

Domestic assistance

Introduction

This section describes the requirements for HACC funded domestic assistance.

Readers should also refer to:

- Part 3: 'The Victorian approach to care: the active service model'
- Part 3: 'Living at home assessments'
- Part 3: 'Personal Care Policy'
- Part 2: 'Assessment and care planning'.

Domestic assistance provides advice and assistance to improve or maintain people's capacity to manage everyday activities in a safe, secure and healthy home environment.

Scope

Examples of domestic assistance tasks include:

- skill development and capacity building, for example, demonstrating the use of light-weight cleaning equipment
- teaching the person unfamiliar tasks or techniques to resume tasks such as meal preparation so they can manage as independently as possible
- essential cleaning in the bathroom, toilet, kitchen, laundry, living area and bedroom, such as dishwashing, mopping or vacuuming floors, dusting, changing bed linen, clothes washing and cleaning bench tops, stove tops or refrigerators
- working alongside and sharing tasks with the person in order to build their confidence and maintain their capacity to do as much as possible for themselves
- doing shopping and running small errands
- escorting the person to do their shopping, pay bills or attend medical and related appointments where no personal care is required; note that HACC service providers do not give financial advice or offer to assist with managing a person's finances
- preparing meals (see the 'Staffing statement' below)
- escorting the person to a physical activity program to improve their strength, capacity and confidence where no personal care assistance is required
- maintenance of the home and garden to ensure there are no health or safety risks (see also the 'Property maintenance' section of this manual)
- organising one-off rubbish removal, spring cleaning and household organisation to improve safety and household management
- assisting with pet care when family, neighbourhood or volunteer-based community assistance is not available or appropriate.

Domestic assistance or personal care

The assessment process should include consideration of whether the specific support required comes under domestic assistance or personal care.

It is appropriate for the assistance to be provided as personal care if:

- The person requires physical assistance with activities such as meal preparation, mobility or toileting.
- The care plan is designed around regaining skills.

Some of the tasks described above may require input from an allied health professional such as an occupational therapist or physiotherapist as part of the care plan development.

For more information see 'Allied health' and 'Personal Care Policy' sections, both in Part 3.

Assessment and care planning

Domestic assistance commences with a face-to-face assessment to explore needs and issues relevant to activities of daily living and maintaining the home environment. This may occur as a service-specific assessment or as part of a Living at home assessment.

Assessment includes:

- discussion about the person's strengths, capabilities, interests and underlying need for support
- identification of tasks that the person is able, unable or partially able to do
- identifying opportunities for building skills and confidence in undertaking tasks
- consideration of allied health intervention to improve the person's capacity to do certain tasks for themselves including the use of aids and equipment
- occupational health and safety assessment including assessment of cleaning processes and equipment
- identification of safety concerns to prevent falls or other accidents
- personal safety during emergencies and extreme weather events such as heatwaves.

Following assessment, a goal directed care plan is developed in collaboration with the person and their carer. The plan takes into account the person's abilities and priorities. It also lists the person's goals and strategies to maximise their independence at home, including:

- agreement on tasks that will be undertaken by the person, their carer, other family members and the community care worker
- provision of support in a manner that supports incidental physical activity
- referrals as needed for allied health, aids and equipment or other assistance to build skills and confidence
- timeframes for the assistance to be provided for example, single episode, short term, ongoing, periodic or intermittent
- an occupational health and safety plan
- provision of information on independence at home and safety issues such as information on personal emergency planning, smoke alarms and how to cope in a heat wave
- assistance with transition or exit as relevant.

The care plan provides instructions to community care workers in terms of the person's goals and the tasks and supports to be provided.

Each person's progress is monitored and there is a clear process for community care workers to report observed changes in the person's condition. Care plans and progress towards goals are reviewed on a regular basis.

For further information on occupational health and safety see Part 1 'Employee and related requirements'.

Role of community care worker

Assessment staff, team leaders and supervisors should provide community care workers, including casual staff with access to relevant information about the person's needs, strengths and goals from the assessment and care planning process. This will assist community care workers to:

- understand their role and the specific tasks to be undertaken as identified in the care plan
- understand their role in demonstrating, coaching, supervising, and/or mentoring clients to achieve their goals
- participate as part of a broader team in optimising people's health and wellbeing
- observe and monitor the person and their carer's progress and provide feedback.

As community care workers develop trusting relationships with a person, the continuity of care becomes a key consideration.

Matching the community care worker to the person's needs should be considered during the care planning process. The matching process must take into account:

- the person's needs, diversity characteristics and preferences
- where appropriate their carer/s needs, diversity characteristics and preferences
- the tasks to be performed.

Staffing statement

For detailed information on the qualifications required, refer to Part 1 'Employee and related requirements'.

Organisations providing domestic assistance must have appropriate policies and procedures in place to:

- ensure appropriate time is allocated for support and supervision of community care workers
- support the ongoing competency training and education requirements for community care workers.

Where the community care worker is involved in food handling and meal preparation they must adhere to safe food handling practices including personal hygiene and cleanliness.

Employees should encourage their staff to undertake food handling training. The relevant competency unit is HLTFS207C Follow basic food safety practices. This is available as an online unit through the HACCC Education and Training provider.

Reporting requirements

Organisations funded for domestic assistance are required to participate in the quarterly collection of the HACC minimum data set (MDS).

For details, see Part 1: 'Reporting and data collection'.

The HACC MDS is used to record details of individual clients receiving hours of domestic assistance.

Links

Community Services and Health Industry Skills Council
www.cshisc.com.au

National Training Package Information
<http://training.gov.au>
