liaison.
- Provision of transport assistance for clients for purposes such as medical appointments or shopping, banking, paying bills.
- Maintain the wellbeing of clients by enabling their involvement in therapeutic programs and activities that promote independence, self-esteem and skills development.
- Dressing and undressing.
- Personal grooming, toileting and showering.
- Eating assistance, food preparation.
- Fitting of aids and appliances, splints and callipers.
- Mobility assistance.
- Monitoring and (non-nursing) administering of medication.
- Shaving.
- Dental hygiene.

5737 Respite Care (HACC) and 5884 Respite Care (Commonwealth)

These programs provide a substitute for the primary carer of a dependant person in a manner that enhances the client's wellbeing and self-esteem. Respite Care covers a range of activities as outlined in the HACC Manual, is provided when the respite requirement of the client and/or the primary carer is to provide assistance with Activities of Daily Living, including housekeeping, to enable the primary carer to "take a break" from performing these tasks.

Typical services provided under the Respite Care programs include;

- Assistance with appointments.
- Personal care.
- Monitoring and supervision of medication.
- Housekeeping (as in General Home Care).
- Assistance with appropriate tasks normally provided by primary carer, such as recreational and leisure activities.

5738 & 5883 Social Support

Social Support provides both planned activities for eligible persons to participate in, such as trips to the theatre, community and special events such as "Senior Citizens' Week", and volunteers to support a person by escorting and transporting them to appointments, such as specialist medical treatment.

5740 Food Services

Food Services are still referred to, and may be better known as "meals on wheels". Meals are provided to people in their homes, or at some group settings. Nutritious and culturally appropriate meals are ordered and coordinated by Aged & Disability staff, meals are cooked by Swan Hill, Nyah and Manangatang hospitals, and are delivered by volunteers. Food services for the Robinvale district are funded and managed through the Robinvale Multipurpose Health Service.

5887 Home Care - Additional Funding

From time to time government funding is provided to address specific target areas such as "Hospital to Home", "Allied Health", "Nursing" or "Flexible Service Response". This funding is often provided as a "one off" to meet specific needs that have been identified and reported to the Department of Human Services.

Services are provided to meet the stipulated funding criteria, which identify both the service(s) and the recipients.

5750 Brokered Works.

Under the Compulsory Competitive Tendering regime (CCT), the Aged and Disability Business Unit developed a program to meet community needs for assistance that fell outside of the contracted HACC services agreement. That is, provided Home Maintenance or General Home Care at commercial rates to people ineligible for Home and Community Care services. These services are provided at commercial rates, at full cost recovery. The demise of CCT did not see a similar demise in need from the community for these services, which are delivered when excess capacity allows.

There are many different organisations that receive funding from the Government to provide assistance to specific target groups. Some of these organisations are unable to deliver all aspects of the service required by their clients. These services are then "brokered" or purchased from other service agencies at a commercial rate. The Aged and Disability group of services provide specialist staff at full cost recovery rates to such agencies.

5885 & 5888 Community Aged Care Packages (CACP)

Community Aged Care Packages (CACP) are Commonwealth funded packages of care for independently assessed persons who are eligible for "hostel level" care, but who wish to remain living at home with additional supports.

Swan Hill Rural City Council is the "lead Agency" for Municipalities in the Loddon Mallee region and employs a Regional Coordinator who assists each Council meet the requirements of the CACPs, and to develop quality systems with a view towards future accreditation.

As lead Agency, Swan Hill Rural City Council is responsible for all aspects of funding submissions, financial reporting and acquittals to the Commonwealth, data collection, distribution of CACPs and developing procedures and protocols for use by all the Councils.

5728 Aged Accommodation.

Council is involved in the provision of aged accommodation in two ways, through Ministry of Housing Units, and the Lloyd Street, Nyah West Special Units.

There are six Ministry of Housing properties located throughout the municipality. These properties were originally owned by Council, and built under agreement with the Ministry of Housing. Upon completion of these units the ownership was transferred to the Ministry, who manages the day-to-day operations. Council's only involvement with these units is the maintenance of the grounds (lawn mowing and some gardening). This responsibility stems from the original agreement with the Ministry to develop the units.

These properties are inhabited primarily by aged persons, and residency is determined by the Ministry, after contacting the Council's Aged & Disability section to identify priority of persons on the waiting list.

The Lloyd Street, Nyah West units were constructed by Council in the late 1980's in response to a perceived need for independent aged accommodation in Nyah West. There are four units on the site. Two of the units have long-term aged tenants under contract management, executed in the early 1990's. The other two units are leased to aged tenants on a commercial basis.

5758 Senior Citizens Centres

There are six Senior Citizens Centres in the municipality at the following locations:

- Lake Boga (shared premises).
- Manangatang (stand alone premises).
- Nyah (shared premises).
- Robinvale (stand alone premises).
- Swan Hill (stand alone premises).
- Ultima (shared premises).

Council owns each of these properties and is responsible for the maintenance and upkeep. The local Senior Citizen's Committees operate the centres with some financial and other support from Council. Other support includes Meals on Wheels (for some centres on certain occasions) and social support through programs 5739 and 5883.

Community Need For These Services

There are 2,937 people aged 65 years and above in the Swan Hill municipality within a total population of 20,710 according to the Australian Bureau of Statistics. The table below shows a distribution of people over the age of 65 within the municipality.

Location	No. People over 65
Swan Hill Township	1,300
Robinvale	307
Nyah/Nyah West	211
Lake Boga	90
Manangatang	68
Ultima	30
Remainder of the Municipality	931
Total	**2,937**

The baseline age used by the Department of Human Services has recently increased from 65 to 70. This has had the result of artificially reducing the apparent level of need in the municipality, and the attendant funding. The number of people aged over 70 years within the municipality is 1,886, which is significantly less than the statistics used in 2001. Further more, there is no recognition in these statistics of people under the age of 70 (or 65) with a disability and in need of services.

The only statistics available in relation to people with disabilities is Commonwealth data in relation to people on a disability pension. However, this is not an indicator of people with disabilities in need of additional support. Current Aged and Disability services records indicate that as many as 10% of the existing client base are affected by disabilities.

Unfortunately, existing records do not distinguish between clients on an age or disability basis, and as a result, the impact of the recent change in funding criteria cannot be determined at this time.

Need Recognised by Other Government Departments and Agencies

All tiers of government recognise the need to provide a range of supports for people who have a disability or are becoming frail due to older age that will enable them to live safely at home and participate in their community.

Federal and State Governments have increasingly moved away from institutionalised care of the frail, aged and people with disabilities over the last two decades, such as disability accommodation, acute hospitals and nursing homes, and moved towards providing a more community based care. This trend is partly due to the lower cost of providing community based care as compared to institutionalised care.

To support this trend, there is a need for community based support services, a fact acknowledged by both the Commonwealth and State Governments. The Commonwealth makes funding for support services available both directly to Local Government and other

service providers, and to the State. The Victorian State Government matches the funding received from Canberra, and then (through the Department for Human Services) distributes the funding to Victorian Local Government to deliver HACC services in accordance with their funding guidelines. Effectively this means that the Commonwealth and the State determine service levels, costs and service recipients.

Swan Hill Rural City Council receives funding directly through the joint Commonwealth and State funded HACC program ($976,623 in 2001/2002) and Commonwealth funded CACP program ($1,423,798 in 2001/2002).

Government also provides indirect funding through "brokerage" arrangements, where funding is provided to agencies responsible for specialised areas of need, such as "homeless", Post Acute Care, Palliative Care, and Dementia. These agencies, in turn, purchase required services, such as Home Care and Home Maintenance, at full cost recovery.

Community Needs

Community need for these services is evident through existing usage levels, the number of referrals and requests for assistance from the community, and other services/providers such as medical practitioners and hospitals.

Community consultation with providers and client groups, regarding Aged Services, noted the following major contributing factors to clients "feeling safe" and "feeling less alone":

- "Knowing someone is visiting regularly such as meals delivery and chat, and all in home support services provided by Council (from Home Care to Home Maintenance) more than District Nursing.
- Condition of home environment so that it is both clean, safe and appears lived in deters intruders.
- Knowledge that the same staff come regularly and as an ongoing process to help monitor the client, and these staff are local and have passed a satisfactory recruitment process to work for a known organisation (Council)".

Factors such as an increasing aged population, changes in federal and state government policies and funding, especially those relating to institutionalised care facilities, means that community expectations usually exceed available resources.

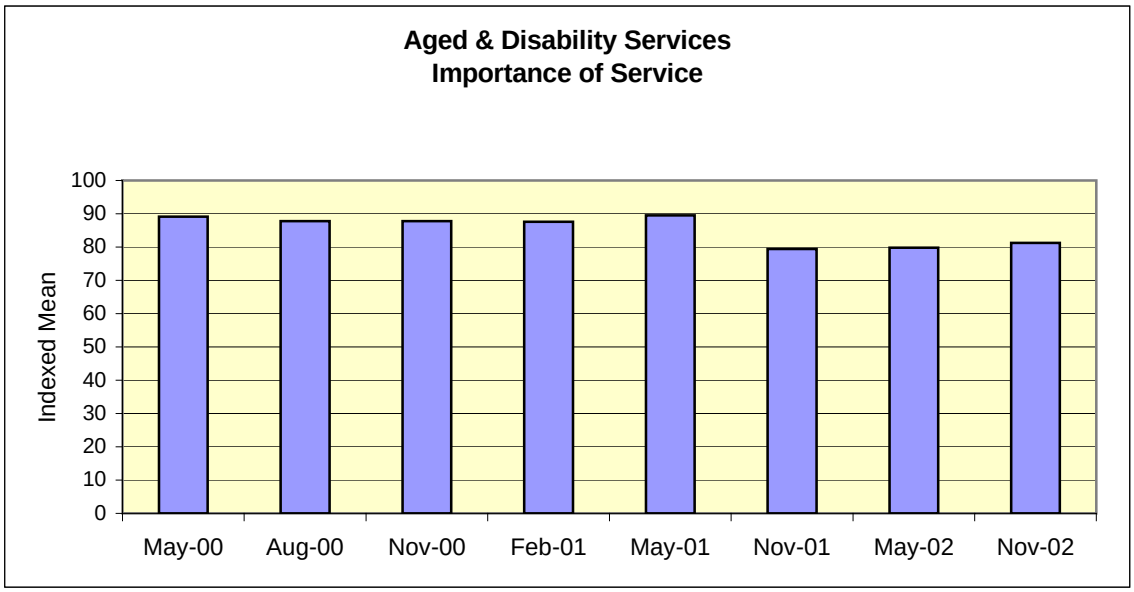
The following table documents that the actual number of hours of Home and Community Care delivered by Council exceeds the amount of HACC hours funded by the State Government, demonstrating the needs for the services by the community.

Type of HACC Service	No. Of Individuals Assisted	DHS Target Hours	Total Hours Provided 2001/2002
5732 General Home Care	460	6,605	16,718
5734 Home & Property Maintenance	350	4,151	6,001
5736 Personal Care	70	3,797	4,364
5737 Respite Care	131	4,040	7,397
5738 Social Support, Volunteer	220	5,500	9,030
5740 Food Services	300	22,629*	22,518*
5883 Social Support – Planned Activities	260	3,191	7,146
5887 Specific Target Areas	100	1,200	1,400

* Number of Meals provided

Council undertakes regular Community Satisfaction Surveys (see Attachment). The surveys not only seek to identify satisfaction in the community with a range of Council services, but also the importance of services provided. The surveys consistently show that the community views the provision of services to the aged and those with disabilities as essential for the Swan Hill municipality. The following graph shows the importance the community attaches to the availability of this group of services, which are consistently rated between 80-90, on a scale of 100.

Comments provided on the survey commend the services and emphasise their importance to the community. The meals on wheels service receives praise, as do the home carers. However, whilst the gardening/handyman (home maintenance) service receives similar satisfaction, there are regular comments calling for increased availability of the service, indicating an unmet need within the community.



Need Recognised by Council

In December 2001 Council adopted the Municipal Public Health Plan, which analyses the health needs of the community and identified that the services provided under the Home and Community Care agreements, and the Commonwealth Aged Care packages are essential for the continued health and well-being of the community.

The plan does not identify any unmet needs in the area of aged and disabled care from a health perspective, which indicates that current services address community needs.

The current service levels provided are in excess of levels determined by other tiers of government as identified on the previous page. This reflects Council's perception of community needs, which is in excess of that provided for through funding arrangements. The Aged and Disability programs expend in excess of $2.9 Million per annum, of which the State and Commonwealth governments provide $2.4 Million. The balance of the funding is provided by user contributions, full fee for service (ie brokered works) and by Council.

Consultation

Consultation with service recipients is regularly undertaken through a number of means, the main ones being:

- Consultation with Target Groups
- Consultation with Service Providers
- Feedback from individual Clients
- Community Satisfaction Surveys

Consultations with Target Group and Service Providers take place locally to:

- Determine the needs of people within the HACC target group (i.e. those who are aged, have a disability, and their carers).
- Determine the effectiveness of meeting these needs from the perspective of service providers and the community.
- Determine gaps between needs, actual service provision, funded service provision, and optimum levels of service/funding needed to meet these needs
- Determine the priorities set by the HACC target group for provision of services, and subsequent funding distribution.
- Determine the priorities set by Service Providers to address gaps between actual service delivery and what has been identified as unmet needs within their own client group, prior to the formal consultations.
- Evaluate and agree on priorities within the Swan Hill municipality for recommendation to federal and state government funding through Department of Human Services, HACC program.

Processes used in consultation with target groups and the outcomes are included as an attachment to this report. The consultation results are used as a basis for subsequent applications for funding to deliver the ongoing services. The consultation outcomes enables Council to tailor the funding application to target the highest need in the community.

Regular meetings are held with service providers (staff) both individually, and as a group to identify (inter alia) whether there are unmet needs in the community or whether there are better ways of delivering the services.

Similarly, there are regular discussions with clients in relation to their care, services received and any other feedback on the standard and extend of Aged and Disability service provision.

The wider community is consulted on services to the aged and those with disabilities through Council's regular Community Satisfaction Survey, which first commenced in May 2000 on a quarterly basis, and performed every six months since November 2001.

The Community Satisfaction Survey consists of a telephone survey of one hundred respondents randomly selected from a database of the municipality. Respondents are asked to rate how well they think Council provides services, e.g. personal care, respite care, meals on wheels, and home maintenance etc. Respondents are also asked to rate how well they think Council provides infrastructure, such as sufficient disabled parking, disabled toilets and easy access to public buildings. Survey respondents are also encouraged to provide comments (see attachment). Overall, the surveys consistently identify high community satisfaction with the aged and disability services delivered by the Council.

Service Responsiveness To Community Needs

Many guidelines issued by the Victorian and Commonwealth governments influence the scope of Aged and Disability Services delivered to the Swan Hill Rural City Council community. There is no "one size fits all" method of meeting community needs and expectations.

Agencies that provide HACC Program services are required to deliver high quality services to consumers, as outlined in the Home & Community Care (HACC) Program Manual, and in accordance with the following national policy documents:

- Getting it Right (Guidelines for the HACC Program National Service Standards).
- Statement of Rights & Responsibilities.
- HACC National Standards Instrument & Guidelines.
- HACC Program Complaints Policy.

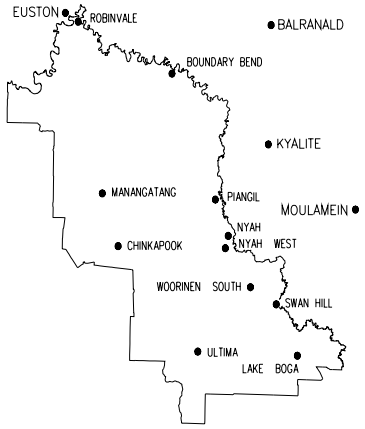
Access to Home and Community Care Services is decided on the basis of relative need of people within the target group. Because demands and need for services exceeds allocated resources, it is necessary for decisions to be made to ensure persons within the target group, and who have the highest level of need, are given priority of access to the available resources of the Aged and Disability Services.

"Priority of Access" guidelines are used (refer attachment), to assist the evaluation of the overall situation of the individual requiring service. The guidelines assess level of ability, available support network, and types of assistance required. The results are used in conjunction with the professional judgement of the Assessment Officer and/or their Supervisor. The overall needs of the individual, their carer, and input from relevant persons such as other service providers, are also taken into consideration when ascertaining allocation of Services.

However, the guidelines are developed by Commonwealth and State governments to address their perception of community needs. To the extent that the local community reflects national and state needs, these guidelines and processes are appropriate.

To ensure that local needs are being met, the outcomes of community consultation (refer pp 16 – 17), are incorporated into funding applications, so that future funding addresses any unmet needs in the community.

Accessibility Of Services To Target Groups



The Swan Hill municipality covers an area of 6,132 square kilometres. Approximately half of the municipal population resides in Swan Hill, with a further twenty percent residing in Robinvale. The remainder of the population resides throughout the municipality.

Services are provided to residents in their homes throughout the municipality. Services are available, and allocated, depending upon results of Assessment and Care Planning. Personal Care and planned Respite Care are available on weekends and after business hours, where necessary. General Home Care and Home Maintenance are provided during business hours only, as there is no emergency service for clients due to the nature of the service.

The following table of Staff and volunteer distribution throughout the municipality, and indicative numbers and distribution of clients, show that generally geographical issues are addressed.

	Clients*	Staff	Volunteers
Swan Hill	361	20	155
Nyah District	46	6	25
Lake Boga	29	4	1
Ultima District	9	1	0
Woorinen	16	2	2
Piangil	13	0	0
Manangatang	26	2	16
Robinvale	52	6	73
Boundary Bend	3	2	0
Tyntynder District	11	1	1
Total	**566**	**44**	**273**

* Clients refer to client households, which often include more than one person in receipt of Aged and Disability Care services.

As can be seen, staff providing Aged and Disability services live in towns spread across the municipality, enabling services to be delivered more frequently and efficiently than if resources had to be spent on travel costs. Innovative means to deliver services have been developed, such as two staff travelling together to provide, for example, general cleaning and lawn mowing services at the same time. Similarly, arrangements have been made with other organisations to have, for example, an Occupational Therapist from the hospital visit with Aged & Disability's Assessment Officer.

Supply of meals, and delivery by volunteers, in some isolated areas creates challenges that have been overcome through options such as having local hotels or milk bars prepare and deliver meals, or engaging service clubs or church groups.

Transportation of clients is limited due to various Guidelines and Acts. Where it is provided to people who have to travel long distances to appointments, Aged & Disability staff endeavour to get doctors appointments for several clients on the one day, so that they can travel together with one volunteer.

Best On Offer (Benchmarking)

Best Value legislation suggests that Council may wish to compare a service to the best on offer both in the public and private sectors. Such a comparison is usually undertaken in the form of benchmarking. The status of benchmarking being undertaken by the Aged & Disability Services is as follows:

Loddon/Mallee Region Services

The Aged & Disability Program Managers/Community Services Officers of the ten Local Governments in the Loddon/Mallee region meet regularly, and have been benchmarking their services to varying levels of formality for some years. Managers from the Swan Hill Rural City Council, Greater Bendigo City Council and Campaspe Shire Council met with Department of Human Services (DHS) during 2001 and 2002 to raise departmental awareness of variations in HACC services across the region. The result of these meetings is that the DHS is likely to fund a "Demand Management Project" in 2003 for the Loddon/Mallee region.

'Super 11' Benchmarking Group

Swan Hill Rural City Council is a member of the 'Super 11' benchmarking group, which consists of 11 similar municipalities. Each of the participating municipalities is rural, with populations of approximately 20,000 – 25,000, and has a large urban centre with a large rural population. The group undertakes both process and performance benchmarking of a number of services. One of the services being benchmarked is Aged & Disability Services. To date the group have been developing benchmarking categories, classifications and priorities. The project is expected to be completed in the next financial year.

Community Aged Care Packages

Benchmarking of Community Aged Care Packages has been undertaken over the past two years. However, data available to be released publicly has been limited due to the many different and new agencies (including private sector) still gaining knowledge of the program. For the CACPs managed through the Swan Hill Rural City Council, training sessions have been conducted, and preliminary guidelines established, that are in line with benchmarks established to date. This process is continuing, with the Commonwealth re-commencing data collection in 2002/2003.

Regular Reporting To Community On Service Standards And Levels Achieved

The Best Value legislation requires that Council regularly report to the community on the achievement of best value principles. Currently, this is achieved through:

- Newsletters issued to existing clients 2 to 3 times per year.
- Regular meetings with other Service Providers.
- Consultations, information sessions or guest speaking at relevant community groups such as RSL, Senior Citizens, Day Centres, Royal Victorian Institute for Blind, Council of the Ageing, Early Intervention, Noah's Ark and so forth.
- Public information sessions have been conducted by Aged & Disability Services. These have been so successful that the Community (of target group members) have asked that these be held at least six-monthly.
- Media releases - used when special events take place such as Senior Citizens Week.

How Continuous Improvement Is Being Achieved

Aged and Disability services programs achieve the requirements set out by the funding bodies. In addition, staff are proactive in identifying ways to more fully meet the needs of those utilising the services, and identifying ways in which the total needs of the client can be better addressed and to improve the quality of the services provided.

Continuous improvements undertaken in recent times include:

- Staff training to enhance the ability of staff to deliver services, such as, some Direct Care staff have undergone training in assessments and reviews, so may be asked to conduct initial assessments for special needs, and Council has been involved in designing appropriate accredited courses with TAFE.
- Self-rostering by direct care staff to better address the needs of clients and of the staff. This has resulted in greater autonomy and responsibility by the staff, a reduction in the workload of administrative, non-service delivery staff, resulting in higher service levels, and staff who have their abilities recognised.
- Home Maintenance staff working from "home to home" i.e. they do not have to travel to a depot to begin work, resulting in higher service delivery levels.
- Enabling clients to be involved in their care - helping make decisions, choice of carer where possible, and encouragement to do what they can to maintain their independence and social interaction.
- Relationships have been developed with other organisations to achieve joint approaches to planning for better client care and for service improvements. Council also offers support to sole workers of some other agencies.
- Partly resolved some "Cross Border" (NSW) issues through development of a joint protocol with Wakool Council's HACC department. This is built on trust and is aimed towards getting services to those in need. Swan Hill Rural City Council's HACC staff conduct assessments, as Wakool Council has only one part-time officer available to do this. All services provided to Wakool Council are at cost recovery rates.
- Use of local businesses, and especially provision of meals, through local hotels, cafes etc, for people who would otherwise not be able to receive meals.
- Culturally appropriate meals are provided through having a staff member cook with the family, using their ingredients, and taking direction in how to prepare the food.
- Volunteer recognition, through certificates of appreciation and of service, and being offered training in areas such as bereavement.
- Local taxis are also used to provide transport, and drivers are invited to appropriate training.
- Combining a range of HACC services to clients so that they are delivered concurrently, and the co-ordination of service delivery with that of other clients such as timing appointments to doctors at similar times so that a number of clients can be transported in the same vehicle to encourage greater social interaction.

Local Employment Growth/Retention

Forty Part Time Home Carers and four full time Home Maintenance Officers live and work across the entire municipality as demonstrated in the following table:

Swan Hill	20
Nyah district	6
Lake Boga	4
Ultima District	1
Tyntynder, Woorinen District	3
Manangatang	2
Robinvale	6
Boundary Bend	2
Total	**44**

Robinvale, Boundary Bend and Manangatang receive their Home Maintenance service primarily through a Robinvale based contracted lawn mowing and gardening business. When necessary, a Swan Hill based contractor is used in the southern part of the municipality to supplement the work undertaken by Council staff during peak periods.

In excess of $1.21 Million is expended on wages per annum within the municipality from this group of services, providing a significant flow on effect to the local economy. In addition, over $173,000 is paid to staff annually in travel reimbursements, and $24,000 to local contractors.

Community Aged Care Packages and "Additional Funding" purchase services such as physiotherapy, massage, chiropractic, and equipment from local health professionals, thus helping to provide funds that attract and retain some of these other professionals to this area, with the flow on benefits to the remainder of the community.

The Aged and Disability services provide significant employment within the municipality, both directly and indirectly.

Partnerships With Third Parties To Achieve Service Objectives

A number of significant partnerships have been developed in order to effectively deliver Aged and Disability services to the community. These partnerships can be broadly stratified into 'Other Council Departments', 'Other Government Sector' and 'Private Sector'.

Other Departments in Swan Hill Rural City Council

Other departments within Swan Hill Rural City Council that facilitate service delivery, or assist with the delivery of services include;

- Maternal & Child Health who identify children with special needs
- CSRDO – who seek to maximise access to support services for children with disabilities.

Other Government Sector

Aged and Disability services have developed a wide number of effective networks with other government sector bodies. These bodies include;

- Wakool Council (NSW) for cross state border issues.
- Other Local Governments in Loddon Mallee region (Mildura, Gannawarra, Buloke, Bendigo, Campaspe, Loddon, Central Goldfields, Mt Alexander, Macedon Ranges.) Achieved the exemption to provide CACPs. Joint initiatives include Veterans Home Care, Demand Management Project, Assessments for TAC.
- Rural Access Project Workers.
- Department of Human Services.
- Aged Care Assessment Team.
- Robinvale & Swan Hill Aboriginal Co-operatives.
- University of Third Age.
- Police- Community policing.
- Public & Private hospital discharge planners and welfare workers (Including non locally based).
- Disability Groups and other Support groups.
- Royal Victoria Institute of the Blind.
- Department of Veterans Affairs.
- Community Aged Care Providers.
- Bendigo Health Care Group- including locally based workers.
- District Nursing.
- Swan Hill Hospital Acute, primary care and HACC programs.
- Robinvale Community Health and Multi-Purpose Service.
- CACPs providers.
- Murray Human Services.
- Special Development School.

Private Sector

Partnerships are formed with a number of private sector operators, including;

- Accommodation providers.
- Council of the Ageing.
- Senior Citizens Clubs.
- Meal providers.
- Service clubs, notably Rotary.
- RSL, Legacy and members.
- Noahs Ark, early intervention.
- Service provider meetings of different memberships, and with visiting practitioners, in Robinvale and Swan Hill.
- Medical Practitioners.
- Private providers of 'HACC like' services including physiotherapy, naturopath, and chiropractic.

Competitive Neutrality

The National Competition Policy (NCP) was first applied to Local Government by the Victorian State Government in 1996/1997. The application of the policy was reviewed by the State Government in 2000, and further refined in 2001.

The Swan Hill Rural City Council first reviewed the application of NCP on Aged and Disability Services as part of the implementation of Compulsory Competitive Tendering (CCT). With the demise of CCT, and the implementation of Best Value, as well as the amended application of NCP to Local Government, it was determined to review the National Competition Policy implications on Council's Aged and Disability Services as part of the Best Value review.

The National Competition Policy Review – Aged and Disability Services report identifies that the majority of services provided for the Aged and Disabled by Council are subject to funding arrangements which prohibit the charging of fees beyond the ability of the service recipient to pay. As a result, these services do not represent a business, and NCP does not apply.

Some services do charge a fee, with the fees representing full cost recovery, and complying with National Competition Policy guidelines.

The National Competition Policy issues, as they apply to these services, have been reviewed in detail in the report, which concludes that the services comply with the spirit of the policy.

Future Improvement Options

Options to further improve the services in the future include:

- Accreditation as it is introduced for CACPs and HACC, possibly in 2004.
- Continue to work with other municipalities and tiers of government to develop and implement strategies towards Quality and Best practice.
- Participation in previously mentioned projects including Demand Management and Program Development.

Quality And Cost Standards To Measure Performance Outcomes

Quality and Cost standards are required under Best Value for all Council operations. The Quality and Cost standards should reflect measures by which the community may measure the performance of a service. The actual standards achieved each year must be reported annually in Annual Report of the municipality.

Quality Measures

It is difficult to measure quality for such a wide range of services, particularly when the service levels and standards are so heavily impacted by the requirements of other tiers of government. However the following table contains four standards that we believe will measure the quality of the services delivered;

Quality Standard/s	**Year 02/03**	**Year 03/04**	**Year 04/05**
Client Needs Review of Existing Clients to assess appropriateness of Service levels, whether service standards are being achieved and to reassess the needs of the client; • High needs clients • Medium needs clients • Low needs clients	 100% 25% 10%	 100% 50% 25%	 100% 75% 50%
Physical Safety Undertake a physical safety assessment of the home environment, and ensure that it is at the required level; • Initial for new clients • Review of existing clients	 100% 25%	 100% 50%	 100% 75%
Government Requirements Compliance with grant conditions and service requirements	100%	100%	100%
Community Perception of Services Community Satisfaction Rating per Council's regular community survey	78	78	78

The above quality standards apply to the following programs:

5732 *General Home Care*
5734 *Home and Property Maintenance*
5736 *Personal Care*
5737 *Respite Care*
5740 *Food Services*
5884 *Commonwealth Respite*
5885 *Community Aged Care Packages - Internal*
5886 *Community Aged Care Packages - External*

Cost Measures

Cost standards purport to measure the efficiency of the services being delivered. Again it is difficult to identify standards that do in fact measure efficiency, as there are many issues and events that impact on the cost of a service. However, the following standards have been developed in an attempt to determine the efficiency of service delivery;

Cost Standard/s	**Year 02/03**	**Year 03/04**	**Year 04/05**
Average cost per Service Hour This is measured as the total cost of a program divided by the total number of service hours delivered to the client.	**$**	**$**	**$**
• *(5732) General Home Care*	28.25	30.22	32.34
• *(5734) Home and Property maintenance*	28.50	30.50	32.65
• *(5736) Personal Care*	27.00	28.80	30.80
• *(5737) Respite Care*	30.10	32.25	34.50
Average Cost per Meal This is measured as the total cost of the Food services program divided by the number of meals delivered to clients	6.80	7.20	7.70
Average Cost to Maintain Aged Accommodation This is measured as the total cost to maintain Aged Accommodation facilities divided by the number of properties maintained	37,990	37,800	40,824

(5885) (5888) Community Aged Care Packages (CACPs)
The Commonwealth is currently working on cost standards for Community Aged Care Packages. In accordance with Funding Submission conditions, 112 CACPs, with their allocated payments, are made to 9 other Councils, and 13 CACPs are allocated within the Swan Hill municipality. Therefore, cost standards for these services are deferred until the Commonwealth completes its review.

SWAN HILL
Rural City Council

Appendix 1

Reference Documents

The following documents have been referred to in the compilation of the Best Value Report for Aged & Disability Services:

- **Community Aged Care Packages Program Guidelines**, (1997), Commonwealth Department of Health and Family Services. Records File No: 203902.
- **Draft Personal Care Policy**, (1998), Department of Human Services. Records File No: 201699.
- **Fees Policy: Home & Community Care Program**, (1998), Department of Human Services. Records File No: 201699.
- **Funding and Service Agreement Number 6830 Between Swan Hill Rural City Council and Department of Human Services 2000-2003**, (2000), Department of Human Services. Records File No: 201601.
- **Getting it Right, Guidelines for the HACC Program**, (1993), National Service Standards, Commonwealth of Australia. Records File No: 201600.
- **HACC Funding Round 2002/03 Regional Planning Process for Swan Hill Rural City**, (2002), Swan Hill Rural City Council. Records File No: 201601.
- **HACC Information Resource Kit**, (2002), Loddon Mallee, Department of Human Services, Victoria. Records File No: 201600.
- **The Victorian Home and Community Care Program Manual**, (1999), Department of Human Services, Aged Care Branch, Melbourne. Records File No: 201600.
- **Veterans' Home Care Guidelines**, (2002), Commonwealth Department of Veterans Affairs. Records File No: 201626.

SWAN HILL
Rural City Council

Appendix 2

Community Survey Outcomes

SWAN HILL
Rural City Council

EXTRACTS FROM REGULAR COMMUNITY SURVEYS CONDUCTED BY SWAN HILL RURAL CITY COUNCIL FOR THE PURPOSES OF INFORMATION TO AGED & DISABILITY SERVICES FOR FUTURE PLANNING NEEDS

SWAN HILL RURAL CITY COUNCIL COMMUNITY SURVEY ANALYSIS OF AGED & DISABILITY SERVICES

Community Survey

The Swan Hill Rural City Council commenced quarterly surveys of the community in May 2000, covering a range of services that Council provides, including Aged & Disability Services.

In May 2001 an analysis of the five surveys conducted to that date, revealed that the data remained consistent, other than items affected by seasonal changes, for example, the condition of unsealed roads. Therefore, Council determined to reduce the number of surveys conducted to twice yearly.

Surveys of the community have been conducted in May 2000, August 2000, November 2000, February 2001, May 2001, November 2001 and May 2002.

Methodology

The survey is conducted by telephone with 100 respondents, using telephone numbers randomly selected from a database. Respondents are asked to rate Council's performance on a scale of 1 to 5, as follows:

1. Needs a lot of improvement
2. Needs some improvement
3. Satisfactory
4. Very good
5. Excellent

Or alternatively, "Can't say".

Two questions are asked about the standard of aged and disability services. The first concentrates on services for the aged and those with disabilities, and the second focuses on the infrastructure provided:

1. "How well does Council provide services to the aged and people with disabilities such as homecare, meals on wheels, respite care?

2. "How well does Council support the aged and people with disabilities through appropriate infrastructure, such as sufficient disabled parking, disabled toilets and easy access to public buildings?"

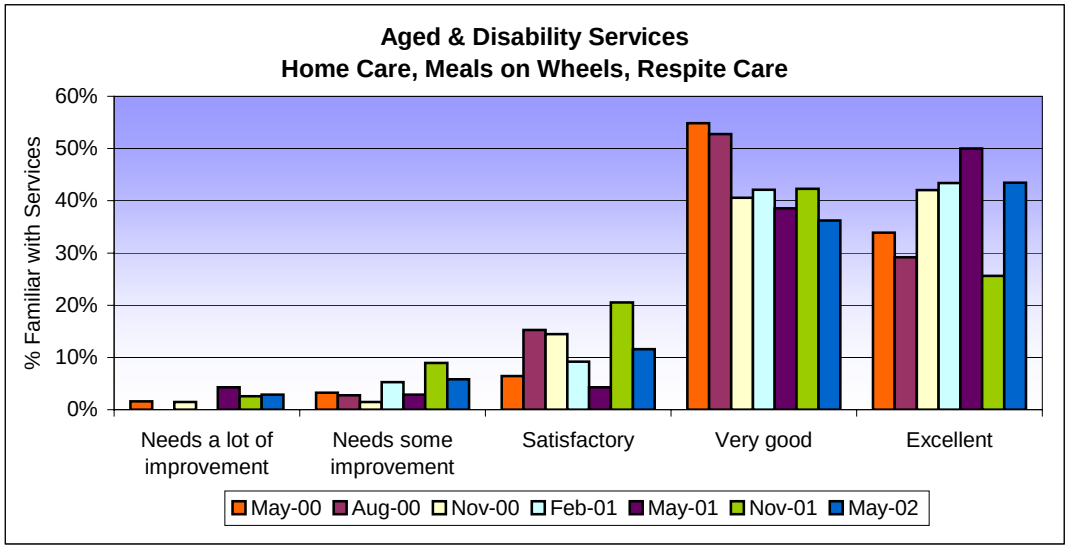
Respondents are then asked if any particular issue has influenced their view, and if they would like to comment. Respondents are also asked to rate the importance of the seven groups of services Council provides.

Survey Results

In each of the surveys conducted to date, approximately 28% of the community state that they are unable to form an opinion on the infrastructure and services for the aged and people with disabilities. As such, the results in the graphs below represent the views of those who **are** able to form an opinion on services provided.

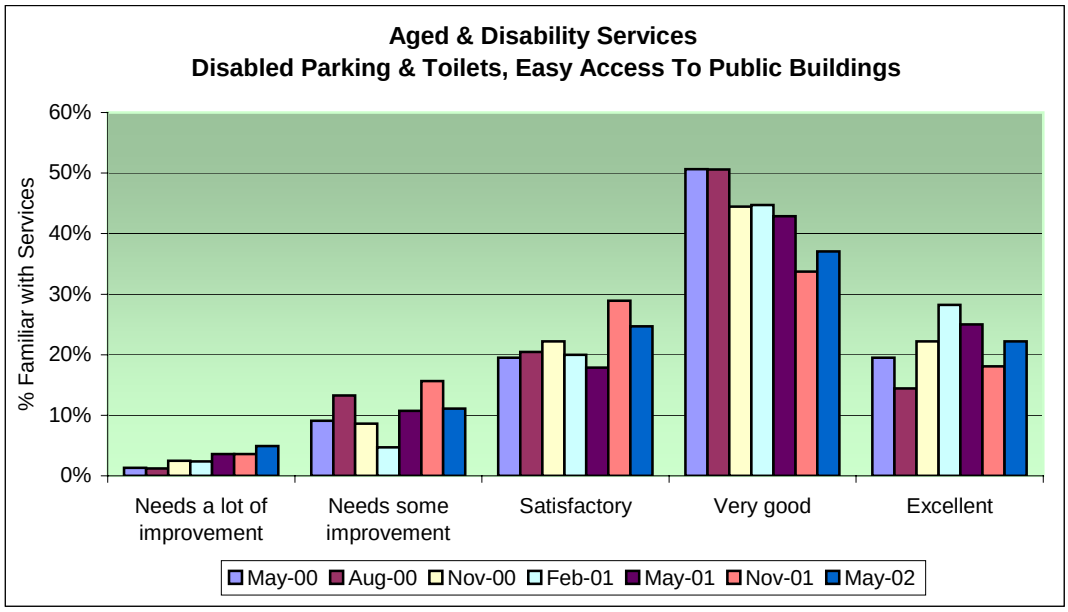
When the responses for the seven surveys conducted to date are aggregated, it is revealed that the majority of responses for the provision of home care, meals on wheels and respite care, 82%, fall in the "Very good" and "Excellent" categories.

In general, comments provided commend the services and emphasise their importance to the community. The meals on wheels service received praise, as did the home carers, however, the gardening/handyman service received comments calling for increased availability of the service. Several comments also draw attention to the lack of knowledge available to the public on services for the aged and those with disabilities. For comments, see attachment.



The aggregation of results for the provision of infrastructure for the aged and those with disabilities, reveals that the majority of responses, 87%, are in the "Satisfactory" or better categories, with 43% of responses in the "Very Good" category, and the "Excellent" and "Satisfactory" categories receiving 21% and 22% respectively.

Comments focus mainly on the need for more car parking spaces for those with disabilities, and for these to be within ready access to the public toilets and the main shopping area, e.g. the chemist. Those using wheelchairs and motorised scooters/gophers find that there is not ready access to shops and public buildings. Several comments also draw attention to the needs of the elderly, not just the disabled, for ready access to public toilets, and the ability to gain car parking reasonably close to shops and services. For comments, see attachment.



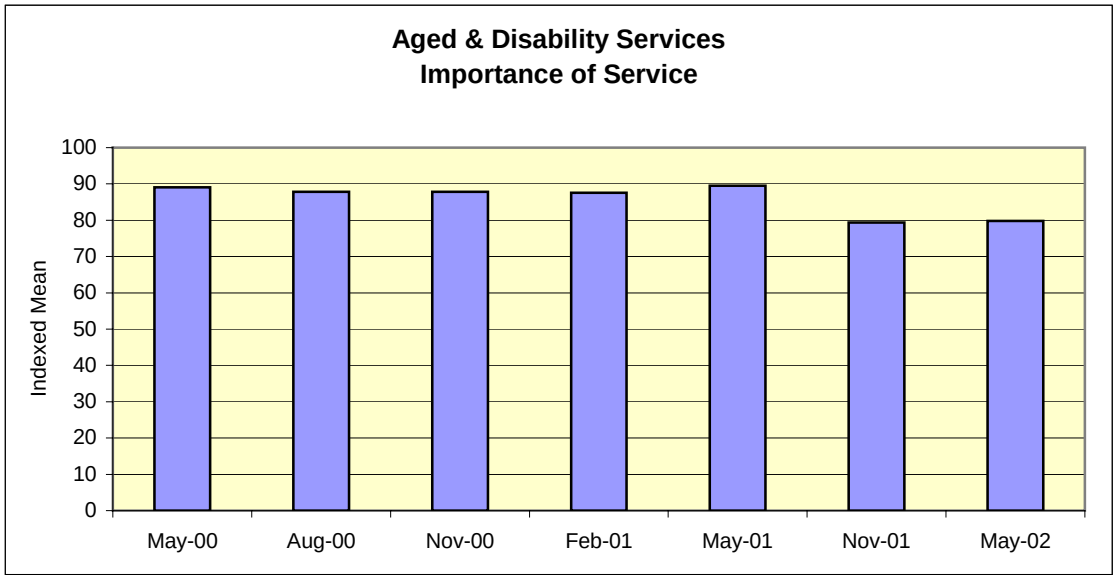
Importance of the Aged & Disability Services

As part of the community survey, all respondents are asked to rank the importance of the seven groups of services that Council provides.

Adjustment to the survey form, effective from November 2001, may have impacted on the results of the importance of aged and disability services, in that respondents are now asked to rank the seven groups of services relative to each other. Prior to November 2001, respondents were only asked to rate the importance of particular services.

However, as can be seen in the table and graph below, services to the aged and those with disabilities are considered to be of high importance to the community, with this group of services consistently rating between approximately 80-90, on a scale of 100.

Level of Importance	May-00	Aug-00	Nov-00	Feb-01	May-01	Nov-01	May-02
No Importance	3	2	3	3	4	10	13
Little Importance	2	2	5	1	3	7	5
Important	7	9	4	13	4	10	8
Very Important	22	29	26	21	20	23	18
Essential	65	58	62	62	70	51	56
Mean	4.45	4.39	4.39	4.38	4.48	3.97	3.99
Indexed Mean	**89.1**	**87.8**	**87.8**	**87.6**	**89.5**	**79.4**	**79.8**



Summary

In summary, it can be seen that, overall, the community is pleased with the services and infrastructure provided for the aged and those with disabilities, and considers these services of high importance. Comments provided by respondents praise Council staff for the effort taken in organising the services that are available, enabling the aged and those with disabilities to continue residing in their own homes.

Comments raised several issues that are in need of a review. Some respondents would like to see additional hours being made available for the gardening/handyman service. Several comments were received on the lack of readily available information on the services provided. The call for additional car parking in the main shopping area, and close to public toilets, came not only from those with disabilities, but also from those who are elderly.

People who need to use wheelchairs raised the issue of the need for wider car parking bays that allow easier ingress and egress from their vehicles, and for the kerb to be on the same level as the parking bay for ease of access to the footpath. Users of both wheelchairs and motorised scooters/gophers comment on the difficulty of ready access to shops and public buildings, and of difficulties in using footpaths when traders use them as extended shop floor areas.

Comments made by survey respondents on these services are reproduced on the following pages.

Community Satisfaction Survey Comments May 2000 – November 2002
Aged & Disability Services

May 2000
26 Comments

- Volunteer driver.
- Work with people with disabilities.
- More disabled parking.
- Grandparents - only one bus stop for gran to catch bus - needs more seating/shelter at bus stops (especially in winter).
- Plenty there for them.
- Should police park in areas for disabled parking?
- Need to assist elderly to become independent and stay in their own home.
- Husband & daughter hearing impaired, so often left out/ not considered. Work in aged care at the Nyah health service/Jacaranda Lodge.
- Grandparents.
- The corner of Stradbroke Avenue & Chapman Street should have lights (elderly lady has dog and has trouble crossing).
- Support for aged should not be a local government issue - should be Federal Government.
- Improve on foliage over public homes. Make people aware - for wheelchair people can't get by. Homeowners should not be allowed to have big trees & creepers near other houses & footpaths.
- Services to disabled people, not aware of services available.
- Don't make people cut down their trees when their bushes are too long. More toilets.
- More services needed.
- Noticed ramps, disabled parking.
- Trying to get respite care for neighbour, has been difficult.
- Does not feel as though there is enough disabled parking in the main street and surrounding parking areas.
- Very impressed.
- East side of Campbell Street shopping centre don't have good access.
- Nephew (in wheelchair) so has noticed lack of access to public buildings.
- General help to aged great. Parking of gophers not easy.
- More handyman services available to people who can't do them themselves. Have to wait too long for any kind of service.
- Not enough disabled toilets.
- Does meals on wheels - full credit.
- Elderly mother in law good/excellent service.

August 2000
32 Comments

- She is not disabled and does not know anyone old in Swan Hill - therefore doesn't know much about the service.
- Husband has a car disabled sticker. Has a problem with non-disabled persons parking in disabled areas.
- Elderly grandparents - she tends to look out for them.
- Caring for aged person herself.
- Not enough disabled parking close to the normal shopping area. Not enough room for wheelchair access.
- Need more parking for better disabled access.
- Good service.
- Disabled himself.
- No use of them.
- Me, I am not getting any younger.
- Need a requirement village.
- Getting older and hopes the services will be available for him.
- Know many old people who are appreciative of services that are available. Also, interviewee is getting closer to the age, whereby he will need services himself.
- Was a Homecarer and saw the needs of the aged.
- Co-operation from ladies in Home Care section is excellent - very grateful. They're are angels, treat well. Wouldn't think anywhere else could be better.
- Have a lot to do with the elderly.
- Dad is old and needs all these services.
- Everybody gets old, and no one knows what will happen around the corner, e.g. you may need wheelchair facilities tomorrow.
- Very impressive.
- Home Care excellent. Elderly mother and father need the services.
- I am getting old.
- Need more disabled carparking in CBD.
- Personal experience - Home Care assistant didn't arrive when expected then they were not required.
- Access to public toilets in Swan Hill, for disabled and elderly, is very poor. Access to buildings is good. Service of the Manangatang Senior Citizen's bus is very appreciated (Council services it).
- Elderly aged neighbour. Easy access to businesses required.
- Did not know of respite care. 14 year old has spina bifida (physically handicapped). Father has recently been widowed. Not enough pedestrian crossings in Robinvale and Swan Hill.
- Family member who is disabled.
- Like to see older people get a better deal. We'll all grow old one day and we'll need the care.
- Good parking for disabled.
- Car parking for disabled a major problem.
- Insufficient services for Koori people.

- Have a daughter with a disability.

November 2000
31 Comments

- Need longer car parks to unload buggies.
- Need more health care services (i.e. in Manangatang).
- Through necessity.
- Believe that the procedure for disability parking needs looking at. Client has not been able to receive one although she has had a disability.
- Access to Town Hall is very good. Old Nyah hall now also has wheelchair access.
- As works with senior aged consumers so more aware of the elderly's concerns.
- Works with the elderly.
- Lack of access to buildings in Swan Hill for wheelchairs.
- General contact with people with disabilities.
- Has elderly parents so may need to use service.
- Having an aged parent and mothers with strollers that need to access shops and footpaths.
- Familiar with situation.
- Increase in elder people in area.
- More disabled parking needed.
- Both herself and husband are disabled. Too hard to get home help/home maintenance.
- Some areas wheelchairs can't go down main street.
- Meals on wheels and district nurse very good.
- Needing these services are essential - and they are all excellent.
- More disability car parks.
- Work in this type of field.
- Disabled parking badly misused.
- Disabled and elderly people have difficulty getting to toilets in the middle of the road. Time to look at Council purchasing property to build toilets off road. -Disappointed considering they are looking at building a 2nd toilet in middle of road.
- Believe need more volunteers for meals on wheels.
- Lacking in support for carers who need time off. Works in aged care.
- Would like to commend Melissa Roberts on her level of service - cannot speak highly enough of Melissa.
- Mum is physically disabled and can't get into a lot of areas including the Town Hall and picture theatre.
- Would like more hours of home care.
- Very happy with the services.
- Use services and know how good services and staff are. Helpful and supportive right down to the parking man.
- Being elderly it is very important.

- Not quite enough parking for disabled.

February 2001
30 Comments

- Lack of ramps at podiatry services
- Yes works with elderly and pleased with services - pedestrian crossing
- Lack of toilets in town. Husband disabled in wheelchair. Disabled parking needs to be parallel to footpath for when unloading trailers with scooters - not very safe places. Needs to be like the one at the hospital. Services are good - used respite care. Parking and footpaths need improvement.
- General notice that easy access in prominent areas
- Disability son intellectually disabled
- His age
- Experience. Husband in extended care. Very helpful
- I'll be old one day
- Wife works at alcheringa - understands the care for aged.
- Work in main street so you see their ease of access.
- Just her age. Being an older age it is very important.
- Shops need to be more user friendly for disabled.
- Sees happy people in your pharmacy everyday.
- Just her age.
- Not enough disabled parking & toilets.
- Needs more disabled signs.
- Council does great job with aged services. Disabled car parking not wide enough. I Am a disabled person.
- Had a motorbike accident & dad disabled - has trouble taking dad to some places - toilets, steps at post office at Nyah.
- More public phones in areas e.g. BiLo, clubs, that region, and closer public toilets in that area, e.g. towards McDonalds.
- Parents are elderly - access to public places is important. Parking is important for elderly.
- Comments from elderly people.
- Pretty important for old people to remain in their own homes.
- We all grow old - look after our future.
- Direct involvement.
- Elderly mother-in-law – concerns.
- Relatives that services are relevant to.
- User of services as am severe asthmatic. Services are better for disabled than for the aged.
- Getting older.
- Need more toilets. Too far to walk for old people.
- She has an elderly mother who gets all the services and believes they are good.

May 2001

21 Comments

- Knows aged people. Services need more advertising.
- Because work with these people. Access.
- Elderly parents needs are important.
- Work with the aged.
- Is disabled.
- Home handyman no longer available in Woorinen.
- Need more disabled bays near supermarkets.
- Am disabled and mother is aged. No toilets near BiLo or end of town. Another public toilet.
- Again toilet facilities are especially inconvenient for elderly mum.
- Not enough disabled parking access to footpath from disabled parking is poor or not there at all.
- Worked for home care.
- More shops need better access for disabled people. Kerb crossings are often too steep in Swan Hill and difficult to negotiate in wheelchairs.
- Mother is disabled and Shire not helping with requirements, wheelchair, commode, seat for showers. Council not helping.
- Access to business, road services for gophers.
- Not enough toilets for disabled.
- No problem with disabled parking. Support disabled parking zones but why free parking for disabled?
- Had experience with elderly and handicapped requirements - feel service essential.
- She has disabilities herself.
- Council should advertise more of what services are available.
- Involved in voluntary care to people in Swan Hill for many years and it is good to have programs supported and instigated by Council.
- Meals on Wheels fabulous service. More facilities for aged care services.

November 2001

26 Comments

- Due to not leaving the house, she does not really know much about the operation of council services.
- Has a disabled sticker - happy with facilities.
- Parking not adequately monitored. Broader scope of home held required.
- Mother is booked in respite care, but can't get in until March, but meals on wheels services have been very good.
- Home care is good. Gardening is not good - leaves a lot to be desired, eg if you have a son living within 10 km's despite his lifestyle, he is still expected to do his mother's gardening, but does not have time as he has his own family to provide for.
- Would like units for the aged in Nyah like in Nyah West.

- More public toilets.
- Very happy with these two services, would like it kept the same.
- Poor disabled access to shops in Campbell Street between McCrea and Rutherford Streets.
- I use the facilities.
- Disabled herself and always finds good parking in Swan Hill.
- The need for more understanding for people in need - need disabled toilets.
- Not enough disabled parking in main shopping area - always at end of line.
- More public toilets (near Kent's pharmacy).
- Expansion of elderly services.
- Disabled parking in most places.
- No contact with these services.
- More money should be put toward aged care.
- I work with disabled, elderly parking is difficult. Wheelchair access difficult.
- Difficult to get into parks as other people park in disabled bays.
- In the city there are not enough disabled parking, not readily access to toilet facilities.
- For the population of swan hill there seems to be too many disabled parks.
- Wife in wheelchair - footpath uneven, no parking places near chemist in Swan Hill.
- Needs help with lawn mowing, but was refused. Need disabled parking at chemist shop and doctors and Resource Centre. Shows to Community Centre. Prices (admission) should be advertised so pensioners have time to save for it.
- Knows people who use disabled parking and is pleased with the provisions.
- Involved in the aged industry - facilities becoming better.

May 2002
25 Comments

- No parking zone near Medicare - 10 mins.
- Parking okay. Toilets and building access needs improvement.
- Mother of his own - she is happy with service.
- Didn't know about.
- Partly disabled.
- Parking again.
- Probably a lot of people in this town like me who need help.
- Disabled toilets need work for the disabled.
- Public toilets at Info Centre great and new toilets.
- More easy access for gophers and wheelchairs.
- Not enough involvement.
- Personal experience.
- Personal experience - mother in law 91 yrs old.
- Work in industries and come across difficulties in these areas.
- Disabled parking not enough. Always looking for one. One at commonwealth bank too close to corner. Not enough in Beveridge Street.
- Has a mother who needs attention, so is aware of what is available.

- Excellent.
- A friend had a lot of trouble accessing home help in Nyah West - council made it all too difficult.
- Well catered for.
- Should relocate disabled car parking.
- Gophers cause a problem maybe bike tracks could be used and network of tracks increased.
- Disabled don't pay for parking.
- More disabled parking.
- More policing on disabled parking.
- Only one disabled parking in Robinvale.

SWAN HILL
Rural City Council

Appendix 3

Processes and Outcomes - Consultation with Target Groups

Process used in Consultation with Target Group and Service Providers

1. Invitations sent to members of HACC target group to attend Consultations.
2. Community Consultations for the HACC target group were held in Robinvale and Swan Hill, with attendances from clients who reside in smaller, isolated townships of Ultima, Nyah, Lake Boga and Manangatang. Total participation numbered 105 persons.
3. Invitations sent to all Agencies relevant to the particular consultation purpose inviting their representative to attend and have input.
4. Consultations with those agencies who provided information but were unable to attend the meeting. Data collected for inclusion on spreadsheet.
5. Priority setting meeting held. Attended by providers and target group representatives.
6. Priorities determined and, where appropriate, necessary changes made. For example Allied health, Swan Hill Hospital proposed extending Allied Health to include travel to Sea Lake – this was forwarded to CSO Buloke for inclusion with their document.
7. Submit planning document and report to relevant organisation.
8. Copies of report distributed to those who participated in the planning process.

Summary of Priorities identified in Consultation Processes for 2001, 2002 and 2003 funding rounds;

1. *Availability and access to all types of service*

   Factors raised were transport issues:

   - Increasing cost of providing all services, especially those delivered at a person's home or to take people shopping or to appointments.
   - Impact of increasing transport costs on brokerage arrangements such as CACPs, which reduces amount of services available to clients.
   - Lack of public transport.
   - Need for outreach allied health and medical services to smaller towns.
   - Vehicles for delivery of services, and enabling clients to participate in activities.
   - Flexibility allowing options that enable access to private providers e.g. Podiatry, dental services.
   - Lack of funded Optometry and Dental Services.
   - Poor availability of discounts for taxi fares.

2. *General Home Care*

    - Regular service, and the current monitoring and reporting, means that assessments and care management take place as needed, and services adjusted to suit changing needs of clients.
    - People using the service recognise there has been limited funding, which may lead to a decrease in service levels.

3. *Home & Property Maintenance, especially Lawn Mowing*

    - More difficult to do than many housecleaning tasks.
    - Can sometimes get help in the home but not for outside, especially lawns.
    - Often no longer have mowers, could not maintain them, or get fuel if living "out of town".
    - Safety aspects, especially given the higher incidents of housebreaking affecting older people in Swan Hill in the past year.
    - Negative effect of seeing home and garden deteriorate.

4. *Food Services (Meals on Wheels)*

    - To quote community group, "Everyone needs to eat."
    - Difficult to provide service to isolated areas.
    - External Standards imposed regarding food provision and delivery.
    - Low subsidy rate and increased costs to provide meals.

SWAN HILL
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Appendix 4

HACC – Eligible Target Groups and Priority of Access to Services

ELIGIBLE TARGET GROUPS

The primary target group, identified under the HACC Act are:

- Frail or at risk older people with moderate to severe disabilities.
- Other people with moderate to severe disabilities.
- Carers of these people.

Other target groups that have been designated as "no growth" and therefore have limited funding are:

- Families in crisis.
- Palliative care.
- Acute medical/surgical where the person is not of the primary target group.

PRIORITY OF ACCESS GUIDELINES

PRIORITY ONE - Very high level of needs

Client Characteristics

- People at risk due to level of frailty, disability or illness.
- Require significant support in performing essential activities of daily living.
- Carers of these people.

Available Support

- People living alone with a minimal support network.
- People whose carer is also frail/aged, or experiencing illness or disability.
- Carers who also require significant support with activities of daily living, or to maintain their caring role.

Assistance Required From HACC Services

- Personal Care.
- Respite for carer.
- Therapy assistance.
- Attending appointments, especially medical and para-medical.
- Daily monitoring of wellbeing.
- Assistance with meals.
- Personal, social and emotional support.
- Shopping.
- Household tasks.
- Home Modifications-fitting of aids.
- Home maintenance if eligible.

Service Provision

- Care planning.
- Any or all of General, Personal and Respite Care to a high number of hours, perhaps seven days per week, and Public Holidays.
- Regular Home Maintenance where applicable.
- Multiple services.

PRIORITY TWO - High level of needs

Client Characteristics

- People at risk due to level of frailty, disability or illness.
- Require significant support in performing essential activities of daily living.
- Carers of these people.

Available Support

- People who live alone with minimal support.
- People who have a carer who is unable to provide all the assistance required.
- People who have a carer who provides some assistance, but has limited time due to other commitments.

Assistance Required From HACC Services

- Personal Care.
- Respite for carer.
- Therapy assistance.
- Regular monitoring of wellbeing.
- Assistance with meals.
- Personal, social and emotional support for client and carer.
- Shopping.
- Household tasks.
- Home modifications - fitting of aids.
- Home maintenance, if eligible.

Service Provision

- Care planning.
- Eligible for 3-5 day Home Care services.
- Regular Home Maintenance where applicable.
- Multiple services.

PRIORITY THREE - Moderate Level of Needs

Client Characteristics

- People at risk, due to level of frailty, disability or illness.
- Require significant support in performing essential activities of daily living.
- Carers of these people.

Available Support

- People who live alone and require assistance with activities of daily living.
- People who have a carer who also requires assistance.

Assistance Required From HACC Services

- Respite.
- Personal, social and emotional support.
- Shopping.
- Household tasks.

- Meals assistance.
- Home Maintenance where eligible.

Service Provision

- Weekly or Fortnightly Home Care services.
- Regular or occasional Home Maintenance.
- Multiple service requirements.

PRIORITY FOUR - Low Level of Needs

Client Characteristics

- People who, due to being aged or having a level of frailty, disability or illness, require some assistance to maintain independence.

Available Support

- People who live alone and are well supported with their own networks.
- People whose carer can provide a high level of support.
- People who do not require a carer.

Assistance Required From HACC Services

- Generally, assistance with household cleaning only.
- Home maintenance where eligible.

Service Provision

- Assisted only when other priority groups are being adequately serviced.
- Often receive fortnightly, or less frequent, Home Care service.
- Receive minimal hours of service.
- May receive Home Maintenance on occasional basis.

Establishing individual needs, and how to allocate available resources, is an ongoing and interactive process that involves:

- Planning and development/adjustment of guidelines and parameters or standards for service delivery.
- Initial screening and evaluation of peoples changing condition. Comprehensive assessment.