

COVID-19 Response

Home and Community Care Program for Younger People

Essential care and support

This information provides guidance to Home and Community Care Program for Younger People (HACC-PYP) services to support the continued delivery of essential frontline services in response to the COVID-19 pandemic via safe and alternative means that support the most vulnerable members of the community. It is essential that consumers continue to receive ongoing services where possible throughout the COVID-19 pandemic.

This guidance should:

- Build upon the pandemic and business continuity planning already underway by the community health, community care and local government sectors. These plans should be continually reviewed and refined to align with current COVID-19 advice.
- Inform alternative modes of service delivery and support the continued delivery of essential services to consumers, without compromising the health and wellbeing of consumers or the workforce.

It is essential that consumers continue to receive essential ongoing HACC- PYP services where possible throughout the COVID-19 pandemic. Provision of care and support through HACC-PYP helps an individual to be able to live as independently as possible and covers a wide range of support levels. Some services provide intimate and personal care. Other services provide support around daily living, food preparation, personal safety and access to the community.

Most of the intimate care and support and some daily living supports cannot be deferred without putting individuals at risk of harm. It is vital that these services are prioritised for people who do not have family or other informal supports:

- personal care and supports
- cleaning and washing activities necessary to maintain good hygiene and a safe environment
- assessment
- maintenance of a safe home environment
- access to food and necessary supplies this may be shopping support or meals

Providers should determine what service arrangements can be made to ensure essential services are provided to the client, while also ensuring a safe working environment for the worker. Where it is determined that a HACC-PYP service **cannot** safely be provided, the client **must be referred to alternative supports**. This might be support from the local primary health provider, community nursing provider, emergency respite or hospital.

General advice

Guidance is current at the date of publication. As the pandemic progresses, settings are likely to change. Services should refer to https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19 or ring clinical advice line **1800 675 398** to seek current advice if unsure.

All services are encouraged to:

 Keep up-to-date with current COVID-19 advice and information for health providers on the Department of Health and Human Services' website: https://www.dhhs.vic.gov.au/coronavirus



- Refer to https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19 for the guidelines for health services and general practitioners, including transmission reduction and physical/social distancing measures
- Stay up to date by following the Chief Health Officer on Twitter (https://twitter.com/victoriancho?lang=en) to and subscribe to the newsletter by emailing: COVID-19@dhhs.vic.gov.au

Services should also be aware that for vulnerable patients or vulnerable health practitioners, new bulk-billed non-admitted items have been introduced for telehealth. Further information can be found at http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/news-2020-03-01-latest-news-March

Principles of critical and essential service delivery

DHHS recommends that HACC PYP providers **develop and implement** actions to move to an alternative service delivery model to deliver based on several principles

- Ensure the continued delivery of essential services and ensure that back up plans are in place if there are workforce shortages or staff are redirected to other COVID-19 duties
- Deliver essential services in different and safe ways which contribute to the reduction of COVID-19 infection
 and transmission rates for workers and the community. This includes reducing face to face contact wherever
 possible and aligning with current COVID-19 physical distancing advice
- Prioritise access as needed and in consideration of workforce availability to those people that need services the most, based on vulnerability, risk and need
- Ensure that Personal Protective Equipment (PPE) is prioritised and used in accordance with current DHHS advice at https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19

Key Actions

- 1. Provide priority access for essential personal supports to clients who:
- · do not have support networks that can help
- need personal support that cannot be provided through prompting, encouragement or self-management Decisions about the need to conduct a short face to face home or service visit to deliver essential personal supports is at **service provider discretion** and in line with the organisation's decision-making process and local business continuity/pandemic plans.
- 2. Suspend or deliver non-essential services in ways that do not include any face to face contact, including:
- social support (groups, outings and one on one support)
- family support (respite)
- 3. To reduce face to face contact wherever possible, HACC-PYP providers should:
- replace essential personal care and support by using telephone or social media to undertake welfare checks,
 prompts and supports for people to look after themselves; and/or support family and or informal carers in close
 contact with the person to provide the supports. Prompting and encouragement might be by phone or through
 social media such as Skype and Zoom. The length of these contacts should reflect the needs of individuals and
 families.
- ensure clients have continued access to food and essentials by shopping on their behalf or delivering meals.
 Worked should take steps to limit physical contact when delivering food/goods for example by calling ahead and leaving goods at the front door if safe to do so.
- seek to enhance self management processes by providing advice and tips on how to self manage where
 possible; providing telephone/social media guidance to prompt people to self manage; and supporting family or
 other informal support people to provide care.
- **increase** cleaning activity by workers to reduce risk of retention of the virus on hard surfaces; and keep properties well ventilated during visits by opening windows whenever safe and appropriate to do so.

- **reduce** the impacts of social isolation and help clients to stay connected whilst following physical distancing advice. This might be via phone and/or video calls, sharing postcards, photos or artwork via Skype or Zoom or provision of alternative social support options.
- **minimise** physical contact during **essential** face to face supports and practice universal precautions. For example, home care staff may change the way that personal care is done to limit person-to-person touch where possible.
- DHHS is not recommending use of PPE for all clinical/personal care where COVID-19 is not suspected.
 Standard infection control precautions should be adhered to. As such, staff should continue to use the standard infection control equipment that they would use under normal service provision. (for example, use and apron and gloves when helping with showering).
- Suspend or deliver non-essential services in ways that do not include any face to face contact, including:
 - a. social support (groups, outings and one on one support)
 - b. family support (respite)
- 4. For **essential face to face** service delivery to clients with **no** respiratory symptoms and where COVID-19 is **not** suspected:
 - **minimise** physical contact during **essential** face to face supports and practice universal infection control precautions.
 - DHHS is not recommending use of PPE for all clinical/personal care where COVID-19 is not suspected. **Standard infection control precautions** should be adhered to. As such, staff should continue to use the standard infection control equipment that they would use under normal service provision. (for example, use and apron and gloves when helping with showering).
 - Services must emphasise the importance of hand hygiene (including before and after all glove use).
- 5. For essential face to face service delivery to clients with known or suspected COVID-19:
 - DHHS recommends service delivery be conducted via electronic, media or telephone wherever possible and safe to do so.
 - Prioritise essential face to face appointments only for at risk or high needs clients and practice standard
 infection control precautions. If face to face support is deemed professionally essential, please follow
 current DHHS guidance to stay safe: https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19
 - only use full PPE in accordance with current DHHS guidance at https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19. Advice on the correct usage of PPE, including how to put PPE on and take it off is available at https://www.dhhs.vic.gov.au/coronavirus
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 - Given the worldwide PPE shortage, DHHS will provide additional advice about the provision of PPE for the delivery of **essential** services for suspected or confirmed COVID-19 cases.
- 6. DHHS recommends that service providers:
 - Communicate and discuss any changes to a person's care arrangements with the person and their carers (where appropriate) at the earliest opportunity
 - Have a process in place for clients to raise concerns about the way services are delivered, or if they would like to make changes to the way their services are delivered because of the COVID-19 outbreak
 - Regularly review the list of clients, and ensure that it is up to date, identifying the levels of informal support available to individuals
 - Identify who in the organisation has authority to make decisions about the continued provision or suspension
 of care, taking into consideration the safety and welfare of clients and workers. Ensure all staff are aware of
 the process

HACC-PYP workforce health and availability

If HACC-PYP providers are concerned that an employee or employee's family member may have been or have been exposed to COVID-19, they should:

- Follow DHHS advice on https://www.dhhs.vic.gov.au/coronavirus
- Contact the 24 hour/7 day per week dedicated COVID-19 hotline 1800 675 398

If there are HACC-PYP workforce shortages, service providers are encouraged to work together across organisations to formulate local arrangements to sustain continued delivery of essential in home and living support.

Service agreements, funding and reporting

DHHS recognises the critical role of funded HACC-PYP agencies in the provision of services to clients and their communities. The Department has published advice on the Funded Agency Channel addressing the funding implications for services during the COVID-19 pandemic. This advice can be found at https://fac.dhhs.vic.gov.au/funding-and-service-delivery-responding-covid-19.

Agencies should be reassured that DHHS:

- Will continue to provide funding and will not recoup funds for suspended services
- Understands funding may need to be redirected by services to implement alternative service delivery responses
- Understands that participation rates and targets may be impacted by COVID-19
- Expects that current year unspent funding will be rolled over to the following financial year to support HACC-PYP programs

Services should have a prior discussion with their DHHS Area Agency Performance and System Support (APSS) Manager about any service closures or major service changes that will require significant redirection of funding.

To receive this publication in an accessible format, email covid-19projectmanagementoffice@dhhs.vic.gov.au

For more information about COVID-19, call the Coronavirus Health Information Line on 1800 020 080.

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