ip C Health



Aged Care Information Kit

Information kit for Home Care Package recipients

Your case manager is:	 	
You may be contacted by phone on:		

IPC Health

Aged Care Services PO Box 171 Deer Park Vic 3023 03 7068 0214

IPC Health Aged Services work collaboratively with a range of agencies throughout the LGAs of Melton, Brimbank, Hobsons Bay, Moonee Valley and Maribyrnong.

Welcome and Introduction:

About IPC Health

IPC Health is a community health organisation servicing Melbourne's West. We provide a diverse range of services including medical (GPs, nurses, paediatric, youth and women's health and diabetes education), dental, allied health (podiatry, occupational therapy, speech pathology, physiotherapy, dietetics and cardiac rehabilitation), counselling services (Gambler's Help, community health counselling and alcohol and other drugs treatment) and aged care services.

Our Aged Care team is highly skilled and experienced in delivering the care and support you need in the comfort of your own home.

Your key contacts:

Care liaison administrators

What does a care liaison administrator do?

- take your initial calls to our service
- cancel, reschedule or book a once off service that you need
- contact a service provider if you have any questions about your service
- escalate any urgent matters or actions with regards to budget, change to ongoing care or change in care needs to your case manager for follow up
- contact you to seek your preference about services scheduled on public holidays
- mail any paperwork and your monthly statements to you

Your case manager

What does a case manager do?

- prepare your care plan with you and coordinate your care and service plan
- work with you to identify, implement, monitor and review appropriate services required to meet your needs
- prepare your budget for you and manage your package funds
- consult and communicate with you and significant others (family or other health professionals) to discuss information relevant to your care plan
- conduct a review of your care plan
- arrange clinical care service appointments
- maintain regular contact with you and will visit you

Home care package care and services overview

The intent of the Commonwealth Government Funded Home Care Packages program is to provide coordinated care and services that help senior Australians to live safely and independently in their own home for as long as they can.

As part of your home care package, you will work together with your case manager to design a range of aged care services that is best and most appropriate for you as an individual. 'Dignity of risk' is at the centre of home care and means that you have the freedom to make choices for yourself and to guide your care if you would like to.

The home care packages program finances your care needs and assist you in living independently in your home for as long as you can, it is not an extra income that can be used for everyday items and costs. Your case manager can work with you to determine the best way to utilise your funds.

The main categories of the home care packages are:

Category	Services
Services to keep you well and independent	 Personal Care Nursing Allied health and therapy services Meal preparation as per dietary needs Specialised support
Services to keep you safe in your home	 Nursing assistance Home maintenance Minor home modifications Goods, equipment and assistive technology
Services to leep you connected to your community	Transport Social support

These care and services do not replace other health programs that you may be eligible for. You should continue to access these when you need through your general practitioner (GP) or hospital. A home care package should not be used for care and services that can be accessed through other health programs, including the Medical Benefits Scheme and the Pharmaceutical Benefits Scheme.

Source: Department of Health

In general, services are prioritised based on the service types and your assessed care needs:

1. Clinical care

nursing, personal care, medication management or allied health services

2. Health and safety

aids and equipment or minor home modifications to ensure safety and independence

3. Direct care services

In-home respite care, shopping assistance, transport or delivered meals

4. Indirect care services

home care or gardening

Home care package inclusions and exclusions

Your home care package funds should be used for services that meet your care needs. Your care needs are set out in your My Aged Care support plan and care plan.

Requests are reviewed on a case by case basis and if you are unsure what is included contact your case manager before making any purchases.

This list of items below are subject to change based off the advice of the Department of Health. If you would like to know more information, please visit: www.myagedcare.gov.au/publications/home-care-packages-manual-pdf where the Department of Health Home Care Package consumer manual is available to download.

Care Services – Inclusions (ALLOWED)

Service Inclusions	Content
Personal services	Personal assistance, including individual attention, supervision and physical assistance, with: • bathing, showering including providing shower chairs if necessary, personal hygiene and grooming, dressing and undressing, and using dressing aids • toileting • mobility • transfer (including in and out of bed)
Activities of daily living	Personal assistance, including individual attention, individual supervision, and physical assistance, with communication including assistance to address difficulties arising from impaired hearing, sight or speech, or lack of common language, assistance with the fitting of sensory communication aids, checking hearing aid batteries, cleaning spectacles and assistance using the telephone.
Nutrition, hydration, meal preparation and diet	 Includes: assistance with preparing meals assistance with special diet for health, religious, cultural or other reasons assistance with using eating utensils and eating aids and assistance with actual feeding, if necessary providing enteral feeding formula and equipment
Management of skin integrity	Includes providing bandages, dressings and skin emollients
Continence management	Includes: • assessment for and, if required, providing disposable pads and absorbent aids, commode chairs, bedpans and urinals, catheter and urinary drainage appliances and enemas • assistance in using continence aids and appliances and managing continence
Mobility and dexterity	 Includes: providing crutches, quadruped walkers, walking frames, walking sticks and wheelchairs providing mechanical devices for lifting, bed rails, slide sheets, sheepskins, tri-pillows, and pressure relieving mattresses assistance in using the above aids

Support Services – Inclusions (ALLOWED)

Service Inclusions	Content
Support services	Includes:
	• cleaning
	 personal laundry services, including laundering of care recipient's clothing and bedding that can be machine washed and ironing
	arranging for dry-cleaning of care recipient's clothing and bedding that cannot be machine- washed
	light gardening
	medication management
	 rehabilitative support, or helping to access rehabilitative support, to meet a professionally determined therapeutic need
	 emotional support including ongoing support in adjusting to a lifestyle involving increased dependency and assistance for the care recipient and carer, if appropriate
	 support for care recipients with cognitive impairment, including individual therapy, activities and access to specific programs designed to prevent or manage a particular condition or behaviour, enhance quality of life and provide ongoing support
	 providing 24-hour on-call access to emergency assistance including access to an emergency call system if the care recipient is assessed as requiring it
	 transport and personal assistance to help the care recipient shop, visit health practitioners or attend social activities
	respite care
	 home maintenance, reasonably required to maintain the home and garden in a condition of functional safety and provide an adequate level of security, such as cleaning gutters
	 modifications to the home, such as easy access taps, shower hose or bath rails Last updated January 2023 Page 65 of 130 Service inclusions Content
	assisting the care recipient, and the homeowner if the homeowner is not the care recipient, to access technical advice on major home modifications
	 advising the care recipient on areas of concern in their home that pose safety risks and ways to mitigate the risks
	 arranging social activities and providing or coordinating transport to social functions, entertainment activities and other out of home services
	assistance to access support services to maintain personal affairs
Leisure, interests and activities	Includes encouragement to take part in social and community activities that promote and protect the care recipient's lifestyle, interests and wellbeing
Care management	Includes ongoing assessment and planning undertaken on at least a monthly basis to ensure that the care recipient receives the care and services they need. This includes:
	regularly assessing the care recipient's needs, goals and preferences
	• reviewing the care recipient's home care agreement and care plan
	ensuring the care recipient's care and services are aligned with other supports
	 partnering with the care recipient and the care recipient's representatives about the care recipient's care and services
	ensuring that the care recipient's care and services are culturally safe
	identifying and addressing risks to the care recipient's safety, health and wellbeing
Clinical care	Includes:
	 nursing, allied health and therapy services such as speech therapy, podiatry, occupational or physiotherapy services
	other clinical services such as hearing and vision services
Access to other health and related services	Includes referral to health practitioners or other related service providers

Exclusions (NOT ALLOWED)

The following items must **not** be included in a package of care and services under the Home Care Packages Program. These items **cannot** be funded by the Home Care Package.

Exclusions Examples Services, goods · general home services that were never, or are generally not completed independently prior to age related functional decline, including home repairs/maintenance/specialist cleaning or supports performed by a tradesperson or other licensed professional that people are expected to cover · food (except as part of enteral feeding requirements or items listed under food for special out of their general medical purposes as per the Australia New Zealand Food Standards Code – Standard 2.9.5). income throughout home insurance their life regardless rates of age • water, sewage, gas and electricity costs · private transport related costs including vehicle registration, vehicle repairs, vehicle insurance and petrol • local transit costs of public bus, ferry or train fares • funeral costs and plans/insurance costs • pet care and associated costs such as pet food; registration; taxidermy, cremation • internet and telephone costs, exceptions include: Care recipients who are homeless or at risk of homelessness (as identified in a care recipient's ACAT assessment) can use Home Care Package funds for the ongoing monthly charges to ensure connection with service providers OR Care recipients who require the internet or landline to support delivery of medication management, remote monitoring service or delivery of an included service on the phone can use Home Care Package funds to set-up telecommunications connections (e.g., to get internet connected) • beauty therapy (e.g., manicures) and hairdressing · cost of entertainment activities, such as club memberships and tickets to sporting events • travel and accommodation for holidays • supplies to participate in any activity, e.g. gardening or craft · using Home Care Package funds to pay for solicitors or accountants for maintaining care recipients' personal affairs • gym or pool memberships/access costs when not prescribed for aged-related functional decline and monitored by health professional operating within their scope of practice Accommodation · assistance with home purchase costs • mortgage payments • permanent residential care (subsidised or private) and residential respite (subsidised) heating and cooling costs (installation and repairs) · whitegoods and electrical appliances (except items designed specifically for frailty such as a tipping kettle) · household furniture and furnishings: lounge suites and recliners which do not support a care recipient's mobility, dexterity and functional care needs and goals or other general household furniture such as coffee tables, wardrobes, and bookshelves · massage chairs when not prescribed by treating medical practitioner and/or allied health professional general mattress and frame for bed (exceptions for pressure relieving mattress or mattress/ frame for an electrical adjustable bed or hospital bed) • replacement/maintenance/servicing/cleaning of: water tanks, solar panels, fencing, roofs, heating and cooling or hot water systems or swimming pools · home modifications or capital items that are not related to the care recipient's ageing-related care needs. For example: windows, roofs, pergolas, sunrooms or decking · home modifications that don't support ageing safely e.g., non-accessible bathroom and kitchen modifications; non-standard fittings in accessible bathroom modifications (e.g., mosaic tiles)

Exclusions (NOT ALLOWED)

Accommodation costs

- · home modifications requiring development applications
- aesthetic modifications of any kind
- repainting the home
- major plumbing
- emptying of septic tank; remedying sewage surcharge (matter for water company/insurer)
- major electrical work, e.g., rewiring house
- replacement of entire floor and floor coverings throughout the home unless safe passage for mobility equipment required or slip hazard reduction required, as recommended by a health professional for care recipients at risk of falls
- replacement of foundation e.g., concrete/cement slab
- significant changes to the floorplan of the home, such as adding a new bathroom or extension
- extensive gardening services such as: Planting and maintaining crops, natives and ornamental plants, the installation and/or maintenance of raised garden beds, compost heaps, watering systems, water features and rock gardens
- landscaping
- tree removal
- removal of garden beds
- removal of shrubbery (unless preventing safe access and egress)

Payment of home care fees

- defined at section 52D of the Aged Care Act 1997
- includes income tested care fees, basic daily fees and additional fees

Payment of fees or charges for care or services funded or jointly funded by the Australian Government

- co-payments for state/territory government funded programs, such as subsidised taxi vouchers and/or aids and equipment schemes
- dentures, dentistry and dental surgery
- prescription glasses or contact lenses
- prostheses (e.g., artificial limb)
- · spectacles
- hearing aids available under the Hearing Services Program. Contact the Hearing Service
 Program (HSP) for guidance on hearing aid replacement and delegate approval for nonstandard hearing aids. Exception if care recipient is not a pension concession card holder as
 Home Care Package may cover like for like of typical hearing aid covered by HSP in this case
 only
- continence aids if a participant in the CAPS program
- diagnostic imaging
- natural therapies, including: Alexander technique, Aromatherapy, Bowen therapy, Buteyko, Feldenkrais, Homeopathy, Iridology, Kinesiology, Naturopathy, Pilates (except sessions supervised by an exercise physiologist or physiotherapist), Reflexology, Rolfing, Shiatsu, Tai chi (except sessions supervised by a Chinese Medicine Practitioner, exercise physiologist or physiotherapist), Western herbalism and Yoga (except sessions supervised by an exercise physiologist or physiotherapist)
- payment for informal care a Carer's Payments is available to fund the support of family and friends
- section 16.1 of the Home Care Packages Program Manual specifies more information about what ageing related programs can and cannot be accessed while receiving a Home Care Package

Exclusions (NOT ALLOWED)

Payment for
services and items
covered by the
Medicare Benefits
Schedule (MBS) or
the Pharmaceutical
Benefits Scheme
(PBS) (or items
that should be
considered for
funding through
these schemes)

- co-payments or gap fees, including for services covered by private health insurance
- medications, vitamins and supplements (as well as items not covered by the PBS such as offindication prescriptions, medicines not endorsed for listing by the Pharmaceutical Benefits Advisory Committee (PBAC) or medicines where the manufacturer has chosen not to list the product on the PBS
- consultation/tests/surgery with medical practitioner (GPs and specialists)
- the only exception to this is a private appointment (i.e. not covered by MBS) with a GP to meet evidence requirements for the dementia and cognition supplement and oxygen and enteral feeding supplements
- hospital costs
- ambulance cover
- private health insurance premiums

Provision of cash debit cards or like payments to care recipients for any purpose

- debit cards (unless the provider has rigorous systems in place to vet every payment and keep on file all receipts in accordance with the Records Principles 2014. Debit cards may pose issues for GST credits. Consult with the ATO for more information).
- cash payments or gift vouchers/cards, including online vouchers and coupons
- transfer of subsidy into care recipient or their family's personal/business bank account
 without rigorous acquittal by provider of funds against receipts matched to the Home Care
 Agreement, care plan and individualised budget in accordance with the Records Principles
 2014

Service coordination:

Changes to existing services:

You must discuss any new services or changes to services with your case manager before they are arranged. Your case manager will assess whether this is eligible under the home care package guidelines and whether there are sufficient funds for the purchase.

Request for new services:

Speak with your case manager to determine if your request is an item under the Home Care Package. Please do not make any purchase without seeking approval from your case manager.

Contact your case manager if you require additional services or if you need a health professional assessment organised. Your case manager will discuss with you your services and items that can be purchased to support your health, safety and care needs.

Requests for aids, equipment or minor home modifications:

All equipment needs must be assessed and approved by allied health or medical professionals before the package can fund the item.

The clinician will send their recommendations to your case manager who will be in contact with you to confirm items or equipment required. An item can be recommended by a health professional but will need to be under the Home Care Package allowable inclusions in order to be funded by the package.

Where equipment is purchased for you out of your package budget, it becomes your property and you are responsible for all ongoing maintenance and upkeep of that equipment. If you are experiencing financial hardship in meeting those maintenance costs, a submission can be made for financial hardship assistance, please contact your case manager.

Wait time for services:

Your case manager will request the service or assessment required for your care within 24-48 hours. The service provider may take a few days to confirm the service date and time once the confirmation is received from the provider, your case manager will contact you to advise.

Brokerage of services and carers:

At IPC Health, we enter into service agreements with private providers and make sure all direct care workers and contractors must have a valid Police Check, insurance coverage and relevant skills to ensure safety and quality of your care.

If you have a carer that you would like to continue to provide services to you under the home care packages program, please discuss this with your case manager.

Reimbursements:

Our primary payment arrangement with providers is to receive invoices and pay them directly for your care and services. Where this is not possible, please speak with your Case Manager about a potential reimbursement.

We are unable to reimburse any items which have not been previously agreed upon and approved in discussions and care planning.

Reimbursements cannot be submitted for regular services by a care support worker of your choice who does not wish to enter into a service agreement with IPC Health.

Reimbursements can be completed where preapproval is confirmed with the case manager and for a once of service or item.



After hours Emergency Services

Urgent and emergency medical care

National Home Doctor Services

(bulk billed) 13 74 25 13SICK.com.au

NURSE-ON-CALL

1300 60 60 24

Royal Dental Hospital of Melbourne

9341 1040

Lifeline

13 11 14

Omni-Care

(after hours home care package related enquires) 9484 8102

IPC Health Corporate Office

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1 Andrea Street
St Albans VIC 3021

Sunshine

Level 1, 499 Ballarat Road Sunshine VIC 3020

Altona Meadows

330 Queen Street Altona Meadows VIC 3028

Hoppers Crossing

117-129 Warringa Crescent Hoppers Crossing VIC 3029

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