

HACC SERVICES HAVING AN IMPACT IN 2009

This year sees the beginning start of an exciting new movement in the Home and Community Care (HACC) Program in New South Wales, which has been branded **IMPACT Services - Supporting HACC Consumers' Active Participation in Their Community**.

The branding is the brainchild of a working group convened by Aged and Community Services Association NSW/ACT (ACS) and the Council of Social Service of NSW (NCOSS) in response to the HACC National Forum 2008 on Promoting Independence. Held in Melbourne last February, Forum08 brought together HACC funders and providers from across Australia and some overseas guests to explore arguments for, and implementation implications of, incorporating 'wellness' and 'restorative' approaches into HACC service delivery. While no national policy commitment has been signed yet, officials from all jurisdictions are working on what it means for how services are focused and funded into the future.

In NSW, delegates from government and non-government organisations have formed the NSW working group. Members include representatives of the peaks for aged and community care services, community care providers, consumer peaks and the Australian Government Department of Health and Ageing, the NSW Department of Ageing, Disability and Home Care, and NSW Health. Sector interest and energy for change has been evident from the start, and funding bodies have expressed a clear commitment to improving the system for everyone. IMPACT Services aim to re-focus on how HACC identifies and supports clients' needs; it is not about adding to workloads or rationing resources.

In devising the IMPACT Services brand for NSW, the working party wanted a strong, emotive title to describe an empowering, client-centred approach that creates real improvements in clients' quality of life, without the implied limitations of the terms being used elsewhere. IMPACT Services also allows us to reflect on the integral contribution of staff and volunteers, and the role of HACC in enabling people to participate as full members of society. These thoughts led to the development of a set of key principles against the brand concept, which were approved by the Industry Forum in November.

IMPACT Services are HACC services that are:

- 1. Person-centred** & enable each consumer to explore individual **strengths & goals** & work towards achieving the outcomes they desire, with security of support for those who need it.
- 2. Culturally-appropriate, socially inclusive**, & sensitive to individual circumstances, social context & relationships, enabling the consumer to continue with what is important to them.
- 3. Flexible & responsive** to the range of changing needs, interests & **choice** of consumers.
- 4. Supportive** & enable the positive **relationship** between consumers & carers.
- 5. Recognised** as a fundamental & **valued** part of society that **grows & develops** to meet the changing expectations of consumers, carers, funders & the workforce.

The working group has also developed a series of scenarios to illustrate the principles in practice [see example in box, below]. Obviously, these are not new concepts, but may require a cultural shift that challenges the expectations of many stakeholders in HACC. IMPACT Services describe a philosophy for HACC services, but don't seek to prescribe service delivery practice.

Based on the experiences of other Australian States and community care providers and service users in the UK and New Zealand, the working group have identified key development factors to enable the full realisation of IMPACT Services in NSW. Obviously, the extent to which each is applied will vary according to individual client's needs, and may include:

- empowerment and confidence of service users and their families to identify their personal goals and embrace new opportunities for self-determination and personal fulfillment;
- use of assistive technology to allow people to remain living in their chosen home environments and to maximise their abilities to do for themselves, thereby reducing dependence on service interventions they may not need or want; and
- greater access to the expertise of Allied Health professionals to provide targeted interventions, where appropriate, and build resilience and capacity in clients with chronic conditions, while still maintaining the social model of HACC service provision.

The next step for the working group is a scoping project to identify existing best practice against IMPACT Services principles and potential strategies for implementation in NSW. The working group has identified and debated a number of issues that are fundamental to the conception, interpretation and implementation of IMPACT Services, and is looking forward to discussing these in more detail with consumer groups, service providers, peak and government agencies. These include such issues as:

- What makes IMPACT Services different from what we do now?
- How can we maximise consumer choice at the same time as maximising the effectiveness and efficiency of the service system?
- How can we ensure that resources will be sufficient to support an IMPACT Services philosophy?
- What training and development activities will be required, and with whom, to 're-shape' HACC in NSW?
- What systemic and structural changes are required to facilitate the IMPACT Services philosophy in practice?

The working group will be developing an informative presentation to be rolled out around the State, and looks forward to your feedback

For more information about **the HACC National Forum**, including the work being done in other States, go to <http://www.haccforum08.com.au/index.php>. Details of IMPACT Service principles and other resources produced by the working group are available from Christine Regan, NCROSS on 92112599, email chris@ncoss.org.au and Ruth Wilson at ACS on 87540400, email ruthw@agedservices.asn.au

Melinda Paterson on behalf of the IMPACT Services Working Party, representing NSW HACC Development Officers Network

Scenario: *Ian is a 70-year-old widower. Following a short illness, he is referred to HACC by a hospital social worker who is concerned he has not been eating properly since losing his wife of 45 years. He doesn't have many friends or interests outside his home.*

Before IMPACT Services *Ian is referred to meals on wheels, which he receives five days a week for the rest of his life. After a trial visit, he refuses the offer of a place in a centre based day care, which he perceives as 'just ladies sitting around & talking'.*

With IMPACT Services Ian is referred to meals on wheels, where he is offered an initial 6 month service & a place in a men's cooking class. After 3 months, he is confident to reduce meals on wheels by half &, together with two other men he met in the cooking class, starts using the local shopping bus to collect groceries for his dinner recipes. After a further 3 months, he does not require meals on wheels at all.