



HOME AND COMMUNITY CARE (HACC) SERVICE PROVISION GUIDELINES FOR PEOPLE WITH MENTAL HEALTH ISSUES

While people with mental health issues are part of the HACC target population, in making a decision about priority of access to HACC services, the HACC Service Provider should take into account:

- the person's eligibility for support from another Government program, such as Mental Health funded community care service
- whether the person is currently receiving support from a Mental Health funded community care service

Support through the HACC Program should not generally be provided to a person who is already receiving similar services from other Government funded community care programs.

Community based mental health services include clinical support through a community mental health team and mental health support services provided through Non-Government Organisations (NGOs).



People living in the community with mental health issues who currently receive support from a Mental Health funded community care service

People with mental health issues, currently receiving HACC like support from community based mental health service, would not have priority of access to HACC services.

Case example	Support needs/request	Comments
65 year old woman with diagnosed depression. Remains in bed throughout the day and shows no interest in social activities. Requires motivation to initiate personal care (showering). However, with encouragement is able to do all domestic and personal care without assistance.	MH provides clinical support through a community based mental health team and independent living skills program to provide skills development opportunities for the learning/re learning of self care skills through a mental health funded NGO	Not a priority for HACC support
64 year old man with bipolar disorder who has a history of needing short-term support for the activities of daily living after a period of hospitalisation.	Support from community mental health team but no NGO support	HACC Service Provider would need to work in partnership with the mental health team to implement appropriate short term support to assist this man to regain his independence.
60 year old woman with agoraphobia unable to do her shopping. Needs help with tasks outside her home (ie shopping, banking).	MH clinician provides support 1 hour per month. HACC provides 1 hour per week to support her with shopping, banking and bill paying	This level of HACC support is consistent with the WA HACC Service Provision Level Guidelines.



People with mental health issues currently living in mental health funded supported accommodation services

People living in 24 hour supported accommodation funded by Mental Health (MH). This includes inpatient facilities, drug and alcohol facilities, long/short term mental health community facilities, clinical step down, respite/crisis accommodation and hostel/boarding houses are not eligible for HACC services.

People with mental health issues living in Mental Health funded supported accommodation that provides less than 24-hour support, HACC service providers can provide complementary support based on priority of access decision making process. The support provided by HACC must not duplicate any support being provided by Mental Health, Community Care funded service.

To provide complementary support a HACC service provider should consider whether:

- the support the person currently receives as part of their Mental Health funded supported accommodation and whether this needs to be increased by that service
- the requested complementary HACC support fits within the current WA HACC Service Provision Level Guidelines

Case example	Support needs/request	Comments
46 year old man with who has difficulty with activities of daily living. Lives in a mental health boarding house funded by Mental Health.	Currently receives 24 hour support as part of accommodation package. Request for assistance with grocery shopping	This level of support is consistent with the WA HACC Service Provision Guidelines
68 year old woman with bipolar disorder. Lives in a hostel funded by Mental Health.	Currently receives supported accommodation including full board (i.e. meals, linen and regular outings and craft groups). Request assistance to attend a local drop in centre	This is a duplicative service currently provided by Mental Health supported accommodation. Not a priority for HACC support
52 year old man with a diagnosis of Schizophrenia recently discharged from in-patient facility. Lives in a hostel funded by Mental Health.	Requests assistance with some basic shopping and cooking skills	This is a duplicative service currently provided by Mental Health supported accommodation



People with a mental health issue not currently receiving support from a Mental Health funded service

To be eligible these people need to have an ongoing functional disability that impacts on their capacity to live independently. Support services would be provided to those people in accordance with the WA HACC Service Provision Guidelines (August 2006).

Case example	Support needs/request	Comment
80 years old woman, mild bipolar disorder. Has difficulty with heavy cleaning tasks.	HACC provides monthly support to assist with heavy cleaning tasks	Current level of HACC support is consistent with the WA HACC Service Provision Guidelines
73 year old man with depression. Lives in the community with wife, 69 years old, who is his primary carer.	HACC provides the wife with a regular break (respite) of 2 hours per week	This level of HACC support is consistent with the WA HACC Service Provision Level Guidelines
55 year old woman with mental health issues (appears to have paranoia no diagnosis) requires assistance to get to and home from the shops as unable to carry heavy shopping bags.	HACC provides transport to the shops once a week	This level of HACC support is consistent with the WA HACC Service Provision Level Guidelines
35 year old women, with ongoing depression, currently monitored by GP. She currently needs assistance to visit her GP, complete her banking and bill paying.	HACC provides weekly transport to the shops and GP visits. Family member identifies that depressive episodes are becoming more frequent and requests additional HACC support.	Current level of HACC support is consistent with the WA HACC Service Provision Guidelines. HACC Service Provider should suggest that the family member should visit the GP, for advice on need for referral to mental health services.

For further information:

Home and Community Care Program

Department of Health WA
PO Box 8172, Perth Business Centre
PERTH WA 6849
(08) 9222 4060

Home and Community Care Program Website

www.health.wa.gov.au/hacc



ADDITIONAL INFORMATION

MENTAL HEALTH SERVICES

In WA there is a range of mental health support services. Mental health care is provided for adolescents, adults and older people. Support is provided through community mental health units, hospitals and community health centres.

There is also a wide range of non-government organisations that provide mental health support services with funding assistance from the State Government.

Information on support services is available from HealthInfo 1300 135 030 or <http://www.mental.health.wa.gov.au/one/healthservices.asp>

Community Mental Health Eligibility

- A person living within the catchment area of a community mental health service;
- The person is 18 years or older;
- The person has a major mental illness as defined by the Mental Health Act (1996);
- Priority is given to people:
 - With a community treatment order
 - Discharged from an inpatient facility
 - With a major mental illness involving significant impairment in self-care, social skills, vocational performance and emotional state, and who require specialist mental health care

The Mental Health Emergency Response Line is 9224 8888 - all hours, 1800 676 822 - rural free call.



Community care support (funded through Mental Health and delivered by NGOs)

Psychosocial support

To support people with difficulties in their life roles and participation in society. Support is based on an individual's needs and life goals and focuses on the development of skills critical to effectively manage their life, providing relationship and environmental supports, and increasing their access to community resources and opportunities.

The aim is to increase a person's capacity to live in the community by:

- Assisting with addressing complex social issues such as: relationship concerns, social isolation and loneliness, marginalisation, parenting, substance misuse
- Assisting in the development and/or re-establishment of family/social and community networks
- Empowering individuals to participate effectively in their own care planning
- Assisting a person to effectively access services such as: mainstream and/or specialised services including general health and mental health, professional clinical services and other community facilities according to their individual support plan
- Assisting the individual to achieve a good quality of life through emotional well being, encouraging interpersonal relationships, material well being, personal development, physical well being, self determination, social inclusion, and understanding their rights
- Where early signs of relapse are identified support the person to access clinical services.

Independent living skills

Support includes personal and social interaction, increasing participation in community activities and supporting their carers. Support could involve assisting a person with household tasks, budgeting, banking, liaison with the Public Trustee Office, and accessing public transport.

Recreation

Support includes developing and maintaining skills required for daily living, improving personal and social interaction, increasing participation in community life and activities, and supporting their carers. This could involve assisting a person to access recreational activities, with hobbies and interests, social interaction, attending leisure activities, overcoming obstacles related to physical disabilities and access to concession cards.