

Planning Tool
OT/LGA Partnership
Loddon Mallee Region



INTRODUCTION

The Occupational Therapy and Personal Care Growth funding provided through the Department of Health HACC program offers an important opportunity for local HACC service providers to work together to improve services to clients and support client independence and autonomy.

The funding seeks to support the development of practices that progress the Active Service Model:

- OTs can support the development and implementation of client service plans that maximise client independence, and
- Personal care teams can broaden the type of personal care that can be provided in response to effective planning based around client goals and building independence.

It is recognised that each LGA is unique and will develop the initiative to suit the local context and service needs.

ABOUT THE PLANNING TOOL

This planning template offers some structure to support each LGA with their planning, and to provide some consistency around documenting and evaluating outcomes across the region. It is not intended as a project monitoring tool, but to support planning, capture approaches taken and what is being learnt along the way.

The tool recognises that effective partnerships will support good planning, and that success is directly affected by clear aims and objectives agreed upon at the start. Investing time in some robust planning and review over the first 12 months of the initiative will provide a solid foundation for the ongoing utilisation of this funding.

It is expected that this tool will be completed through a collaborative approach between the participating organisations in each LGA – the identification of *shared* goals, agreements around the role and location of the OT, and clarity about how the two organisations will work together and negotiate the inevitable challenges, will support successful outcomes.

PLANNING TOOL - OCCUPATIONAL THERAPY GROWTH FUNDING

Organisation that received funding	
Department of Health Region	Loddon Mallee
Local government area	
Health Service contact	
Telephone number	
Email	
Local Government Contact	
Telephone number	
Email	

Please identify any other participating agencies or organisations? How are they contributing?

Aim of the funding

The allocation of funds across all local government areas to Occupational Therapy and Personal Care have been targeted to councils and community health services to expand capacity to deliver Active Service Model across the system.

OT and Personal Care are 2 key activities that underpin:

- **A restorative approach, building on people's capacity to do things for themselves**
- **More person centred and flexible responses delivered through personal care**

Specific funding objectives

The following specific objectives have been identified by the Department of Health::

- Review/development of formal protocols/arrangements between HAS and the Health Service (refer to Criteria 6 of the HAS Designation Application document)
- Build workforce capacity in service delivery, through collaboration of OT's, Assessment Officers and Personal Carers
- OT & PC involvement in Care Plan development and/or Service Delivery, where relevant - Assessment, Care Coordination, Service Delivery and Review/Reassessment
- To increase the number of referrals to OT's for Assessment
- To increase the number of joint assessments with OT's

PLANNING FOR CHANGE

Considering the following key questions will support the development of a plan that is responsive to the needs of HACC clients in your LGA.

- 1. What are the current issues in your local service system that if addressed would lead to better outcomes for HACC clients within the ASM context? What does data tell you?** (consider service access and coordination, unmet demand, staff professional development needs, assessment and review of care plans etc)
- 2. How could the additional OT/PC funding assist to address these issues?**
- 3. Describe the client group(s) that the OT will focus on in the first instance (recognising that this may change over time)** eg. All new referrals; review of complex clients; home modifications; clients with shorter term, restorative care focused needs etc
- 4. What will be different as a result of this work? Describe what you are hoping to change in concrete terms** (these become your objectives for planning below).
- 5. What will be the key responsibilities of the OT? With clients? With HACC staff? Other stakeholders?**
- 6. What are the key responsibilities of HACC staff – Assessment, personal care and domestic assistance staff?**
- 7. How is the health service(s) and local government partnership being managed? (partnership agreement, communication, meetings and review)**

8. What resources – skills, knowledge, networks, infrastructure etc – does each organisation bring to the project?

9. What resourcing issues do you think you need to consider to support the initiative (consider co-location needs, IT, administration, travel)

10. Are there any risks or barriers to your progress? What could you do to address these risks?

11. Implementation Plan.

Objectives (from Q4 above)	Strategies /Actions <i>Identify what you will do to achieve your objectives</i>	Deliverables <i>How will you know you have achieved</i>	Time frames	Responsibility
<i>eg. Personal care staff are increasingly engaged in working from an ASM perspective</i>	<ul style="list-style-type: none"> • <i>OT supports the capacity building of PC staff through information sessions, informal discussion, joint planning and home visits with PC staff</i> 	<ul style="list-style-type: none"> • <i>Personal Care staff are engaged in client planning and review processes</i> • <i>There is evidence of new practices by PC staff</i> • <i>Client identified goals are being achieved.</i> 		
1.				
2.				
3.				

<p>Key milestones and timelines (consider partnership agreements and planning, recruitment, orientation, communication with staff and clients, planning, action, review, client feedback)</p> <ul style="list-style-type: none"> • Eg. Develop partnership agreement – January 2014 • • •
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12. How will you gather evidence to capture the outcomes for clients, staff, the organisation?

Please complete the following for the groups relevant to your initiative. Aim to keep evidence gathering processes simple, using existing processes where possible. Consider qualitative measures also – case studies, client feedback, team discussions etc.

Target Group (indicate the client groups that will be prioritised eg Delivered Meals recipients)	Reach (ie. How many people may be affected by the initiative?)	Impacts (ie. What do you hope to change as a result of your program?)	What information/tools will you use to identify the impacts of your project on this group? (ie. How will you know you have made an impact on this group? What measures will you use?)
1			
2			
3			
4			

Please provide a copy of this plan to your Project Officer, who will collate information support planning and implementation activities as appropriate.

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