Contents

Types of individual plans

Individual plans may be formal or informal, as identified below.

Formal plans	Informal plans
Individual plans may be formally developed and documented. Plans in the community sector have many different names, such as, individual plan, lifestyle plan, person-centred plan, individual program plan, individual employment plan and service delivery plan. Formally documented plans must be completed according to the policies of the organisation providing the service. All formal, documented plans include an overview of the: ▸ person's individual goals ▸ services to be provided on a day-to-day basis ▸ other necessary activities required to meet goals ▸ people responsible for implementation ▸ review strategies ▸ review dates.	Informal planning and responding to an individual's needs can take place daily in the community sector. It can take the form of asking someone how they want to spend their day, informally reviewing an existing formal plan or just by asking the person how everything is. Ongoing informal planning that is responsive to the individual's needs is essential to providing an integrated and flexible service. Informal planning may not always need to be documented but it must still occur within the boundaries of organisational policy and procedures.

Confirm individual needs

It is not enough to simply follow the instructions in the plan without talking to the person about what you intend to do first. People's needs and preferences change from day to day and so should your approach to support. Talk to the person about your role, as documented in the plan, so they feel they are part of the process. Provide them with the opportunity to discuss or even refuse support, rather than assuming that the person will passively accept your help in the same way every day.

Questions to ask before and during planned support

▸ Are you happy for me to proceed with what is written in the plan today?

▸ The plan says you usually have this task done in this particular way. Is that correct?

▸ What are you able to do independently and what tasks can I assist you with?

▸ How do you feel you are doing in meeting your goals so far?

▸ Is there someone else who you would like to be involved in planning or meeting your goals, such as a family member?

▸ Does this plan meet your needs?

Confirm required aids, processes and equipment

There are many different types of equipment, processes or aids that can assist people to remain independent, or to assist you to help them with their support needs.

Assistive, adaptive and rehabilitative devices allow individuals to maintain their safety, security and independence in their own homes. Specialist aids and equipment include specific processes that support workers must follow to select, locate and use the equipment appropriately.

The types of equipment, processes and aids required by a person depends on what tasks they are having difficulty with and why. It is essential that you confirm with the person you support, their requirements for assistive devices and processes.

Confirm processes

You should take the time to describe to the person you support, and their carer, the steps you will take to provide each aspect of support identified in their plan. Providing detailed, step-by-step information ensures the person and their carer know what to expect and what is expected of them.

The following table shows how processes can be clearly described to the person you support, and their carer.

Personal hygiene

Describe the following steps to the person you support, and their carer, regarding having a shower:

▶ adjusting the water temperature

▶ getting undressed

▶ getting into shower

▶ washing body parts

▶ washing hair

▶ drying.

Oral hygiene

Describe the following steps to the person you support, and their carer, regarding cleaning teeth or dentures:

▶ placing toothpaste on the brush

▶ brushing teeth

▶ rinsing

▶ removing dentures

▶ cleaning/soaking dentures.

Assess aids and equipment requirements

Some aids, equipment and devices can be quite costly and require an assessment by a doctor, physiotherapist or occupational therapist to ensure the right aid and/or modification is used. Each state and territory has programs to support people needing specific aids and modifications, as described below.

Australian Capital Territory	You can read more about the Aids and Equipment Program at: www.health.act.gov.au/our-services/rehabilitation-aged-and-community-care/oxygen-and-equipment-services
New South Wales	You can read more about the Aids and Equipment Program at: www.enable.health.nsw.gov.au/home/services/aep
Northern Territory	You can read more about the Aids and Equipment Program at: http://health.nt.gov.au/Aged_and_Disability/Aged_Care/HACC_Aged_Care_Equipment/index.aspx
Queensland	You can read more about the Aids and Equipment Program at: www.qld.gov.au/disability/families-carers-friends/aids-equipment/
South Australia	You can read more about the Aids and Equipment Program at: www.sa.gov.au/topics/community-support/in-home-care/domiciliary-care/equipment-program/
Tasmania	You can read more about the Aids and Equipment Program at: www.dhhs.tas.gov.au/service_information/services_files/RHH/treatments_and_services/community_equipment_scheme
Victoria	You can read more about the Aids and Equipment Program at: www.betterhealth.vic.gov.au/health/servicesandsupport
Western Australia	You can read more about the Aids and Equipment Program at: www.concessions.wa.gov.au/Concessions/Pages/Community-Aids-and-Equipment-Program-(CAEP)---funding.aspx

Notify relevant people

As well as confirming the details of your appointment with the person you are visiting, there are others you should notify before conducting a home visit. The relevant people may be internal or external to your organisation, as shown below.

Notify carers or family members

▶ An important part of the initial home visit it to develop a relationship with the person requiring support and any family, carers or significant others so they get to know and trust you.

Explain the role you will play and provide details for how they can contact you. Explain to family or carers what they should do if the person requiring support is hospitalised.

Notify a work colleague

▶ Make sure that a colleague knows where you are going, and what time you expect to return. Provide the colleague with the telephone number and/or address of the person you are visiting and let them know of any change of plans while you are out. Carry a mobile phone for communication and safety purposes.

Notify a line manager or supervisor

▶ Your organisation should have a policy and procedures relating to home visits that you must follow. It is usually a requirement that your line manager or supervisor is aware of your home visit schedule. When you are to conduct more than one home visit, you should provide an approximate time as to when you will be visiting each service user.

Prepare for the visit

If you have any doubts about visiting a person in their own home, arrange for someone to accompany you, with the agreement of the person you are visiting. Alternatively, you could meet the person at a suitable location where there are other people present.

If you have not met the person before, make an effort to check they are who they say they are. Phone the person again to check their address or look up their contact details in a telephone directory.

If you are visiting a person at a community centre or other common building, make sure you have clear directions and check that the building is open when you expect to arrive.

Assemble equipment

You must assemble equipment safely and correctly to meet work health and safety requirements. Always ask your supervisor for assistance and/or training before assembling equipment if you are not sure what to do. Use the following checklist as a guide.

Equipment assembly checklist:

▶ Make sure the person is safe before you leave them to gather the equipment needed.

▶ Ensure all parts are clean prior to assembly.

▶ Check for cracks or other faults – these must be reported and the item should not be used until it is repaired.

▶ Ensure that you follow all instructions and procedures relating to the equipment.

▶ Ask the person about their personal preferences for the position and settings of the aids and equipment they are to use.

Prepare resources and/or documents

Prior to visiting a person in their home, you may need to prepare resources and/or documents that will assist the person to achieve the goals outlined in their individual plan.

Resources and documents could include those described below.

Learning resources

▶ Resources could teach the person how to do something or access a service, rather than accessing the service on their behalf. For example, you could teach a person with disability to catch public transport rather than simply providing transport; or show someone how to use an ATM rather than doing their banking for them. Opportunities for learning should be supported with resources and materials that can assist the person to complete the task on their own.

Access to services

▶ An essential part of implementing individual plans is to ensure the person being supported is accessing the same services and activities in the community as the rest of society. Accessing generic community services is a strategy toward achieving community inclusiveness. All plans need to ensure people are being supported to be included in their community. You can educate and provide resources to the person you support to enable them to access generic services independently.

Organisational documents

▶ It may be a requirement of your organisation to provide the people you support with copies of your policies and procedures when you first visit them in the home. Policies and procedures provide important information and scope relating to the services provided, such as health and safety procedures, duty-of-care requirements, privacy laws, and the organisation's code of conduct.

You may be required to take organisational documents outlining support workers' responsibilities in providing a service in the home, as well as the responsibilities of service users in receiving the service.

2A Follow procedures to assure the person of your identity

When you arrive at a person's home, particularly for the first time, you must ensure that you maintain their privacy and confidentiality before entering. You also need to identify yourself to assure them that you are a bona fide support worker who is there to provide assistance.

Your supervisor will instruct you on the process to follow for your organisation, and provide you with access to the relevant policies and procedures for you to refer to. They will have notified the person that you are coming and sent them a copy of the roster for their services. You then need to follow the approved procedure to identify yourself to the person.

Introduce yourself

When a family member greets you, you need to repeat your introduction to that person.

After you have visited them for the first time, you will not need to check the address so carefully, but you will need to greet them by name and remind them of your name and why you are there.

Depending on the person's condition, you may need you to tell them who you are, where you are from and what tasks you are there to perform each time you visit. This is particularly the case if the person has a memory support need such as dementia or an acquired brain injury.

Here is a procedure to follow.

Introduce yourself
▶ Make sure you are wearing your name tag or identification badge.
▶ Check your roster for the address details.
▶ Check the street name and house or unit number.
▶ Knock on the door and wait for a response.
▶ When someone answers the door, ask for the person by name.
▶ Wait for them to confirm their identity.
▶ Introduce yourself with your name, organisation, the purpose of your visit and duties that you have come to perform.
▶ Wait to be invited to enter.

Complaints handling procedures

The complaints handling procedure outlines the process for managing complaints from service users. The following key elements are usually included in such a procedure.

Key elements of a complaints handling procedure
▶ Reasons for the procedure, explaining the commitment of the organisation to the complaints handling system
▶ Access to support and supervision for support workers and supervisors to assist with complaints handling
▶ Essential elements such as visibility and access; delegations; and communication responsibilities
▶ The complaint handling process
▶ Time frames for complaint action
▶ Support for complainants should they need support or assistance in making a complaint
▶ How complaints are recorded
▶ Service improvement commitment
▶ Mechanism used to monitor effectiveness of the complaints handling system

Independent advocacy

When the complaints, issues or concerns expressed by the person requiring support cannot be resolved by the support worker, or by a member of the organisation, an independent advocate should be sought. Independent advocacy involves speaking or acting on behalf of a person or group with minimised conflict of interest. Independent advocacy may be provided either by an informal advocate through a community-based advocacy organisation, or through a formal government advocacy service. Alternatively, a formal guardian may be appointed to act on the person's behalf.

Independent advocacy support should be sought when:

▶ there is a perception of conflict of interest; for example, when a support worker promotes personal or professional interests rather than supporting the person

▶ there is a conflict regarding the choices or decisions being made; for example, when a decision made by a support worker is rejected by the person with support needs, or vice versa

▶ there is concern regarding undue or inappropriate influence, or pressure being placed on the person's decision-making

▶ issues confronting the person with support needs, requires a level of authority or expertise that is beyond the support worker's role.

Seek and use feedback

There will be opportunities to seek both formal and informal feedback from the person you support. The formal process may include a satisfaction survey, as well as the opportunity to lodge grievances and complaints. Informal practices would include asking the person you support if they are satisfied or if there is anything you, or the service, could do better.

Gender roles

Gender roles feature strongly in some cultures, with a belief that a person of one gender should or should not do certain tasks. For example, Hors is an older man who lives alone. He needs help with home care as he has arthritis. His wife did all the housekeeping up until her death. Hors believes that it is a woman's role to care for the home and the man's role to earn money and do physical maintenance tasks. When John, the worker, arrives to do the cleaning Hors is shocked and confused. He finds it difficult to understand that John will do his cleaning.

Sexuality

People of some cultures have strong beliefs about how much of a person's body should be seen in public or even in their own home by family. Some Muslims believe that women should cover all their skin, with only their face and hands showing. Other cultures believe that legs should be covered to below the knee or that excessive visible skin (when wearing short skirts or tops) is unacceptable. Be aware of such attitudes and dress appropriately when visiting service users.

Be mindful that most people feel uncomfortable being naked in front of others. However, in some cultures it is considered inexcusable to be seen naked by anyone other than your spouse. It is important to assist these people in a way that upholds their privacy and dignity.

Music

Most cultures have music specific to their country or time. While you may dislike the music they play, some people may find the music you like offensive or loud. In the person's home, respect their choice. In a program with people from mixed cultures, there should be compromise to cater for a range of tastes in music.
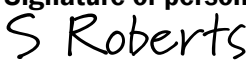
Personal touching

In many cultures touching, holding hands, hugging and kissing are considered acceptable, even with acquaintances or people you have just met. In other cultures touching is not acceptable at all and is considered offensive or rude. Make sure you are aware of people's preferences about personal touching, and always ask before touching someone.

Understand communication differences

You are likely to find a wide range of communication abilities among the people you support. Some conditions affect a person's language skills; for example, dementia or some forms of acquired brain injury, can reduce a person's ability to find the right words or to what you are saying. A person who has spoken another language before they learnt English may also revert back to that language as their condition progresses; it may therefore be important to plan for this need. An interpreter may be needed or you may need to learn a few words of another language so you can communicate with the person or seek other alternatives, such as pictures or gestures.

Here is an example of a hazard identification form.

Hazard identification, report and action form	
Type of hazard	☐ Slip or trip ☐ Infection control and/or hygiene ☐ Fire or flood ☐ Other:
Name of person reporting hazard	Sam Roberts
Nature of hazard	No antibacterial hand-wash available to fill soap containers.
Cause of hazard	Late delivery
Date of hazard	Monday 4 April 2016
Location of hazard	All hand-washing basins in day program building.
Describe the hazard and the risks of injury or harm	There was no antibacterial hand-wash available to refill the soap containers at staff hand basins for one day. This meant that staff may not have washed their hands properly after handling soiled materials or before preparing food.
How did the hazard occur?	The delivery that included hand-wash was scheduled for Wednesday. The supplier rang Wednesday afternoon to say the truck had broken down and the delivery would be delayed until Monday.
What immediate action was taken?	Signs were made to advise staff to use the hand basin in Bathroom 3, which still has a full soap container. Staff were advised also via the communication book, and verbally where possible.
Has any person been injured or had a near miss due to the hazard?	No
What further action is required to deal with the hazard?	In future, soap must be ordered earlier and not when it has almost run out.
Action: Person reporting the hazard must pass the completed form to the team leader. Team leader must pass form to the manager.	
Signature of person completing form: S Roberts	
Report date: 04/04/2016	**Date report received by team leader:** 04/04/2016
Signature of unit manager: K Singh	

Report risks to personal safety

Report any behaviours of concern that a person exhibits. This may be physical acts or things that are said. Look for any patterns in this behaviour.

Report any changes in the people who are present in the person's home, particularly if you feel threatened by any of them. Your supervisor needs to know.

Report sexually inappropriate behaviour. Sometimes it may be just a feeling that you have; sometimes it may be inappropriate language or a person may touch you inappropriately.

Report any incidents of bullying or harassment. This may include bullying from the person, the person's family or co-workers.

Take action

Conduct regular audits using the WHS checklist that your supervisor will supply. An audit should be undertaken at least annually. You may be asked to do this yourself or it may be done by a WHS specialist.

Give yourself breaks and keep up personal interests and hobbies for a life balance.

Be proactive; for example, consider vaccination against Hepatitis A and B.

Attend regular fire training and be familiar with evacuation procedures. Most organisations offer an annual update.

Attend WHS and manual-handling training if they are offered. Many organisations have a mandatory requirement for you to attend manual-handling training before you commence work, and encourage annual updates.

Home fire safety

As part of your duty of care to the person you are supporting, you will be trained in and require knowledge of fire safety. When working in a person's home, there are unique factors that make fire safety essential, as described below.

Home fire safety includes:

▶ understanding basic home fire safety matters

▶ understanding high-fire-risk groups

▶ being aware of behaviour that may contribute to fire injury and fatality

▶ knowing the role of a working smoke alarm

▶ understanding types of smoke alarms

▶ knowing the optimum placement of smoke alarms

▶ testing and cleaning smoke alarms

▶ referring service users for smoke alarm installation and maintenance.

Smoke alarms

As part of the WHS audit of the person's home, the worker undertaking the audit will use a checklist that includes ensuring that a smoke alarm is in place, has batteries and is in working order. For people requiring support who do not have a smoke alarm, your supervisor can make arrangements to have one installed under a home maintenance program. It is then your responsibility to monitor that it is in working order, on a regular basis.

Fit and remove gloves

These guidelines outline the correct way to fit, remove and replace gloves.

Fit gloves

▶ Remove jewellery

▶ Cover abrasions

▶ Wash and dry hands

▶ Fit gloves – adjust at the cuffs

Remove and dispose of gloves

▶ Remove by gripping at the cuffs

▶ Immediately dispose of gloves in appropriate waste

▶ Wash hands

Replace gloves

▶ After contact with a person or infected area

▶ If the gloves become contaminated or damaged

Enclosed footwear

It is a basic work health and safety consideration to protect your feet from injury while you are working. For example, in some workplaces there may be sharp objects or strong chemicals used; even a person's home may present risks. Wearing enclosed footwear will help protect your feet from injury. Shoes should have sturdy non-slip rubber soles, be made of a firm material such as leather and cover your whole foot. Support workers are on their feet for long periods, so shoes should be comfortable and give feet proper support.

Caps

In some home support roles you may be required to wear a cap to cover your hair. Caps prevent hair from coming into contact with surfaces where disease-causing bacteria and viruses may be found. Caps also reduce the risk of any loose hairs falling onto areas where you are working. This is especially important when working in food preparation or where a service user has an open sore or wound. The cap you are required to wear can vary from workplace to workplace. It may be a disposable showercap style or it may be a baseball-style cap which is kept clean but not disposed of.

When performing a role that requires you to wear a cap, you should:

▶ wear the cap correctly

▶ make sure the cap covers as much of your hair as possible

▶ neatly tie back long hair and/or tuck it inside the cap

Promoting independence and participation

From a community services perspective, promoting participation and independence is about empowerment and opportunity. Community support workers do not pretend a person is not ageing or does not have a disability. Instead, they try to make sure that receiving support is a positive experience for the person and foster as much self-sufficiency and choice as possible.

Choose the least restrictive option

Choosing the least restrictive option means that the support worker offers the service that impacts the least on the independence of the individual. For example, if a person can be supported with occasional home care, it would be restrictive to put them in overnight services or recommend they move into a residential facility.

Ways of doing tasks differently

Performing tasks differently may enable the person to do things independently. Specialised aids, equipment and assistive technology can enable a person to do tasks independently when they would otherwise need physical assistance.

Community access

An essential part of implementing individual plans is to ensure the person being supported is accessing the same services and activities in the community as the rest of society. Accessing generic community services is a strategy toward achieving community inclusiveness.

All plans need to ensure people are being supported to be included in their community. Here are some factors to consider when encouraging community inclusion.

Use community services

Consider generic services that other members of the community use. It can be restrictive and disempowering to use a specialised service when a generic service could provide the same service.

Empower individuals to access services

Support workers who teach a person how to catch public transport rather than simply providing transport, or teach a person how to use an ATM rather than having a worker do their banking for them, are taking an empowerment approach.

How policies and procedures affect implementation

Policies, protocols and procedures impact your work practice in planning and implementing support services. Here is more information that applies to your role in planning and implementation.

Policies and procedures regarding planning and implementation:

1 **Intake procedures**
Intake procedures guide intake processes, and will then impact on who manages the intake, the documentation that is completed and follow-up after the initial intake process.

2 **Privacy and confidentiality policies**
These affect the procedures for gaining people's consent to obtain and disclose information. They affect how information is stored, how consent forms are completed and how information is managed.

3 **Waiting list policies and procedures**
These affect how a support worker manages and responds to people who are on a waiting list to receive services, including how people are prioritised according to urgency and how people waiting for services are kept informed.

4 **Interpreter booking procedures**
These detail how a support worker engages an interpreter when required.

5 **Home visit policies and procedures**
These cover employee safety in terms of home visits, as well as signing out of the office, booking cars and using a work mobile phone. Additional policies or procedures may apply to out of hours or regional visits.

6 **Eligibility criteria**
These may be internal to the organisation and detailed in policy, or linked directly to government funding and the person's eligibility for a particular package of individualised funding.

7 **Protocols regarding documentation**
These affect all kinds of documentation including forms, templates, databases and notes, and may specify the format of individual files; who can access the files; and expectations in terms of timeliness of documentation being completed.

Access policies, protocols and procedures

Organisational policies, protocols and procedures are generally found in the organisation's policies and procedures manual or accessed online using an internal Intranet. Your supervisor will show you where relevant documents are located when you first start work. You are expected to understand your responsibilities as a support worker, including work health and safety and ethical behaviour guidelines.

Your job description will explain your duties and responsibilities as a support worker, and the standard expected of your work. Be aware of the limitations of your role. This means that you should only carry out the tasks you are trained to do and have the level of authority to perform. Always ask your supervisor for advice and assistance if you are unsure about how to carry out your work tasks and duties.

3D Deal with ethical dilemmas, behaviours of concern, possible abuse and/or neglect

As a support worker, you should be able to identify and deal with ethical dilemmas, behaviours of concern, and situations of abuse and neglect while still operating respectfully in the home. As you begin to form a relationship of trust and confidence with the person you support, you will learn to identify what triggers certain behaviours, and recognise indicators of abuse or neglect. Learn how to respond to critical situations in a professional and ethical manner by opting for solutions that ensure the safety and security of yourself and the person you support. Always adhere to your organisation's policies and procedures by observing, recording and correctly reporting ethical issues, concerning behaviours, or suspected abuse.

Ethical dilemmas

There are times when you must make a difficult decision based on an ethical dilemma. The ethical responsibilities of your organisation must be evaluated to workers, service users and the broader community to ensure ethical issues are resolved promptly and the service is delivered safely and fairly.

Ethical dilemmas may relate to the areas described here.

Relationship boundaries

When working with service users on a regular basis and as closer relationships form, there is the potential for boundaries to blur. The service users come to see and trust the worker as a friend and may rely on them for their social needs. It is essential that you maintain a professional relationship with the person you support and seek avenues for them to receive appropriate social support.

If service users and their families develop a strong relationship with support workers, they may extend invitations to significant social events or celebrations. You should maintain a professional relationship at all times and politely decline or discourage such invitations, unless attending is a part of your job role.

Gifts

You may sometimes be offered generous gifts, money or, in some cases, be nominated as the beneficiary of a person's will. While accepting a small token of gratitude, such as a box of chocolates for Christmas, may be a harmless occurrence – accepting gifts, money, a loan or benefiting from a will is strictly prohibited under codes of conduct for community services workers. You are obliged to report and record any gifts you receive from a person you support.

5 **Notification of the collection of personal information**
Outlines when and in what circumstances an organisation that collects personal information must notify an individual of certain matters.

6 **Use or disclosure of personal information**
Outlines the circumstances in which an organisation may use or disclose personal information that it holds.

7 **Direct marketing**
An organisation may only use or disclose personal information for direct marketing purposes if certain conditions are met.

8 **Cross-border disclosure of personal information**
Outlines the steps an organisation must take to protect personal information before it is disclosed overseas.

9 **Adoption, use or disclosure of government-related identifiers**
Outlines the limited circumstances when an organisation may adopt a government-related identifier of an individual as its own identifier, or use or disclose a government-related identifier of an individual.

10 **Quality of personal information**
An organisation must take reasonable steps to ensure the personal information it collects is accurate, up to date and complete.

11 **Security of personal information**
An organisation must take reasonable steps to protect personal information it holds from misuse, interference and loss, and from unauthorised access, modification or disclosure. An entity has obligations to destroy or de-identify personal information in certain circumstances.

12 **Access to personal information**
Outlines an organisation's obligations when an individual requests to be given access to personal information held about them by the organisation.

13 **Correction of personal information**
Outlines an organisation's obligations in relation to correcting the personal information it holds about individuals.

Further information is available at:

▶ www.oaic.gov.au/privacy/privacy-act/australian-privacy-principles

Example

Maintain confidentiality

Tony is assisting Lara at home with her personal care. Lara has to go to hospital for an operation and expects to be away from home for two weeks. She is worried about who will feed her cat and water her indoor plants.

Tony sees Lara's neighbour as he is leaving and tells him about Lara's operation and that she needs someone to help with the cat and the plants while she is away. The neighbour says he is happy to help. Tony runs back inside and tells Lara that he has told the neighbour about her trip to hospital and that the neighbour will help.

Lara turns white with rage. She says, 'The neighbour is a nosy parker, always going through my mail and checking through the windows. I don't want him knowing my business.' Tony has broken Lara's right to privacy.

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Topic 4

In this topic you will learn how to:

4A Comply with the organisational requirement to report

4B Complete and maintain documentation

4C Ensure any arrangements for follow up visits are recorded and implemented

Complete reports and documentation

Accurate and up-to-date record-keeping underpins quality service provision that meets individual needs. Actions are documented in a way that increases accountability and duty of care. Completing reporting and documentation is an essential role of support workers and coordinators. There are many different types of reports and documentation used in home and community services settings. These documents may relate to service users, staff and to the organisation and its operations. Support workers need to be aware of and abide by legislative requirements, policy requirements and organisational protocols about how documentation and reports are completed, maintained and stored.

Commonwealth Home Support Programme

Many Australians receive home support. These services allow people to be independent and continue to live in their own homes. From November 2015, the Commonwealth government implemented a new service delivery model. The Commonwealth Home Support Programme (CHSP) aims to provide smaller amounts of services to frail older people as a first step to keep people living in their own home for longer. Older people needing more assistance can apply for support through the Home Care Packages Programme.
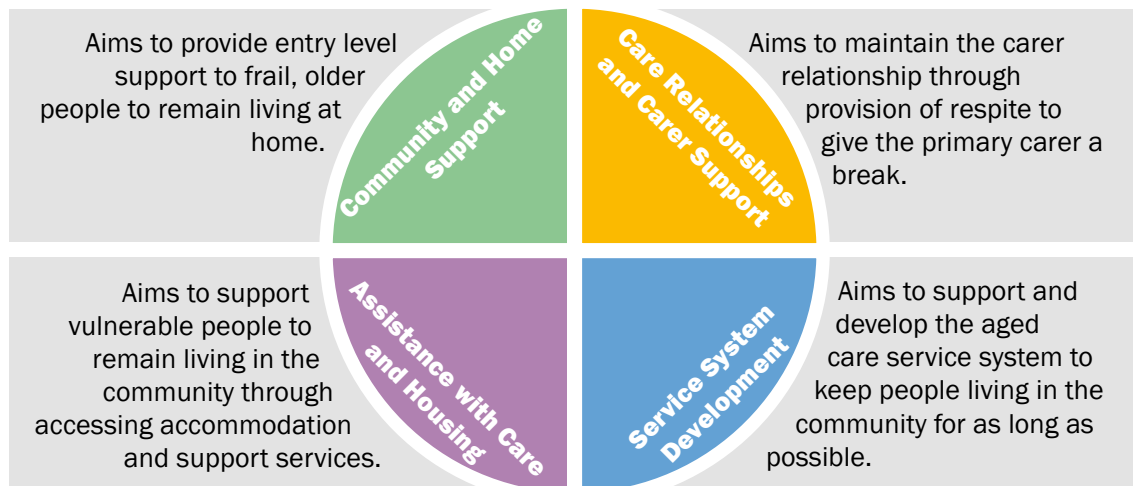
The Department of Social Services provides a range of support guides, advice and policies to direct home and community services workers in providing support to different community groups.

CHSP consolidates a range of previous funded programs including the:

▶ Commonwealth Home and Community Care (HACC)

▶ National Respite for Carers Program (NRCP)

▶ Day Therapy Centres (DTC)

▶ Assistance with Care and Housing for the Aged (ACHA).

Sub-programmes of home support

The CHSP has four sub-programmes. Information on each sub-programme is provided below.

Aims to provide entry level support to frail, older people to remain living at home.

Community and Home Support

Aims to maintain the carer relationship through provision of respite to give the primary carer a break.

Care Relationships and Carer Support

Aims to support vulnerable people to remain living in the community through accessing accommodation and support services.

Assistance with Care and Housing

Aims to support and develop the aged care service system to keep people living in the community for as long as possible.

Service System Development

▶ Overdependence on activities that may be substituting unmet needs, such as being too dependent on friendships with support staff, dependence on alcohol or other substances, and disinhibited or reckless behaviours such as overspending.

▶ Signs of neglect within the person's physical environment or of themselves, such as poor hygiene.

Report additional and unmet needs

If the individual plan does not address a need that you feel should be included, and the need is something that you could meet, such as supporting the person to practice a cultural activity like prayer, follow-up arrangements should be made to reassess the person's needs and revise their individual plan.

Other needs can be outside of our organisation's scope, but there are usually other places or services that can support a person to meet holistic needs. If you are unable to deliver the support required, contact your supervisor to discuss the person's needs.

You can support the person to access services or groups including:

▶ community initiatives and council run groups such as social groups and community transport

▶ professionals such as psychologists and counsellors

▶ cultural groups and church groups

▶ charitable organisations

▶ self-help groups

▶ specialist medical referrals.

Example

Ensure any arrangements for follow up visits are recorded and implemented

Hosea is a support worker who visited Mark in his home two weeks ago. Mark is an 80-year-old man who lives alone. Mark has a cardiovascular condition which means he needs assistance cleaning and maintaining his property every fortnight. Three days ago Mark suffered a mild heart attack. Mark is currently in hospital but has been given the all clear to return home tomorrow. Mark's daughter, Janice, will collect him from the hospital and bring him home. Janice contacts Hosea to let him know about Mark's situation. She explains to Hosea that Mark has been given new medication that he must take twice a day. She would like Hosea to conduct a follow-up visit with Mark as soon as possible to:

▶ evaluate the type, amount, and frequency of medications and the organisation and methods of medication delivery

▶ re-evaluate Mark's functional activities for living since having a heart attack

▶ clarify the roles and concerns of Mark's family members to support him at home.

Hosea arranges with Janice to visit Mark on the afternoon he returns home from hospital. Janice checks with Mark and he agrees to the follow-up visit. Hosea makes a record of his conversation with Janice in Mark's case notes, schedules the follow-up visit in his calendar and notifies his supervisor of the arrangements.

Practice task 16

1. Why are follow-up visits useful in the provision of home support services?

2. How should follow-up arrangements be recorded?

3. Describe two reasons for conducting follow-up visits.

Click to complete Practice task 16

Summary

1. Reports can be made in several ways, including written, verbal and in meetings.

2. Reports should contain factual and timely information.

3. Mandatory reporting laws vary between state and territory. They require that certain workers or professionals report signs of child abuse to authorities.

4. Protocols for correct and accurate documentation include writing objectively.

5. Storing of documentation must observe organisation protocols and includes ensuring confidentiality.

6. After completing an initial home visit with a person you support, you should identify and record any specific areas for follow-up against each expected outcome in the individual plan.