

## Eligibility and priority

### HACC target group

The HACC target group encompasses 'older and frail people with moderate, severe or profound disabilities, younger people with moderate, severe or profound disabilities, and their unpaid carers'.

Eligibility means that the person is assessed as being in the HACC program target group. Eligible people are then prioritised for service provision.

Services funded by the HACC program are provided to people within the target group after the person has been assessed and their level of need prioritised.

Eligibility for services is not based solely on age, but on the level of difficulty a person experiences in carrying out tasks of daily living.

Activities of daily living include personal care, dressing, preparing meals, house cleaning and maintenance, and using public transport.

Eligibility does not confer entitlement to service provision.

Services may not be able to be provided due to other people being assessed as a higher priority or resources not being available.

Organisations should regularly reassess and prioritise existing service users.

### Eligibility and residency or visa status

Access to some government funded services can be restricted due to the immigration residency status or visa type that a potential client may hold.

It is important to remember that there is **no restriction** on access to HACC services based on residency status or visa type.

For further information in relation to assessments, see:

- Part 2: 'Service coordination, assessment and care planning'
- Part 3: 'Living at home assessment'.

### Priority

Services are only provided to people in the HACC target group subject to assessment for eligibility and level of priority.

Overall, the HACC program targets its services to people who have the greatest need and/or capacity to benefit from them.

Services are provided where they would not otherwise be available through self-provision, carer and family support or another government program.

Priority is assessed in the context of a person's usual living environment and available supports, in comparison to other eligible people.

Factors such as the person's relative needs and the capacity of service providers to respond with existing resources may mean that services cannot be provided even if the person is eligible.

In order to manage demand, organisations should discuss exit strategies and short-term service use as part of the wellness and restorative approach to HACC service provision.

Organisations should regularly review and reassess people's progress towards achieving their goals and adjust care plans accordingly.

Where demand exceeds service supply, it is the responsibility of the funded organisation to allocate resources in a way that provides the most benefit to the greatest number of people.

Factors to be taken in to account in making this judgement include:

- the level of service to be provided given that the HACC program funds provision of basic maintenance and support
- the vulnerability of the person's health and wellbeing to further deterioration
- the effect of service delivery on carers
- the likelihood that the service will assist the person to attain their goals, for example, reduce the risk of admission to hospital or residential care, or maintain quality of life in the community
- the effect on other people seeking support from HACC services.

If clients or carers feel that they need a higher level of service than the provider can offer at the conclusion of the assessment for priority and service planning, they can request to purchase additional services from the provider.

These requests will be considered based on the organisation's capacity and the availability of staff members to meet the request on a full cost-recovery basis.

## Special needs groups

Within the broad HACC target group the HACC Review Agreement 2007 lists five special needs groups who may experience barriers to accessing services.

A person's eligibility for HACC services should be determined before considering whether they belong to a special needs group.

The concept of special needs does not mean that one person is prioritised over others for service provision, but that their diversity should be considered during access, assessment, care planning and service provision.

The special needs groups are people:

- from Aboriginal and Torres Strait Islander backgrounds
- from culturally and linguistically diverse (CALD) backgrounds
- with dementia
- living in isolated and remote areas
- experiencing financial disadvantage (including people who are homeless or at risk of homelessness).

Diversity planning and practice aims to improve access to services for eligible people who are marginalised or disadvantaged, and to improve the capacity of the service system to respond appropriately to their needs.

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## Links

HACC Review Agreement

<http://www.health.gov.au/internet/main/publishing.nsf/Content/hacc-review.htm>