

## **HOME CARE PACKAGES UNDER CONSUMER DIRECTED CARE RULES**

### **Q: What is a Home Care Package?**

**A:** The Australian government has created the Home Care Packages Program to help older people to live at home for as long as possible delaying the need to move to residential care (an aged care home). “Home care” is a type of aged care service that has been created under the *Aged Care Act 1997 (as amended 2013)*. Previously, home care was known as “community care”, or sometimes “Community Aged Care Package (CACP)” or “Extended Aged Care at Home Package (EACH)”.

Home care is not the same as Home and Community Care (HACC) funded services, which provide basic support to people to help them remain living at home. There is a Commonwealth HACC Program in all states and territories except Western Australia and Victoria, where there is a joint Commonwealth-state government funded HACC Program. These are separate programs from the Home Care Packages Program.

### **Q: How can I get a Home Care Package?**

**A:** Eligibility for a Home Care Package is decided by an Aged Care Assessment Team (ACAT) or Aged Care Assessment Services, ACAS (in Victoria). You can request an appointment by calling them directly or you can discuss it with your doctor or another health provider and get a referral.

To find out more ACAT or ACAS services see <http://www.myagedcare.gov.au> or call “My Aged Care” portal on 1800 200 422. Once you have been notified that you are eligible, you will need to find a home care provider in your area that has a package available.

### **Q: What services are included in Home Care?**

**A:** The most common types of supports are: assistance with bathing, dressing, mobility, preparing meals, continence management, cleaning, laundry services, gardening, home maintenance, transport to attend medical appointments or social activities, nursing, allied health and therapy services.

You do not need to receive all these supports or there may be other things you may want assistance with. You and your provider will work together to determine what your preferences and needs are.

If you need other supports that are not listed here, do not worry. Discuss your needs with your provider. Make sure they are included in your care plan. Providers will do their best to support you within the limits of the resources they have available. The resources are linked to the package level. Each package level has a different amount of funds available to purchase services. If financial resources are not available, there may be other ways of providing you with the support you need to continue living at home.

**You have the right to have your wishes for lifestyle and support respected.**

### **Q: How many levels of Home Care Packages there are?**

**A:** There are four levels of Home Care Packages:

- Home Care Level 1 - to support people with basic care needs.
- Home Care Level 2 - to support people with low level care needs.
- Home Care Level 3 - to support people with intermediate care needs.
- Home Care Level 4 - to support people with high care needs.

Home Care Level 2 is equivalent to the former Community Aged Care Packages (CACPs), while Home Care Level 4 is equivalent to the former Extended Aged Care at Home (EACH) packages.

So, the main difference between the home care levels is the **amount** of care and services that can be purchased. More care services can be purchased at level 4. Level 4 is for people who have high care needs.

### **Q: What else is available to help me stay at home?**

**A:** You may find extra support in your community, in your social network, using your own resources or by creating a circle of people that may be able to help you. Ask your provider if they can assist you with setting up a circle of support.

Another source of information is your local council. Contact them to find out what is available in your area.

You can also explore the use of equipment. A piece of equipment may be what you need for extra help. Technology is now often being used to help people to manage their day-to-day tasks at home.

### **Q: How do I ensure that my plan will be carried through?**

**A:** The Home Care Package program has a document that is called the **Home Care Package Agreement**. The agreement ensures that you and your provider are clear about the services you will receive, the level of involvement you want to have in managing your package and it will include your care plan.

**The agreement is a legal requirement.** Before the packages commence this agreement must be prepared and signed. If you do not want to be alone to sign the agreement, you can have another person with you or you can nominate a person to represent you in this process - e.g. a family member, a friend, partner or another support person.

Note that the agreement and the care plan, if necessary, must also be provided in a language other than English.

**Q: How do I find out if I am eligible for a Home Care Package?**

**A:** The process for finding out if you are eligible is called an “aged care assessment”. The Aged Care Assessment Teams (ACAT) or Aged Care Assessment Services (ACAS - in Victoria) assesses consumers to determine their eligibility. The assessors will talk to you about your current situation and will determine whether you can be assisted at home with a Home Care Package. The assessment does not cost you anything - it is free.

**Q: How do I find an Aged Care Assessment Team?**

**A:** The ACAT teams are spread around Australia. Your local health care provider can assist you on your search or you can do it yourself by accessing “My Aged Care” website <http://www.myagedcare.gov.au> or by calling them (My Aged Care) on 1800 200 422.

**Q: What questions should I ask when I get an ACAT assessment?**

**A:** During the assessment visit, the assessor will identify your needs and the type of care services that can help you to stay at home. Therefore, this is a time for you to speak out! Talk about what you are still able to do for yourself, and what you may need assistance with to stay living at home with the lifestyle you choose. You do not need to make any decisions on the spot. The assessor and you only explore options. You will be able to make your own decision after receiving the outcome of your assessment.

If you are not comfortable to meet with the ACAT / ACAS assessor alone, you can have a friend, family member, partner or a carer with you during the assessment.

In some instances, when staying at home is no longer possible, the ACAT/ACAS assessment can also help to determine your eligibility for care in an aged care home.

**Q: What if I disagree with my ACAT/ACAS assessment?**

**A:** The ACAT/ ACAS assessor must provide you with information on how to appeal a decision.

Remember: **you have a right to express your concerns.**

For more information go to <http://www.myagedcare.gov.au/eligibility-and-assessment/acad-assessment>

**Q: What is Consumer Directed Care?**

**A:** Consumer Directed Care (CDC) is a way of delivering services that allows you to have greater control over your home care services. That is, CDC allows you to make choices about the types of assistance you access and the delivery of those services, including who will deliver the services and when it is delivered. In the CDC approach you:

- are encouraged to identify your goals which will be the basis of the care plan
- decide how much involvement you want to have in managing the package
- are able to exercise choice in the way that services are delivered
- will receive an individualised budget and a monthly statement of income and expenditure
- can expect an ongoing monitoring and review, and a formal re-assessment by the home care provider (at least every 12 months).

**Q: How is CDC different from current or traditional Home Care?**

**A:** The CDC approach starts with finding out about your life and your goals, what you would like to keep doing for yourself, and the assistance you may need to continue to live the way you wish. For example, the family of Mrs. H may have sought home care support for their mother because they were concerned that she is losing weight and not eating well. While the initial response may have been to arrange meals on wheels, a deeper exploration may lead to other responses. *Why Mrs. H is not having nutritious meals? When did it start? What happened? Does Mrs. H like cooking? What kind of assistance would she prefer? Would she like to be cooking for herself again? Is food important in her life? Would she prefer to have meals in a social context?* By asking questions and exploring further the need for nutritious food, the provider learns more about the person and a very different support can be put in place. For example, Mrs. H’s need for nutrition can be satisfied with either Meals on Wheels or she could have someone coming to help her to cook, someone to help with the shopping so that she can cook herself, she could have her family on a roster to bring her some meals, or she may join a group who has a meal out once or twice a week.

The CDC approach focuses on helping you to live the life you always lived - planning, making your own decisions and living your life in full! That is, with CDC you can tell your provider what you want to do - you can set broader life goals. You feel more motivated to live your life focussing on these goals, receiving the assistance you need along the way. This does not mean that the provider does everything for you. Providers will help you within the limits of the package program. Providers will also look at how you might be able to regain your health and strength to be able to do more for yourself and be less reliant on people coming in to assist you. There is flexibility within the package program to allow for both of you to explore the options with a broader mind set.

The CDC approach encourages providers to explore options outside the boundaries of the formal services. That is, you can explore your community connections, family relations, community and private resources etc. to achieve your goals.

**Q: Isn't the information I get from my provider too biased? How do I get the independent information I need to make choices about my support?**

**A:** There are a number of ways you can get information about home care:

- The **Home Care Today** is a service that is here for you. We have been funded to provide you with information about CDC. A number of resources are available in the website under the [Consumer banner](#).
- **My Aged Care** web portal is a central point for aged care information. You can access the portal online or by phone <http://www.myagedcare.gov.au> or you can call My Aged Care on 1800 200 422.
- **The Council on the Ageing organisations** (COTAs) around Australia, are delivering sessions on CDC. The sessions are organised by your local [state COTA](#). Please contact them to find out when the next session is.
- Independent **advocacy services** also are available to provide you with information about home care supports. Advocacy Services are community based organisations funded by the Australian Government under the National Aged Care Advocacy Program (NACAP) to provide free and confidential support to recipients of care and also to promote the rights of older people to aged care service providers <http://www.myagedcare.gov.au/how-make-complaint/advocacy-services>

**Q: How can I access a CDC Package?**

**A:** If you already have a Home Care Package, from July 2015, **all** Home Care Packages will be delivered on a Consumer Directed Care basis. If you do not want to wait, talk to your provider. Until July 2015, aged care providers are supporting people using both the traditional and the CDC approach. They may be able to start using this approach with you.

If you do not have a Home Care Package, you need to speak to the [Aged Care Assessment Team](#).

**Q: How long can I stay on the package?**

**A:** You can stay on a Home Care Package as long as you need. If you are going on a holiday or need to go the hospital you can take some leave provided you advise your provider in writing that you are not available during that period (you will need to specify the period of absence). On your return you can restart the services using your package.

If however, you need to move residence, check that your provider can support you in the new area. Home Care Packages are allocated for specific areas. If your provider cannot assist you in the new location, your provider will help you to find another one. If you move out of your area and make no arrangements to find another provider you will be without services until you will find another provider who can support you.

**Q: How is my CDC budget worked out?**

**A:** Your budget is based on the supports you need after completing the care plan with your provider's adviser / case manager. The budget includes the costs of services to be purchased for you, an emergency fund and the administration costs which cover case management fees and overheads. You can read more about budgets in the information sheet – [Individualised Budget Items Costs](#)

**Q: Do I need to contribute financially to my support under CDC? How much? Why?**

**A:** Under arrangements for home care prior to 1 July 2014, you may have been asked to pay a fee based on your ability to contribute to the cost of your care. For older people on the basic rate of single pension, a basic daily fee of up to 17.5% of the pension could be charged. Consumers on higher incomes could also be asked to pay additional fees, limited to 50% of any income above the maximum pension rate. If you were already on a package prior to 1 July 2014, your fee arrangements should not change.

Since 1 July 2014, the fee arrangements for home care have changed. You should go to [www.myagedcare.gov.au/financial-and-legal/help-home-costs-explained](http://www.myagedcare.gov.au/financial-and-legal/help-home-costs-explained) for more information. You can use the Home Care Fee Estimator to estimate the costs your provider may ask you to pay.

**Q: What choices do I have about the supports I can purchase from my budget?**

**A:** Under the CDC approach, your provider's adviser / case manager works with you to find out what is important to you and what you would like to achieve with the help and assistance that will be provided - providers often call this "*goal setting*". The choices of supports depend on what your goals are. In short, the provider supports you either directly, by providing a service or indirectly by organising supports from elsewhere for you or pointing you in the right direction.

The government has set some limits to purchasing arrangements. You have the right to ask and choose but keep in mind that the package cannot be used to:

- use of the package funds as a source of general income
- purchase of food, except as part of enteral feeding requirements
- payment for permanent accommodation, including assistance with home purchase, mortgage payments or rent
- payment of home care fees
- payment of fees or charges for other types of care funded or jointly funded by the Australian Government
- home modifications or capital items that are not related to the consumer's care needs
- travel and accommodation for holidays
- cost of entertainment activities, such as club memberships and tickets to sporting events

- payment for services and items covered by the Medicare Benefits Schedule or the Pharmaceutical Benefits Scheme
- gambling activities
- illegal activities.

We have also developed some [checklists](#) to assist you in choosing a service provider, working out a plan and working with your provider. Remember - **you have the right to ask. Make the most of CDC.**

**Q: What aspects of the organisation and management of my CDC package can I take on? How does this impact on the cost of my support?**

**A:** You can manage as much as you want as long as it is agreed and stated on your care plan. You need to discuss this with your provider. The CDC model can change from provider to provider. What remains constant is the fact that **you make all the decisions** about your care and **you choose** what is right for you.

The only thing you are not able to do is to hold the funds. The funds are allocated to the service provider.

## **PLANNING YOUR CARE**

**Q: What if I want things in my plan my provider doesn't deliver?**

**A: You have the right to have your wishes for lifestyle and support respected.** If your provider cannot assist you, they can either find another provider who can support you or point you in the right direction. Please note that some activities cannot be funded through the Home Care Program. Here is the list of items organisations are unable to provide as part of the Home Care package:

- use of the package funds as a source of general income
- purchase of food, except as part of enteral feeding requirements
- payment for permanent accommodation, including assistance with home purchase, mortgage payments or rent
- payment of home care fees
- payment of fees or charges for other types of care funded or jointly funded by the Australian Government
- home modifications or capital items that are not related to the consumer's care needs
- travel and accommodation for holidays
- cost of entertainment activities, such as club memberships and tickets to sporting events
- payment for services and items covered by the Medicare Benefits Schedule or the Pharmaceutical Benefits Scheme
- gambling activities
- illegal activities.

**Q: I want my family or friends to come in and care for me is that possible?**

**A:** You can certainly express your wishes and desires. Your provider will work with you to address your requirements in the best way possible. Every provider has their own consumer directed care approach. The support of your family and friends can be included in your care plan but you need to discuss this with the provider. At times, you and your provider need to think "*outside of the square*" to reach your desired goal.

## **BUDGET AND PERSONAL STATEMENT**

**Q: What if I don't understand my statement?**

**A:** You have the right to ask questions about your statement. If you do not understand your statement, call your adviser/ case manager and ask questions about it. It is important that you understand and know how your package funds are spent.

**Q: What if I think too much money is being spent on administration and case management?**

**A:** The administration and case management fees will differ from provider to provider. You may be paying a certain percentage of the package in administration fees and your friend, in similar situation, may be paying a different amount if using another provider.

Ask your adviser / case manager about what does the [Individualised Budget Items Costs](#) cover. **You have the right to ask questions. Talk about it.** If you are not happy with it after the explanation, you can explore the option of finding another provider.

## **WORKING WITH YOUR PROVIDER**

**Q: How do I work with my home care provider?**

**A:** Providers often seek to develop a good relationship with consumers. Your key contact with the provider is your adviser/case manager. Developing a good relationship with your case adviser/manager will help you to address care concerns.

However, if you want to express concerns about your relationship with your case worker you can follow the organisation's complaints processes. You may find this information in the welcome package or contact your provider directly.

If this is not possible you can access the Aged Care Complaints Scheme <https://agedcarecomplaints.govspace.gov.au/> or call 1800 550 552.

**Q: What if I want to change home care providers?**

**A:** You are able to change home care provider at any time if you are not satisfied with the service they provide or if you have moved to another area. However, you need to be aware that **the package dollars are not transferrable**. That is, you cannot move it with you. In this case, you need to find another provider who has a package available and can offer you one.

**Q: I don't like the person who comes in to help me at home what can I do?**

**A:** You can ask the provider to change the staff. You can speak to your case worker or the manager of the service about your concerns. **You have the right to have your wishes respected**. At times home care providers need to send a different people to your home to cover for staff sick leave, holidays and other unforeseen circumstances. However, you have the right to ask to be notified if you have a regular person coming to your home and for some reason the arrangement changes.

**Q: What if I am really unhappy with the care I am receiving?**

**A:** You have all the right to express you concerns. You can express your concern directly with the provider, or you can have the support of an advocate or you can go to the or by making a complaint to the Aged Care Complaints Scheme <https://agedcarecomplaints.govspace.gov.au/> or call 1800 550 552.

Another alternative is to discuss your concerns with a person who can advocate on your behalf. The National Aged Care Advocacy Program (NACAP) is funded to promote your rights. To call NACAP dial 1800 700 600.

**Q: What are the roles and responsibilities of my service provider?**

**A:** Is the responsibility of your provider:

- to ensure that your rights are respected
- to provide you with the information you need to make your own decisions
- to allocate an adviser / case manager to liaise with you -this person will act as a facilitator and adviser.
- to be in contact with you to ensure your needs are met through regular service review.
- to meet all the legal requirements and quality service standards.

**Q: What are my responsibilities?**

**A:** As a consumer of home care services your responsibilities include:

- respect to home care workers
- to give as much information as possible so your provider can develop a good care plan with you
- follow the agreement
- provide a safe environment for your care workers to come to your home as agreed in the plan

## **DIVERSITY**

**Q: Are lesbian, gay, bisexual, transgender and intersex (LGBTI) people able to have their needs met in the context of Home Care?**

**A:** Yes, here is the Department of Social Services (DSS) Strategy. [National Lesbian, Gay, Bisexual, Transgender and Intersex \(LGBTI\) Ageing and Aged Care Strategy in December 2012](#). This strategy supports the aged care providers to deliver sensitive and inclusive care for the LGBTI community. At the centre of this strategy is the aim of supporting LGBTI people to have the same opportunities and options that are available to all Australians.

## **GENERAL COMPLAINTS**

**Q: How can I make a complaint if I am not happy?**

**A:** You can discuss your concerns with provider if you feel comfortable. If you are not, you can call the Aged Care Complaints Scheme on 1800 550 552.

Another alternative is to discuss your concerns with a person who can advocate on your behalf. The National Aged Care Advocacy Program (NACAP) is funded to promote your rights. To call NACAP dial 1800 700 600.