EMR ASM Alliance e-Bulletin

Eastern Metropolitan Region (EMR) Active Service Model (ASM) e-bulletin - a resource to help all EMR HACC funded services implement an ASM approach.

The HACC program is supported by funding from the Commonwealth and Victorian Governments.

Issue 5, August 2011

EMR ASM Alliance Evaluation

The *EMR ASM Alliance* was established by the Eastern Metropolitan Region (EMR) Department of Health (DH) in September 2010 to support the implementation of the Active Service Model (ASM) across the region.

In April 2011, an evaluation of the *EMR ASM Alliance* was conducted in order to understand whether the Alliance is an effective and appropriate strategy to support ASM implementation across the EMR.

More than half of its members, reported that their primary motivation for participating in the Alliance related to either **sharing information** and resources, professional **networking** and/or **learning from others** in order to **effectively implement ASM** in their organisation.

The majority of members reported high levels of satisfaction with the Alliance and identified the following benefits:

- professional networking opportunities created through regular meetings
- provision of timely and effective information and resources
- delivery of training sessions to address common issues
- availability of information, support and advice

The evaluation also identified a number of opportunities for improvement including:

- ensuring that the executive group is empowered and structured in a way that supports its capacity to set the strategic direction of the Alliance
- maximising the reach and utilisation of information and resources
- encouraging members to establish appropriate strategies to share information across their organisation

The secretariat has since acted on this feedback and introduced strategies to address key issues. These include arranging an executive group planning session, changes to the format of the *EMR ASM e-bulletin* and broad alliance meetings and the inclusion of mechanisms within the *2011 ASM implementation plan review template*, to ensure that EMR HACC organisations develop a communication strategy to support effective and timely information sharing to and from the Alliance.

ASM Organisation & Seeding Funding Project Updates

Based on feedback from our members, each edition of the ASM e-bulletin will now feature updates from organisations about how they are progressing with ASM and updates on seeding projects being under – taken in the region. These updates are an opportunity for members to share information and to get an idea of the broad range of projects occurring in the East and who to contact for more information.

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EMR ASM Alliance Evaluation Cont.....

Overall, the findings have validated that the *EMR ASM Alliance* is valued by its members as a forum to share information, collaboratively address common issues and promote a partnership approach to ASM implementation across the region. We are also aware that there are a number of other Departmental initiatives (such as the introduction of the new Diversity Framework) that will affect HACC service delivery.

Therefore as we move forward, it is essential that the *Alliance* remains flexible and responsive to the needs of our members and consider how we can also become a valuable forum to share information and assist EMR HACC agencies respond to these broader changes.

If you have any additional ideas or feedback about the Alliance, we would love to hear your ideas. Please email your feedback to emr.asm.alliance@health.vic.gov.au.

Project Update - The Person Centred Pathway Model Project
Partners: Caladenia Dementia Care, Golden Wattle (EACH), Yarra Ranges Council (PAGs)
By Sarah Yates, Manager, Caladenia Dementia Care

Caladenia Dementia Care, Golden Wattle and Shire of Yarra Ranges Council are working in partnership to implement the *Person Centred Pathway Model Project*.

Staff from each of these Planned Activity Groups (PAG) are working together to ensure that the PAGs in these agencies are as person centred and client driven as possible. The overall goal of the project is therefore to embed the ASM principles into the culture, philosophy and policy development of all three partnering agencies to ensure a holistic approach to service delivery.

Although in many ways, the agencies believed they were delivering programs that were planned around the person and encouraged autonomy, there was no documentation or evidence to evaluate this. The objectives of the project are therefore to:

• train PAG staff to incorporate ASM within the processes of service commencement, delivery and closure

• develop policies and procedures to ensure the sustainability of the model

• evaluate implementation of the model

• develop a "Pick Up and Go" best practice manual for PAG staff

To date, work has focused on the review of each organisation's policies and procedures and training undertaken by staff. The document review has been unwieldy as policy and procedures differ greatly between our three agencies. The agencies are continuing to work together to refine their policies to ensure that the principles of the ASM are reflected.

In regards to training, the agencies have developed and circulated staff, volunteer and client surveys to gauge the training needs of each group.

Existing training programs are largely aimed at home care and personal care workers and are not entirely appropriate for PAG staff. Therefore, tailored training that will meet the specific needs of PAG staff and volunteers has been developed. This training is currently being rolled out to 30-40 staff and will be evaluated. It is anticipated that if the training is useful, it can be shared with other agencies wanting to train PAG staff.

The agencies look forward to the rest of this project and the benefits it will have for all people involved in PAGs.

For further information please contact:
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RDNS Organisation ASM Update
By Janeen Rees, ASM Project Officer, RDNS

A considerable amount of work and effort has been put into ensuring ASM is promoted and implemented within RDNS. Some of the work undertaken over the last 12 months includes:

- the development of an internal organisation *ASM Communication Plan*
- an *ASM Staff Survey* which wa*s* distributed to 700 respondents
- scoping of policies & procedures to ensure ASM approach was undertaken
- the introduction of a 'Client Self Management' policy
- ASM *road shows* to individual RDNS sites were conducted to promote the ASM approach
- the launch of an ASM intranet site for information and resources
- 45 ASM community nursing case studies posted onto intranet site
- established ASM Champion for each RDNS site

In addition to this, RDNS implemented:

Dementia Model of Care
- Rollout of *Dementia Model* organisation wide 2011-2012
- Developed an electronic Cognition Assessment Tool
- Developing a *Dementia Service Directory* for staff

Leg Ulcer Prevention Program (LUPP)
- Development of a multimedia package for leg ulcer prevention
- Staff *e-learning package* with ASM approach to leg ulcer management

Human Resource Strategy
- Recruitment, induction and orientation of new staff includes information about an ASM approach to service delivery
- Performance appraisals now include reference to ASM

Staff Training
- 150 clinical staff have completed Motivational Interviewing training
- RDNS Institute now conducting Motivational Interviewing course within the RDNS training calendar
- ASM overlay being applied to all RDNS courses

Building Partnerships
- Individual RDNS sites working actively on strengthening local partnership arrangements with other providers

HACC Assessment Services
- Development and current trial of a new electronic *Initial Needs identification tool*

Medication Management
- Development of an electronic *Medication Clinical Pathway*
- Development and rollout of *Medication Reminder Cards* for clients – ASM focus
- Introduction of an electronic *Medication Competency package* for staff

For further information please contact:

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Welcome back to Lisa Dean

Welcome to Lisa Dean, who will return to the HACC team after a 2 year period with the DHS homelessness & family violence team. Lisa will commence in the role of ASM Industry Consultant on Tuesday 24 August 2011. For the past 2 years Lisa has managed the implementation of Opening Doors in the EMR, an area based service coordination framework which aims to provide timely and effective access to people who are homeless or at risk of homelessness. Prior to this, Lisa spent 6 years in the role of regional HACC Training Coordinator here in the east.

We would like to thank Marian Lane for her contribution in progressing ASM in EMR and look forward to Lisa's involvement with the ongoing implementation of ASM in EMR.

ASM Implementation Plans

All organisations would have recently received an email about:

- Review of the **2010-2011 Initial Agency Implementation Plan**, and
- Preparation of an **ASM Implementation Plan for 2011-2012**

All final reviews and plans are due to the regional office by **Friday 2 September, 2011.**

HACC Assessment Services (which in the EMR are our local governments and RDNS), are also incorporating HAS Action Plans into their Implementation Plans. Please forward all draft and final plans to your EMR PASA. If you are not sure who your PASA is, please contact Annette Worthing on 9843 1710.

These plans are an important tool, both to support your organisation and to support a regional approach to ASM implementation. Apart from meeting HACC reporting requirements, the plans will be analysed and compared to identify common themes and issues. This will inform future ASM developments, such as local and statewide projects that can continue to build ASM capacity in our service system.

The staff of EMR Department of Health want to support you to implement ASM and build on your achievements to date. We hope 2011-2012 will see your hard work of the first year resulting in ASM becoming embedded into day to day practice, with tangible benefits to people using your services.

Melbourne East GP Network to become a Medicare Local

On the 17th June 2011, the Federal Minister for Health, The Hon Nicola Roxon MP announced that the Melbourne East GP Network was one of four Victorian organisations to successfully become a Medicare Local.

Medicare Locals will be primary health care organisations established to coordinate primary health care delivery and tackle local health care needs and service gaps. They will drive improvements in primary health care and ensure that services are better tailored to meet the needs of local communities.

The Melbourne East GP Network will establish the Inner East Melbourne Medicare Local and will service the municipalities of Manningham, Boroondara, Whitehorse and Monash.

The Inner East Melbourne Medicare Local will continue the work of the existing Melbourne East GP Network in providing support to local general practitioners as part of the broader Medicare Local strategy.

In addition, the Inner East Melbourne Medicare Local will expand its engagement to a broader range of primary healthcare providers to strengthen the primary health care system in line with the Australian Government's National Health Reform objectives.

For more information about Medicare Locals, visit:
http://www.megpn.com.au/MedicareLocal.aspx
http://www.yourhealth.gov.au/internet/

Useful website links to publication and programs

The HACC Training Calendar
EMR HACC Training provides a range of learning and development programs including training sessions and workshops. http://www.health.vic.gov.au/regions/eastern/hacc-training.htm

Strengthening assessment and care planning: A guide for HACC assessment services in Victoria
The practice guide contains useful information to support clients. The broad health and well-being domains support staff to have a greater understanding of a client and their needs before developing a client-centred care plan. www.health.vic.gov.au/hacc/assessment

Falls Prevention
The Falls Prevention website provides information and resources that can be used by service providers, seniors and families/carers with an interest in falls prevention, to help reduce the risk of falls and fall-related injuries. http://www.health.vic.gov.au/agedcare/maintaining/index.htm

West Gippsland PCP
The following resource was developed by the West Gippsland PCP and provides some general information about the benefits of physical activity and provides ideas about how to overcome common barriers.
http://www.nepcp.org.au/sites/www.nepcp.org.au/files/A%20%201C%20kit.pdf

Wellness Approach to Community Homecare (CommunityWest, Western Australia)
The CommunityWest Wellness team has developed a range of resources to help the HACC funded sector in WA move to the Wellness Approach, which has many synergies with the Active Service Model. The approach assists clients to learn or re-learn daily living skills and minimising functional losses that may develop because of disease processes.
http://www.communitywest.com.au/index.php option+com_docman&task+cat_view&gid+74&Itemid+183

The Better Practice Project (South Australia)
The Better practice Project is funded by HACC in SA. The Better Practice Project articulates a service model that enhances citizenship, roles and life strengths of clients they support. In partnership with agencies, the Project provides support, information, training, resource development, mentoring and consultation around the review and development of service models.
http://www.agedcommunity.asn.au/education_events/Better-Practice-Project.php

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