MIDNORTHCOAST

Community Care Options



Annual Report 2012



Our Wision 1



Leadershipandinnovationintheprovisionofhighqualitycommunitycares ervicesontheMidNorthCoast.



CHAIRPERSON'S REPORT onbehalfof CCOBoard2012

Thishasbeenmyfirstyear asCommunityCare Options Chairperson, althoughI have been a Member ofthe CCO Boardfor manyyears.lamproud topresent this theorganisation's16thAnnual Report and it is with pleasure thatI report thattheorganisation has hadanother successful year.Wemet theperformance targets in ourStrategic and BusinessPlansandalso operated within ourfinancial resources whilstmeetingthe needsof an increasingnumber of people seekingsupport and assistance, toremain livingat home.We continuetobea robust, progressive and communityfocused entity. We aremovingforward fromaposition of strength with our sights clearly set on continuous improvementand valueadded service deliveryto our clients.

CommunityCare Options operates within anenvironmentthat is rapidlychanging. Thereis a constantneed torespond to newcommunityissues and expectations. Themanner in which governments interact with the sector and providefundingforprograms is also changing. In response, CommunityCare Options constantlyreviews its programs and support structures in order tomaximise the deliveryof high qualityservices when needed. We are entering an era of significant change and reform within the agedand disability sectors as we prepare for an unprecedented community care demographic.

These changes will bringnewchallenges—increased competition, changedfundingmodels, increaseddemand,increased client choices and needfor greaterflexibility. There are opportunitiesfornewmodels of care,increased partnerships, newrelationships, and innovation. Feedbackfromclientsandprospective clientsacross the sector is that increasinglypeoplewant tohave the choicetostaylivingat home inthe communityfor as longas possible.

Weneed to continue to enactour vision—leadership and innovation by-

- embracing eachopportunity;
- harnessing our strengths;
- · acceptingthe challenges; and
- leadingthe wayforward

in the provision of high quality community care to achieve our mission—the support of an improved quality of life and independence for people living in our community.

Mid North CoastCommunityCare Optionsis not just aservice provider; nor dowe work in isolation. We arean inherent part of our community, valuing its people, their quality of life and their independence. We work with other stoachieve a place where people feel valued, safe, secure and have a sense of belonging. We care about the outcomes that we achieve with and for others.

Communityisaplaceforall

OurAchievements

Over the last12 months we have continued towork with our partners and stakeholders, to ensure collaboration, bestpractice and innovation to achieve high quality outcomes for our clients and their families.

In achieving the aims ofour strategic plan over the last12 monthswehavefocussedon the followingareas-

- Qualityand safety –implemented comprehensive qualitysystems and reviewedWork Health &Safetypolicies, proceduresandpractice;
- Flexibility, choice andempowermentfor clients and carers;
- Culturallyappropriateservices;
- Partnership and collaboration-improved integration with other communityservices;
- Transparencyandaccountability-maintained ourfocuson riskmanagementand safety;
 andmaintained sustainabilityand growth;
- Learning and improvement—achievedamore skilled and wellsupportedworkforce and continuouslyimproved our systems, practice and processes inallareas;
- Innovationand professionalism-consolidatedour soundreputation for the delivery of high quality services to people inneed on the MNC;
- · Teamwork;
- CommunityEngagement.

Recognition

Our Clients-toall of our valued clients- thank you for choosingusas your service provider and for trustingus with your careand support. Community care can only be achieved in partnership and with trustand we will continue to seek your feedback and participation in providing quality services to meet your needs.

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I wish to acknowledge ourfunding bodies—the Federal Department ofHealth andAgeing, the NSWDepartmentofFamilyand CommunityServicesAgeingDisabilityand HomeCare and the NSWDepartmentofHealthfor theirongoingfunding and support toensureour viabilityin the provision ofservices tothepeople ofthe Coffs Harbour,Bellingenand NambuccaLocal Government Areas.

InrecognisingCommunityCare Options achievementsoverthe last12months,I commend the dedication,professionalism, resilience and commitmentofour staffand Boardof Management.

I extendmythanks to all that make up the community that is Community Care Options. Those people who strive to make apositive impact on the lives of others and who make astrong, viable, client focused community organisation. As a human services organisation our primary strength lies with our people.

I wish to acknowledge thefollowingpeople whomakeCommunityCare Options what it is.

Our Staff—the Boardacknowledgesand thanks youfor the commitment youmaketoourclients, puttingtheircareforemost.Communitycarecanbe challengingduetotherange of complex environments and client needs.Your commitment inbringingissues to theattention of

management, to teamwork, and your professionalism, is applauded. It allows us to ensure a well planned and coordinated range of options for our clients.

CCO ManagementTeam—the ManagementTeam(Deb,Lorraine,Lizand Robyn)are tobe congratulated theirefforts insupporting staff, inensuring effective systems and processes are in place, and intheen couragement of growth and change in the provision of high quality client services. Strongleadership is critical toachieving our vision. The management team goes above and beyond to ensure that the organisation meets its performance targets.

Our Board of Management-TheBoard's governance role requires the Board toprovide leadership, safeguard the organisation's interests, ensureaccountability and long-term viability. Board Members volunteer their time to take on these roles and we are fortunate to have a wealth of experience and skills as well as the ongoing commitment from the members of Community Care Options Board. I would like to thank all members of the Board of Management for their outstanding efforts over the last 12 months.

Community Care Options supports a place for all.

Jan Newland CCO Board Chair



Judy, Elizabeth & Gianenjoying Seniors Week at Woolgoolga

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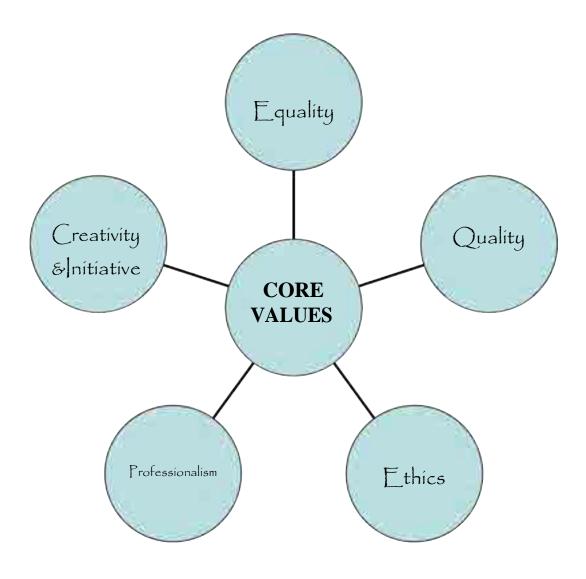
Mission Statement



Tosupportan improved quality oflife and independence forpeople livingin the community ontheMid NorthCoast.







Wevalue allpeople, including clients, carers and staffequally

Thismeanswe:

- Treatpeople withrespectanddignity
- Respectpeople's individual way of life, belief systems, culture and views
- Welcomediversityandbehave in a culturallysensitiveway
- Treatpeoplefairly
- Uphold people's rights and support them to fulfill their responsibilities
- Celebrateachievements
- Consultpeopleon issuesconcerning them

We value ahighquality of lifefor clients and carers

Thismeanswe:

- Provide a highqualityofserviceswhichimproveclients'and carers'qualityoflife
- Promote clients' independence
- Centretheservice on clients'individualchoices
- Supportandempowerpeople in their decisionmaking
- Observe ourdutyofcare
- Strivefor continuity and consistency in service provision

We value actingethically

Thismeanswe:

- Acthonestly and withintegrity
- Areopen inour communications and share ideas
- Acceptresponsibilityand admitmistakes
- Showtrustandbehave in atrustworthymanner
- Share confidential information only where needed and with the permission of the person whose information itis
- Protectandkeepsafepeople'sprivateinformation

We valueprofessionalism

Thismeanswe:

- Setachievable goalsand worktowardsthem
- Continuallyimproveourperformancein all areas of operations, striving for excellence
- Showleadership
- Reflecton ourworkpractices and systematically improve them
- Promote a learning culture and are willing to learn
- Supportandpromoteprofessionaldevelopment
- Observe collective and individual boundaries
- **Account for our actions**

We valuecreativity&initiative

Thismeanswe:

- Encourageinnovativeand dynamicideas
- Promotevisionarythinking
- Behave in a positive and friendly manner
- Provide inspirationandencouragement

GENERALMANAGER'S REPORT2012

The years go bysoquicklyit is sometimes difficult tostopand reflectupon what we have achieved. September2012 marks my5thanniversaryas the General Manager ofMidNorth Coast CommunityCare Options. I have heldmanypositionsover my workingcareer but none thathas given me asmuchsatisfaction, pride and sense of achievement as being the leader of this strong, viable organisation.

2011–2012has beenanothersuccessful year, with an increased number of clients supported andmore services delivered. Wearean organisationthat strives for excellence and to be aleader inourfield. We have achieved this withhappy and satisfied clients and with competent professional staffwhoare proud of where they work and what theyachieve.

Weoperateinachangingandcompetitive industry, however continue to growandprosper andtomaintainour reputation for the provision of high quality community care. We continue to focuson continuousimprovement, best practice and professionalism as the keytoour success.

Our success is inherently about people.

The people towhomwe provideaservice—theirqualityoflifeand theirachievements. The people-our staff-whoon adailybasis demonstrate dedication, skills and motivation to makeadifference to the outcomes we achieve.

Whatsetsusapartfromotherproviders?

- Weare not justaprovider we are acommunity and part of our wider community
- Wevaluequalityandflexibilityover profit
- The qualityofour staff-boththeirskills and trainingandtheir values and commitment
- Assessingthecompetencies of our staff, keepingup to datewith best practice
- Innovationand leadership-other providers cometousfor ourassistance, ideas and information. Wearehappyto share our knowledge and expertise.
- Understandingthe needs of our clients and providing more than just standard services, we providevalue added care.

The bigdifferencebetween CCO andother providers is that 'WeCare'.

Wecare about individuals, we care aboutfamilies, we care about carers, and we care about the impact that we have in our community. We careaboutout comes.



Achievementsin2011/12

Inthe 2011/12financial year CommunityCareOptions provided services to some1,624clients across all of its programs. We provided approximately 91,754 hours of directs ervice to clients livingin the Nambucca, BellingenandCoffs Harbour local government areas as wellas in excess of 40,000 hrsofcasemanagement and service coordination.

Wecontinuedtofocuson empoweringlifestyle choices; beingperson centredandconsumer directed; encouraging independence; promoting wellness and healthy ageing; preserving dignity; and workingin partnershipwith our clients to achieve outcomes thatmeettheirgoals andaspirations. We continue toprovide personalised services.

Wehave continued tomaximiseourfundingto ensure themosteffective level of careand support is delivered toour clients.

Wehave maintainedhigh occupancyrates on all programs and made system improvements which more efficiently and effectively focus our staff and other resources towards high quality service delivery.

Wehave once againprovided significanttrainingand developmentopportunities to our staffat alllevels. The traininganddevelopment of our staffisessential in ensuringthatclients receive the kind of service they expect and are happytoreceive and that skills keeppace with expectations and needs.

Wereviewed all of ourstaffposition descriptions toensure that they are current and reflective ofservices provided and skills required.

Wereviewed all of ourorganisational policies and procedures and aligned them with the new CommunityCare CommonStandards.

Wereviewed all of ourWork Health &Safetypolicies and procedures to ensurealignmentwith changes in Work Health & Safetylegislation that came into effection 1.1.2012.

Weimplemented anewSafe Care Manualand trained staff in newpolicies and procedures.

Weimplemented structural changeswith the creation of the Manager Supportand Coordinationposition—tomore effectivelysupportandcoordinate direct care staffand efficientrosteringpractices.

Weintroduced competencyassessmentandskills observation processes for direct care staff.

Wesuccessfullyparticipated ina cross government (joint)QualityReviewprocess assessing our service deliveryagainst thenewCommunityCare Common Standards. Iam pleased to announce that we successfullymet the standards with no required service improvements.

Weundertookastaffsurveyto gauge cultureand gainfeedbackforservice improvement.

Weundertookaclientsurveyto assess satisfactionandgainfeedback for service improvement.

Wecontinuedto offervalueaddedsupport toour clientsincluding-

SeniorsWeekevents in Nambucca Heads, Sawtell, CoffsHarbourandWoolgoolga.These werewellattendedand thoroughlyenjoyed byall. Theyprovided anopportunity for clients of theorganisationwho mayfor whatever reason be socially isolated to come together to meet newpeopleand enjoysomesocial interaction.

Weheldtwoallstaffmeetings asamechanismfor communicating aboutorganisational changes, policydevelopmentandissues raised by staff. It also affords a mechanism for staff tocometogether and celebrate theirconnectednessandachievements.

Were-established our client consultative mechanism with Friends of CCO meetings occurring and wellattended.

Weare poisedontheprecipice of an exciting period in community care. Althoughone, not without uncertainty. AnageingAustralianpopulationwill mean increaseddemand inthe aged care sector and inparticular thecommunity care sector. Government reforms aimed at addressingincreaseddemands will be implemented over the next few years. The sewill include - a newfrontend or gatewayto agedcare; a separation of disability and agedfunding under theHACC program(1.7.2012); apossible move awayfrompackaged care as it is currentlyfunded and delivered. The disability sector also is trialing new models of support through individualisedfunding packages and the newNational DisabilityInsurance Scheme. CommunityCare will be challenged byanincreasedneedforflexibility;increased competition; anda greateremphasis on customer choiceandentitlement.MNCCommunityCare Options is wellpositioned tomaximise opportunities.

Werequestfeedbackfromour clientsregularlyabout theirexperience with CCO. Overall feedback is verypositive and clients valuethe support that they receive from CCO and the quality of our staff.Wewillcontinuetomaintain mechanismstorecordfeedback and we utilise positive andnegativefeedback and complaints toconfirmwhat we do welland toinformareas for improvement.

I takethisopportunity to celebrate the dedicated and hard working staff of Community Care Options.

I would like tothank each and everyone of youfor your commitmenttoour clients, to the managementteamand totheorganisation. Wework with each other and clients as ateam to fulfill theorganisation'smissionand vision. Each partof thatteamiscritical to its success. Thank youfor the skills, ideasand diversitythat you contribute.

SupportWorkers—theface of our organisation-who dailyinteract with clientsandhelp them toremain independent;

Coordinators who match organisationalandclient needsthrough rosteringand coordination of support;

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CaseManagers who assist clients to assess theirstrengthsandoptions andmake decisions about theirsupport;

The Support & Development Officer -whomentors, encourages and supports our direct care staffthrough training&development;

Administrative supportstaffwhoareessentialtotheflowof businessat CommunityCare Options;

The ManagementTeam-we welcomed RobynWhalen toCCO in 2011andLizto a management role. Abigthank you to Robyn, Lizand Lorraine- your leadership, vision and hard work are muchappreciated.

Thank you to our Board of Management who give up there time and offer their significant and diverse skills and experience to supportant give strategic direction to the organisation.

The whole CCOTeamis tobe congratulated on their efforts. Myjobis made somuch easier because of the valueyou place on yours.

DebRyan General Manager



Together WeAre a Community

WHOWEARE

MNCCommunityCare Options-

- Is a not-for-profitIncorporated Association governed by avolunteer community based Board of Management.
- Receives fundingfromthe FederalandNewSouthWales Governments toprovidecase management, support coordinationand direct services to a range of people living in the community, including people with a disability, frail older people and their carers, and those beingdischargedfromhospital.
- Provides services tomembers of the community who live in the CoffsHarbour,Bellingen andNambuccaLocalGovernment Areas.



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OURHISTORY

In1990, CoffsHarbour CityCouncilwas funded bythe Federal Governmenttoestablish andoperatea CommunityOptions Projectfor the Coffs Harbour,BellingenandNambucca Local Government Areas. The project provided support coordination and brokered service provision for upto40frailaged people and younger people with disabilities andtheir carers.

In 1996, the Council appointed an advisory Committee – a volunteer Board of Management andthis CommitteebecameanIncorporatedAssociation takingover thelegal responsibilities ofauspicingthe project. The neworganisation was named Mid North Coast Community Care Options.

The newlyincorporated organisation was successful in itsapplication tooperate30 CommunityAged CarePackages. The Department of Healthand Ageing approved additional packagesover thenextfewyears bringing the total number of Packages in 2005 to 96.

In2000the Organisation was selected to operatea4-year pilot project toproviderespite to carersof people who have challengingbehaviour due todementia under the Federal Government's NationalRespitefor Carers Program(NRCP).

InJanuary2000 the Organisationstarted employing their own field staffinthe Coffs HarbourandBellingenLocal Governmentareas, and in the NambuccaLGA in 2004, ensuringour clients receive the higheststandard of support from well-trained and resourcedstaff.

In2002we received expansionfundingfor carersof people with Dementia. The program allowed for 2 clients atanyonetime. Theoriginal 2000-2004 funding was extended and CCO nowoperate 2respite programsfundedunder NRCP.

In2002we also receivedfundingfrom the NSWDepartment of Ageing, Disabilities and Home Care toprovide intensive support coordination/casemanagement toyounger adults with adisability, particularly to people with acquired Brain Injuries.

In2003/2004 we were successful intwo AgedCare Roundsandwere approved toprovide a total of 15EACHpackages. As this program hasa strongnursing/allied health content, we formedanalliance withMid North Coast Area Health Services and pioneered an agreement to contractnursing and allied health staff from them.

InFebruary2004, we moved into our own purpose built, fully wheelchairaccessible new premisesat20 Curacoa St Coffs Harbour. This was madepossible through partnership with Coffs Harbour CityCouncilwho leasedus Crown Landand longtermprudent.

In2005we openedan office inUrunga tobetter service Bellingenand Nambucca clients and support the local staffbetter.

In2007we openedouroffice located in the Seniors Centre in Woolgoolga.

WHEREWEARE



COFFSHARBOUROFFICE

20 CuracoaStreet. **COFFS HARBOURNSW2450** Telephone: (02)66502000 Fax: (02) 66514362 Email:admin@cco.net.au Website-www.cco.net.au



URUNGAOFFICE

Shop3-5, Morris Arcade, 8 BowraSt, URUNGANSW2455 Telephone: (02)66557717 Fax: (02) 6655 5275

WOOLGOOLGAOFFICE

Senior Citizens Centre 6BoundarySt, WOOLGOOLGANSW2456 Telephone:(02)6654 0044 Fax: (02) 66540088



AREAofServiceProvision

LocalGovernmentAreas of-

- Coffs Harbour
- Bellingen
- NambuccaHeads



BOARDOFMANAGEMENT



Chairperson JanNewland

Vice Chairperson MarkPalmer



Secretary GarryMatthews

Treasurer WarrenHughes



Board Members

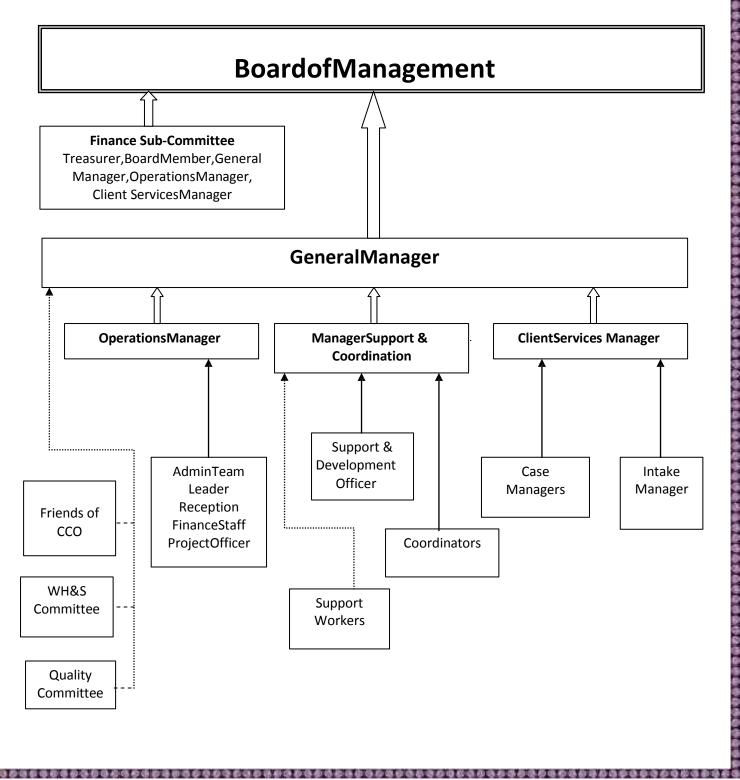
MikeSummerill RonDavis TerryEdwardsL ouisaSalmon PeterO'Brien



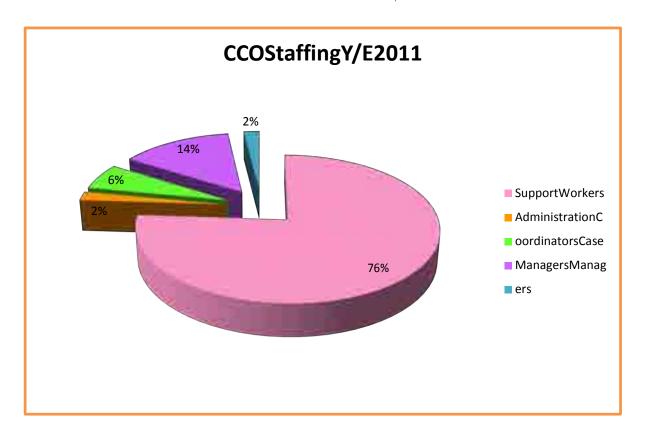


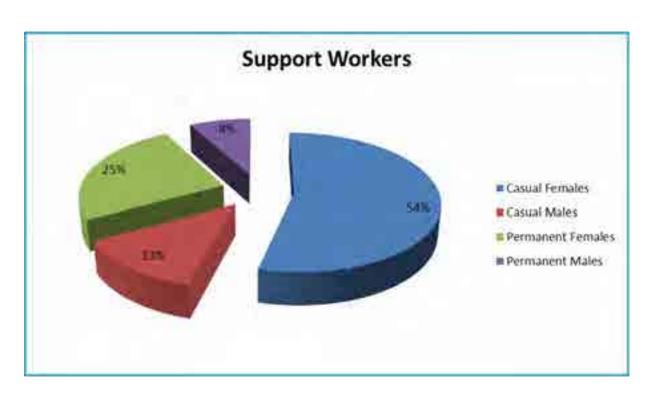


ORGANISATIONAL STRUCTURE



StaffDemographics





FUNDING

CommunityCare Options receivesfundingfromanumber of sources—

The Department of Human Services – Family and Community Services Ageing, Disabilityand Home Care(ADHC)funds CCO under a number of programs

- TheCommunityOptions Program(COP) isajoint initiative between the NSW and the AustralianGovernments undertheHomeandCommunityCare(HACC) Program.
- The DisabilityServicesProgram(DSP)for theConnect program's case management.
- The Attendant CareProgramfora number of individuals with very high support needs.
- YoungPeople InResidential Aged Care (YPIRAC) Program.
- EmergencyResponseInterimFunding(ERIF).

The Australian Government's Department of Health and Ageing, funds the Community Aged Care Packages (CACP) andtheExtended AgedCare at Home(EACH)Packagesunder its Flexible Care program.

CCOreceives two allocationsforfunding under the National Respitefor Carers Program (NRCP) for our Dementia Respite Service(DRS) andour CommunityRespite Service(CRS).

CCOhas beenengaged inthe Consumer DirectedCare (CDC)pilot program.

The NSWMinistryofHealthprovidesfundingfor our Compacksprogramas wellas the TransitionalAged CareService.



PROGRAMS

ATTENDANT CAREPROGRAM(

MNCCommunityCare Options commenced support of clients under the Attendant Care Programin 2010.

Inthe 2011/2012financial year we supported9clientsunder this program.

The Attendant CareProgram(ACP) providesportable, flexible and individualised support for people-

- with a physical disabilityand/or
- whoneedpersonal help to complete activities ofdailyliving.

The Service includes-

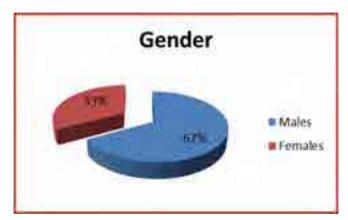
- support planningand coordination
- theprovision of direct support services particularly personal careand assistance with other activities of dailyliving
- ongoingmonitoringand reviewofchangingneeds.

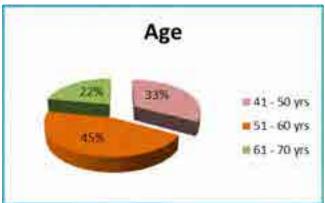
AttendantCare Program clients are-

- between 16 and65 years old
- livingintheir ownaccommodation
- able to live in thecommunity with acapped number of personalassistanceservice hours per week and access communitysupport
- people with a physical disability whose needscanbemetwith personal care support and who can be involvedinmanagingtheir care; or
- people withanAcquired BrainInjury(ABI) and aphysical disability(or who need physical assistancetocompletetasks ofdaily living); or
- peoplewithaneurological degenerative condition.

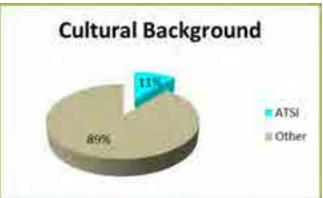
Clients areassessed by ADHC to determine eligibility for this program. Support hours are generallybetween 25and50hrs per week.

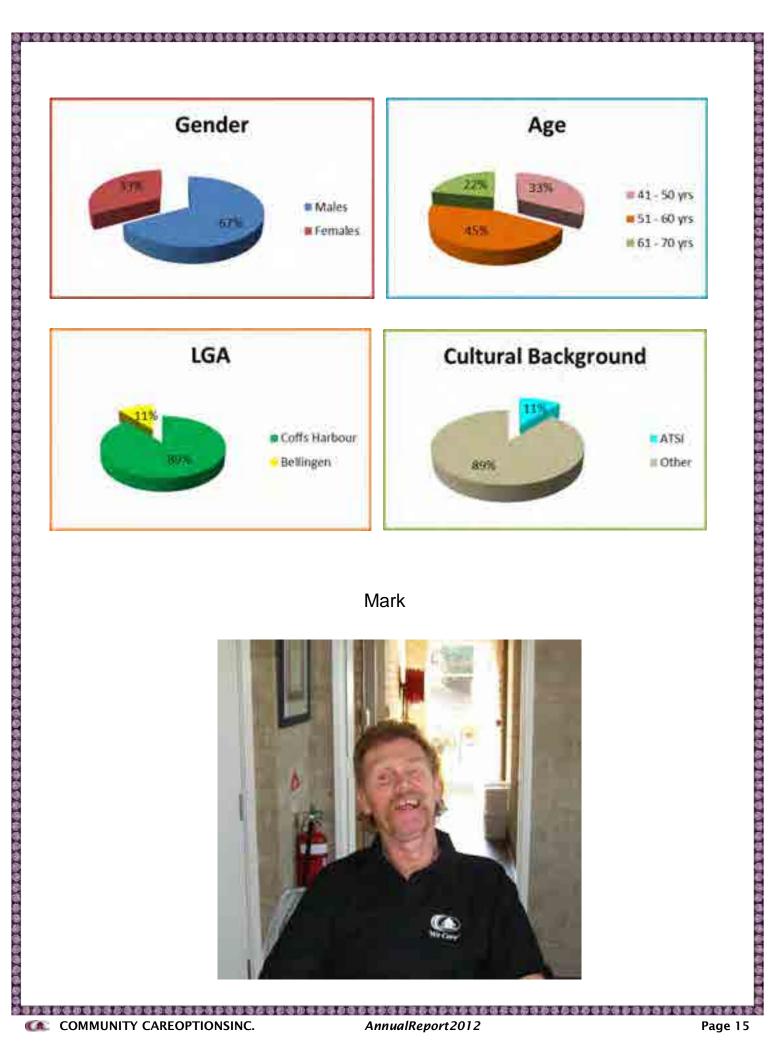
Total hours directsupport provided undertheAttendant CareProgramwas 10,749hours.











COMMUNITYAGEDCAREPACKAGES

CCO receives funding currently for 141 CACP packages. These packages of support are for clients who have been assessed as having a low level of support needs.

203clients were supported through the CACP program during the year, with 31,320 hours of direct services provided.

The Service includes

- support planningand coordination
- referrals toother communityand health services
- direct services—includingpersonalcare, domestic assistance, social support, transport, mealpreparation
- helpwith equipment.

CommunityAged CarePackage Clients-

- arefrail older people
- have complexcare needs
- have been assessed bythe Aged CareAssessmentTeam(ACAT)as qualifyingfor LowBandLevel ofCare
- preferto continue livingin theirown home.

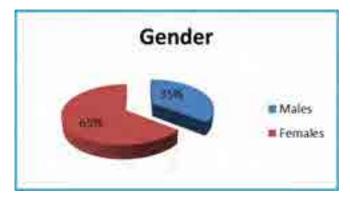
We give particular priorityto peoplewho-

- · are geographicallyor sociallyisolated
- arefromAboriginal orTorresStrait Islanddescent(ATSI)
- arefinanciallydisadvantaged
- arefromaculturallyand linguisticallydiverse background(CALD)
- havedementia.

All our Clients have-

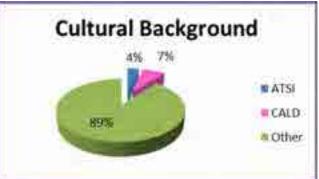
- complexcare needsarisingfrominteractingphysical/medical, socialand emotional needs;
- a needfor a skilled assessmentandcomprehensive management of service delivery;
- a preferencetoremainlivingat home with appropriate and reliable supports;

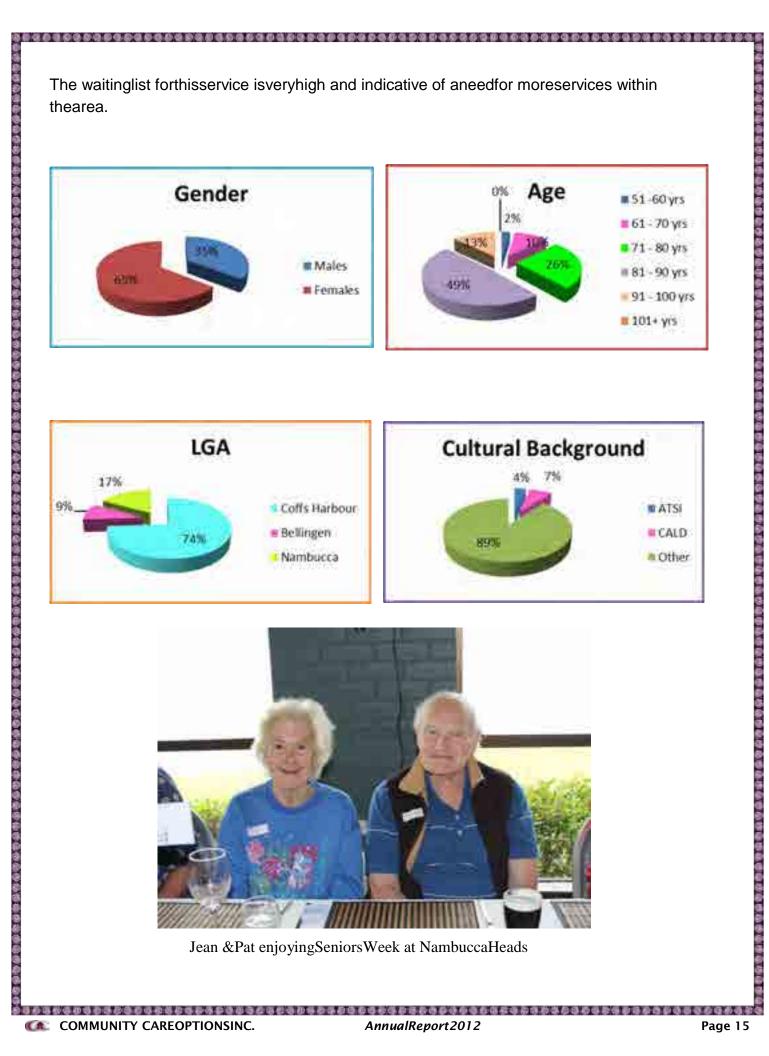
aneedfor ongoing monitoringandreviewof changingcare needs.











COMMUNITYOPTIONSPROGRAM

The CommunityOptions ProgramisCCO'sfirst andlongest runningprogram. Commencingin 1990, ithasbeen operatingfor 22years. It is funded under the Home and Community Care (HACC) program.

Wehave supported413clientsontheCOP programthroughoutthefinancialyear. The

COPprogramisacasemanagementservice.

Casemanagement includes undertaking a comprehensive assessment of client need; developingan individual support plan with the client; sourcinginformation; and referral to appropriateservices within the community.

CaseManagers assistclients toaccessthe services they needwithin the communityto maintain theirindependence. Our services are person centred, with ourfocus on empowerment, buildingon strengthsand supportingtheclient with decisionmakingand planningprocesses.

Some brokeragefundsallowus to provideor purchase the services neededuntil longer term options canbesourced.

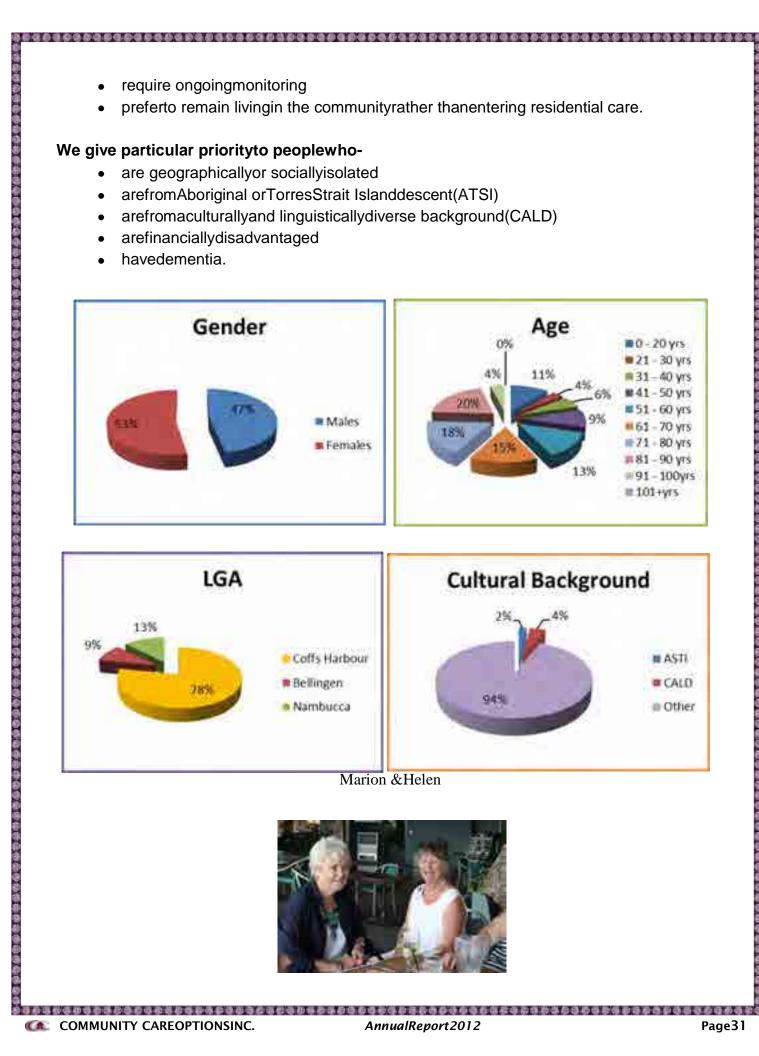
The Service includes-

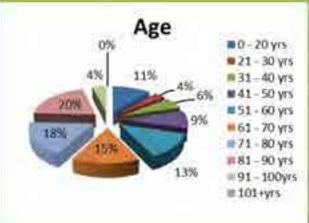
- comprehensive assessment of needsand strengths
- risk assessment
- goal identification
- support planningand coordination
- referrals and linkingtocommunityand healthservices
- advocacy
- somedirect services—support with personalcare, domestic assistance, social support, respite, transport, mealpreparation,
- helpwith equipment, homemaintenanceandmodification.

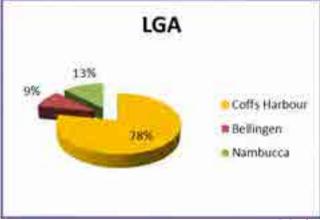
COPClientsare peoplewho-

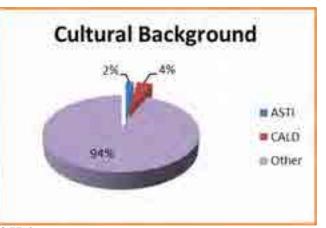
- have a disability
- arefrail because of theirage
- are carersof such aperson
- have complexsupportneeds
- cannot be adequately supported byother services, their family or the community

have changingneedswhich mayrequire flexible responses











COMMUNITYRESPITESERVICE (CRS)

Funded through the National Respitefor Carers Program, this service provides respite to carersof bothpeoplewith dementiaandaged people with high care needs. A totalof3,111 hours ofrespitewas delivered to atotal of34carers in thisfinancialyear, 103.15% compliance with contract requirements.

Servicesprovided under this programincludes-

- comprehensiveassessment of carer's and recipient's needs
- regular plannedandunscheduledrespite
- support planningand coordination
- referrals toother communityservices
- informationand support.

Clients are-

- carersof people with dementia
- aged peoplewith high care needs
- weallocatesomeplaces to workingcarers who areemployedoutside the home.

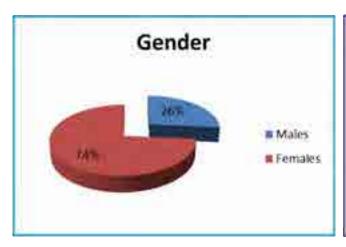
We give particular priorityto peoplewho-

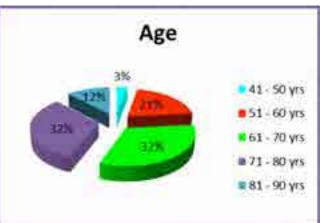
- are geographicallyor sociallyisolated
- arefromAboriginal orTorresStrait Islanddescent(ATSI)
- arefinanciallydisadvantaged
- arefromaculturallyand linguistically diverse background (CALD).

Some Carersare-

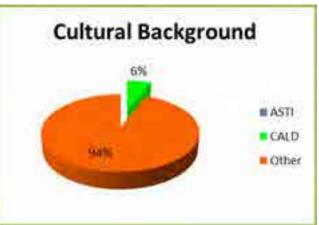
- sole carerswith limitedsupport networks
- frail, ill, stressed, havea disability or are getting little sleep
- have extensive other commitments
- are socially, culturally or geographically isolated
- arefinanciallydisadvantaged
- experiencingstrain in theirrelationship with the personfor whomthey are caringor with other significant people.

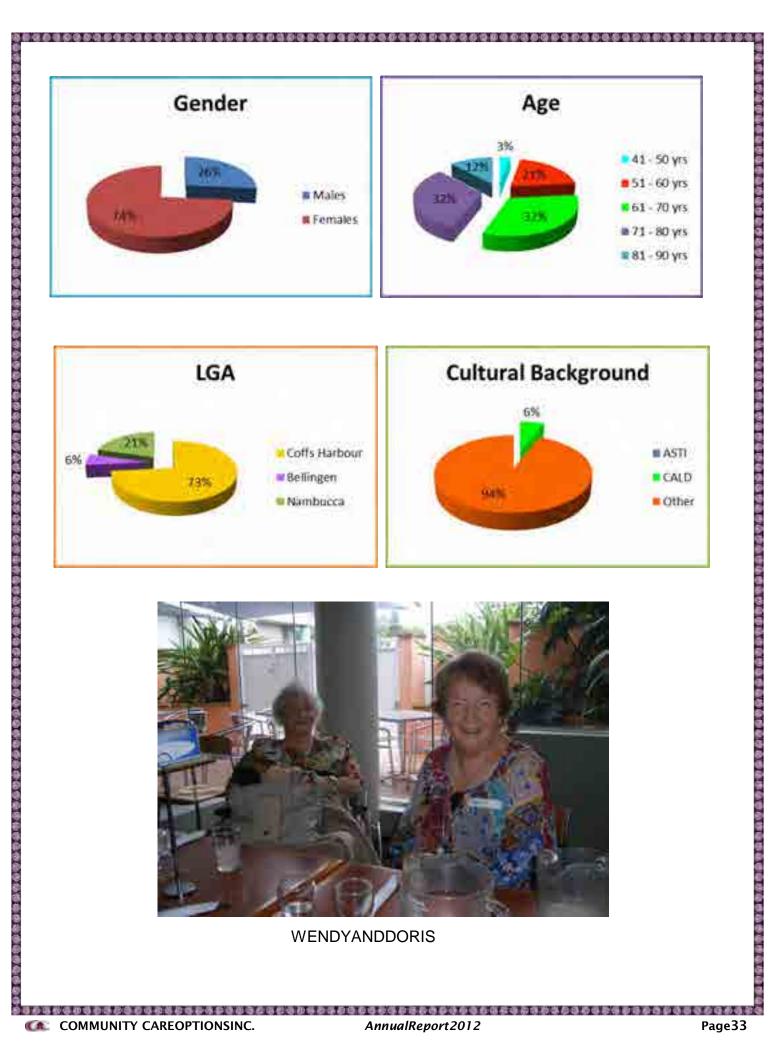












COMPACKS

TheCompacksprogramoperatesthrough apartnership with NSWHealth.Theaimofthe programis tosupportpeople leavinghospital for aperiodof upto6weeks, tooptimisetheir recover and transitionhome andhopefullyprevent readmissionto hospital.

Wehave continued to experience growthin the number of Compackplaces and have further developedourexisting collaborative relationship with the North Coast Area Health Service.

Some782people were supported through this programthisfinancial year. Fundingreflectsdifferent levels(Bands)ofcare and was delivered asfollows -

92people received assessmentonlyandnodirect support

144people were supported within Band 1-low level support

445people were supported within Band2-moderate level of support

101people were supported within Band 3-higher level of support.

The program accepts referralsfromarange of public hospitals.

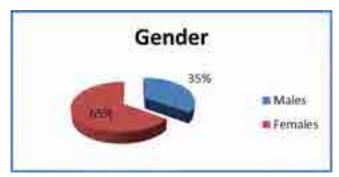
The Service includes-

- comprehensive assessment
- help with tasks ofdaily living, like personal care, housekeeping and transport-up to 6weeks aftera person leaves hospital
- short termcasemanagement
- referrals and linkingtoongoingcommunityand health services forpeople with longer term support needs.

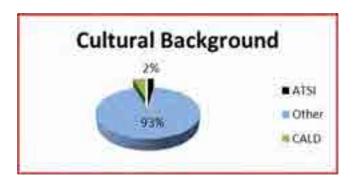
Compacks Clientsare-

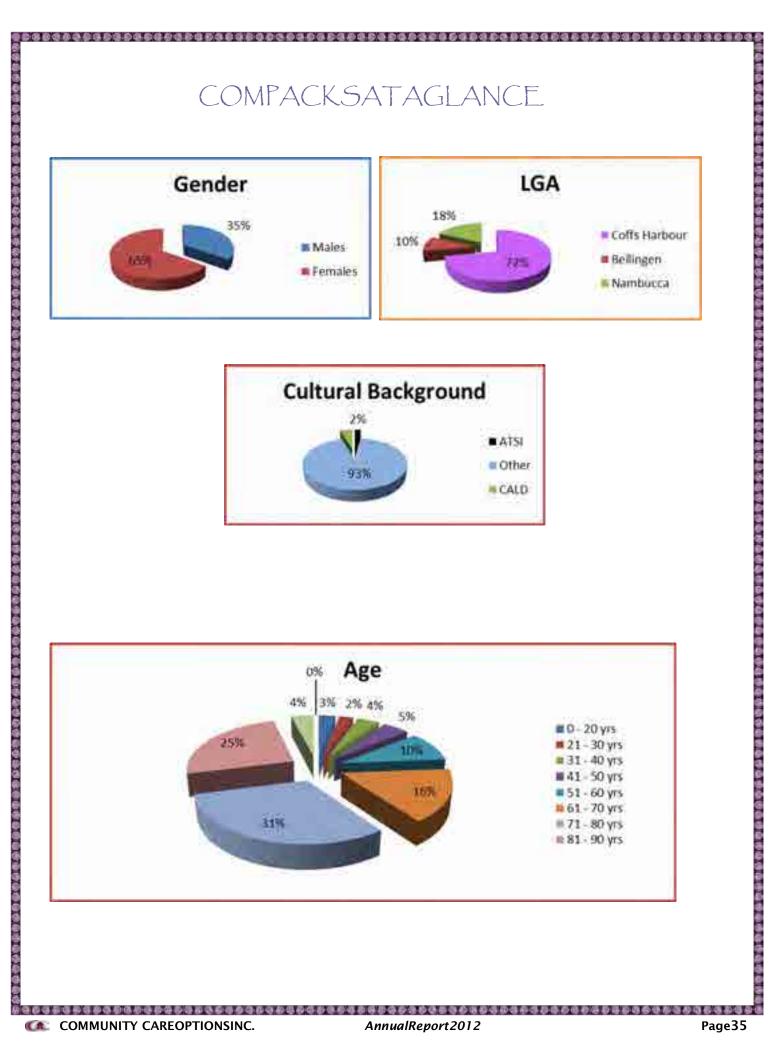
- people who have beenadmitted tohospital
- who cannotbedischarged home without short termcommunitysupport
- need assistance with identifying support needs and linkages into the community and health services network
- at risk of extended hospital stayor readmission without communitysupport.











CONNECT

Connect is a short term casemanagement program. CommunityCare Options supported13 clients on the ConnectProgramin thisfinancial year.

The Service includes-

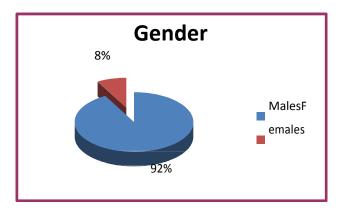
- comprehensive assessmentof needsand strengths
- short terminterventionand intensive supportcoordination
- goal setting
- identifyingresources
- planningsupport
- referrals and linkages intoother communityservices.

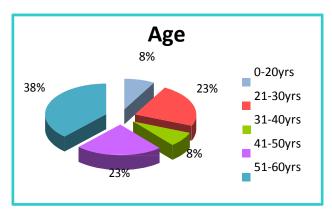
Connect Clients are-

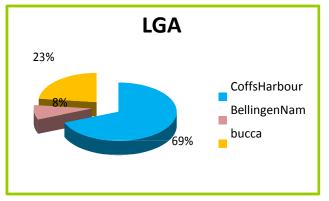
- people agedbetween18 and65
- whohave a disabilityand complexsupportneeds.

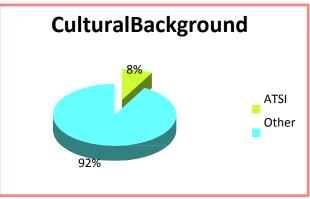
We give particular priorityto peoplewho-

- have anacquired braininjury
- are geographicallyor sociallyisolated
- arefromAboriginal orTorresStrait Islanddescent(ATSI)
- arefinanciallydisadvantaged
- arefromaculturallyand linguisticallydiverse background(CALD).









CONSUMERDIRECTEDCARE

In2010the Department of Healthand Ageingtendered for the delivery of Consumer Directed Care modelsofaged care support.CCO was successful inreceiving anallocation of 8 packages inthefirst round of a two year pilotprogram. 8clientshave been supported on this programin thisfinancial year.CCO hasbeenparticipatingon the CDCTaskforce and inthe evaluationprocessundertaken bythe Department. Thepilot programhas nowcometoan endandthesepackages have transitioned tomainstream aged carepackages, but will however still be offered onaCDCbasis.

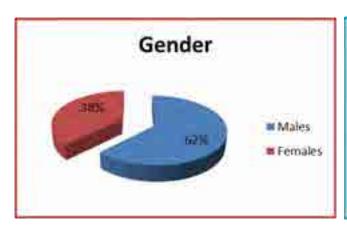
Consumer (or self)directed care (CDC)is designed togive older people a greater sayand more controlover thedesign and deliveryof communitycare services provided to themand theircarers. The program allows older people and their carers to make choices about the types ofcareservices theyaccess and the delivery of those services, including who will deliver the services and when. Expected outcomes of the programs for both care recipients and carers include, abetterqualityoflifedue toincreased independenceandempowermentover the services theyare receiving.

There arethree levels ofsubsidyfor Consumer Directed PackagedCare placesdependingon theassessed level of care to be provided. These three levels broadly align with the existing subsidylevels of the current Packaged Careprograms, namely:

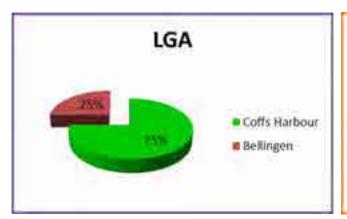
CDC LowCare-This level of care is similar to aCACPin that it provides care services to people livingin the community who have low level complexcareneeds. It provides services such aspersonal care, social support, transport to appointments, homehelp, meal preparation and gardening.

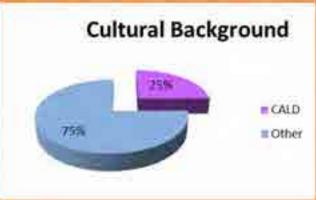
CDC High Care-This level is similar to an EACHpackage in thatit provides care services to people livingin the community who have high level complexcare needs. It provides services such asnursing, domestic assistance, in-home respite, personal care, transportto appointments, and social support.

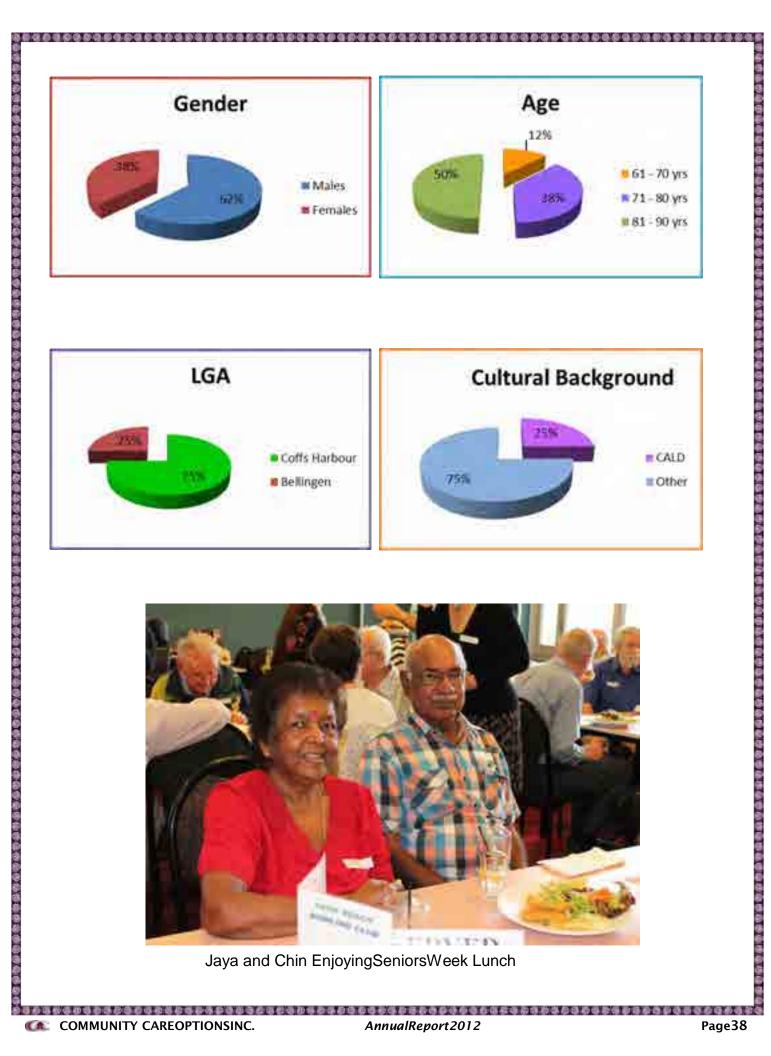
CCO has 5LowCareand3 High Care CDCpackages. Weare currentlynot inreceiptof packages at the third level beingHigh Care Dementia.











DEMENTIARESPITESERVICE (DRS)

The Dementia RespiteService is funded through the National Respitefor CarersProgram (NRCP). In 2011/12financial year CCO delivered 4,864hours of respite to 29 carers of someone who hasdementia livingin the Bellingen, Nambucca Heads and Coffs HarbourLocal Government Areas. This represents 100.58% compliance with contract requirements for this program.

Servicesprovided under this program includes-

- comprehensive assessment of carer's and recipient's needs
- regular plannedandunscheduledrespite
- support planningand coordination
- referrals toother communityservices
- informationand support.

Clients are-

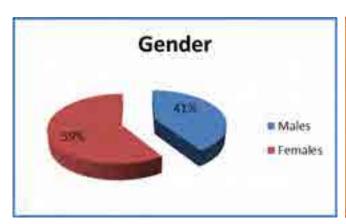
- carersof people with dementia
- weallocatesomeplaces to workingcarers who are employed outside the home.

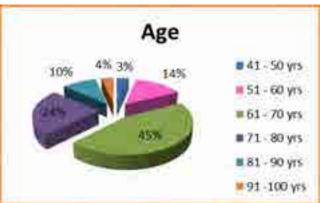
We give particular priorityto peoplewho-

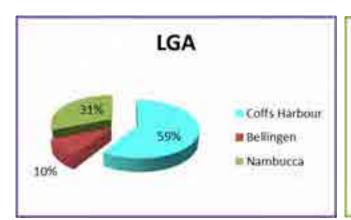
- are geographically or socially isolated
- arefromAboriginal orTorresStrait Islanddescent(ATSI)
- arefinanciallydisadvantaged
- arefromaculturallyand linguistically diverse background (CALD).

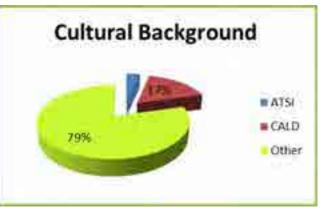
Some Carersare-

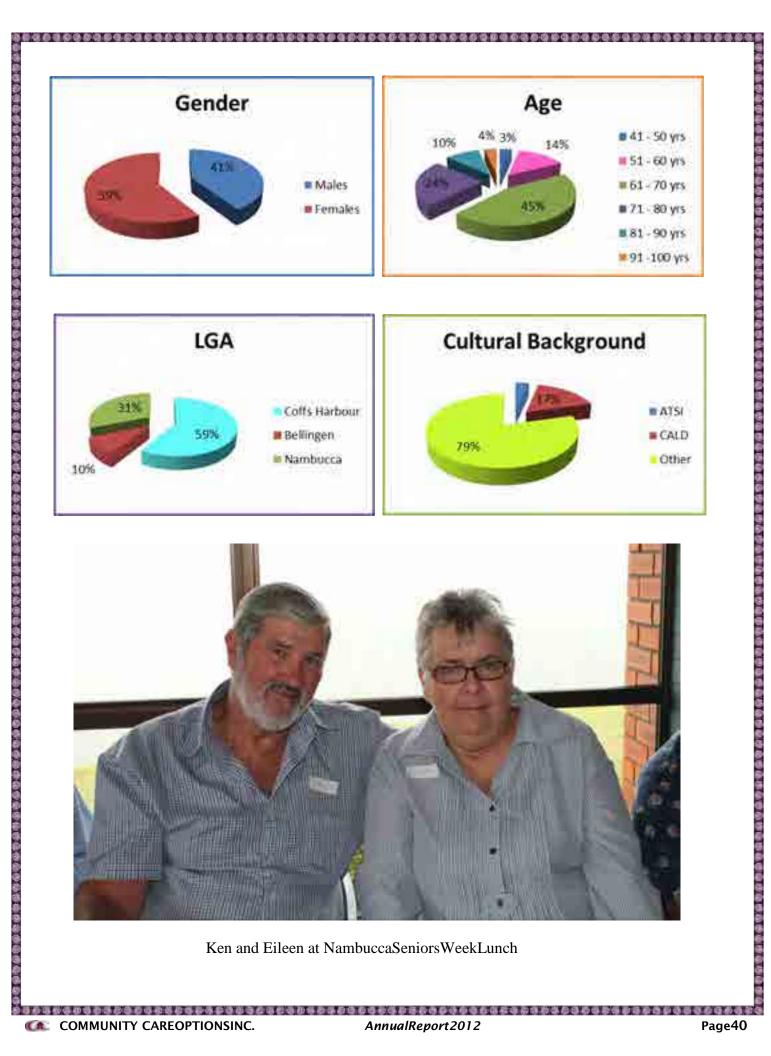
- sole carerswith limited support networks
- frail, ill, stressed, havea disability or are getting little sleep
- have extensive other commitments
- are socially, culturally or geographically isolated
- arefinanciallydisadvantaged
- experiencingstrain in theirrelationship with the personfor whomthey are caringor with other significant people.









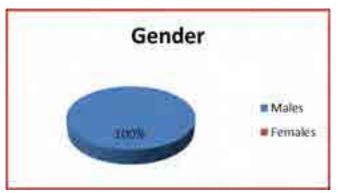


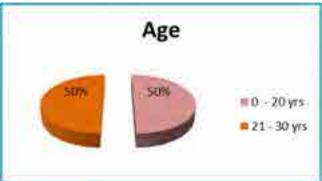
EMERGENCYRESPONEINTERIMFUNDING (ERIF)

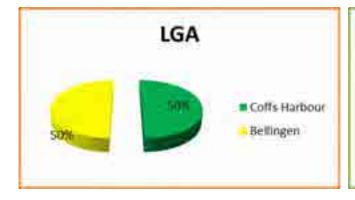
As a Case Management service we often come intocontact with clients whose circumstances change rapidlyandarein need of emergencyassistance, or whose needsare notbeingment through theircurrent supports. Attimes we do writesubmissionsforfundingfor such individuals. Werecevedfundingfor two clientsformDeptFamily&CommunityServices AgeingDisability& Home Care in 2011/2012. Weare pleased to have beenableloassist these clientstoaccessappropriatefundingfor theirneeds. This funding is not recurrent and is applied for, for a 3month periodonly.

Gender

Ge











EXTENDEDAGEDCAREATHOME

CommunityCare Optionsisfundedfor 15EACHpackages.

31 clients were supported on this program in 2011–2012, with 12,397 hours of direct support provided.

Waitinglists indicatethere is stillhigh demandfor thisprogram.

The Service includes-

- support planningand coordination
- referrals
- direct services, includingnursingandalliedhealth services
- help with equipment

EACHPackage Clients-

- are older people with high and complexsupport needs
- have been assessed bythe Aged CareAssessment team as requiringhigh band level ofcare

We give particular priority to people who-

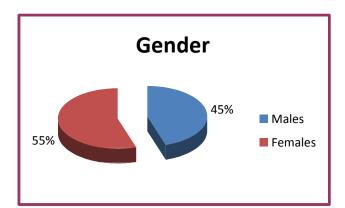
- are geographically or socially isolated
- arefromAboriginal orTorresStrait Islanddescent(ATSI)
- arefinanciallydisadvantaged
- arefromaculturallyand linguisticallydiverse background(CALD)
- have dementia

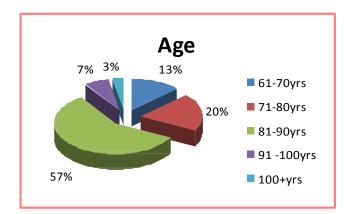
All our Clients have-

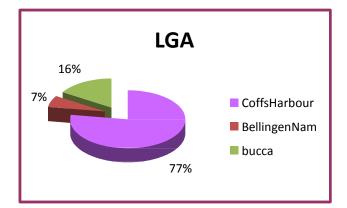
- complexcare needsarisingfrominteractingphysical/medical, socialand emotional needs:
- specific nursingor allied health care needs
- a needfor a skilled assessmentandcomprehensive management of service delivery
- a preferencetoremainliving at home with appropriate and reliable supports;
- a needfor ongoingmonitoringandreviewof changingcare needs

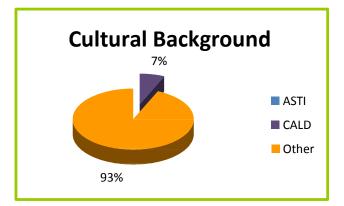
The nursing component of our service is brokered through the CoffsHarbour Health Campus ACTIP -communitynursingprogram. Wethank themfortheirprofessional support of our clients.

EXTENDEDAGED CARE AT HOME (EACH) ASNAPSHOT











Doris celebratingher 103rdBirthday

INDIVIDUALISEDSUPPORTPROGRAM (ISP)

In2010/2011 CommunityCare Options was successful intendering for two individual funding packages under the YPIRAC program.

The Young People inResidentialAged CareProgram(YPIRAC) funded byAgeingDisability and Home Care, recognizes the inappropriateness of placing younger people with a disability into residentialaged carefacilitiesandseeksto ensurean improvedqualityoflifefor these individuals within a communitycare setting.

Weweresupportingtwo younger people withphysical disabilities establish themselves back into theirlocal communities andreestablish links with theirfamiliesfollowingexit from inappropriateresidential care. One of these clients sadlypassed awayin 2011.

The Individualised Support Program is aboutsupporting clients with individual funding by tailoringsupport specificallyto meet theirneeds. Newmodels offundingare emergingwhich allowclients greaterflexibilityin directingandreceivingcare and support.

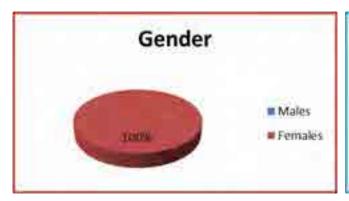
CommunityCare Options is anapproved Accommodation panelprovider for Dept Family& CommunityServices, is registered with the VoluntaryOut ofHomeCare programto support younger peopleasneeded; and is approved, competent and experienced in providing high level individualised and person centredsupport. egConsumer Directed Careand Attendant Care programs. Weensure through effective clinical support and specialised training that our clients receive aprofessional andhigh qualityindividual experience.

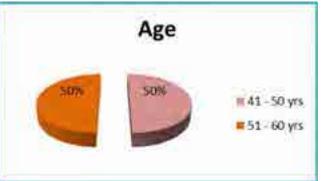
Wecurrentlyhave 1 clientonan individualised support program.

Female Age-43 years Shehas significant health and medical support needs. Support hoursfunded-78hours per week Support hours provided in 2011/12–3,296hrs.

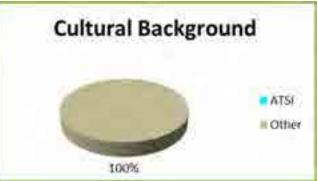
CCO has also received funding to provide day program support to this client (24 hrs per week), ensuringengagement in meaningful and valued activities bothwithin and outsideof thehome.

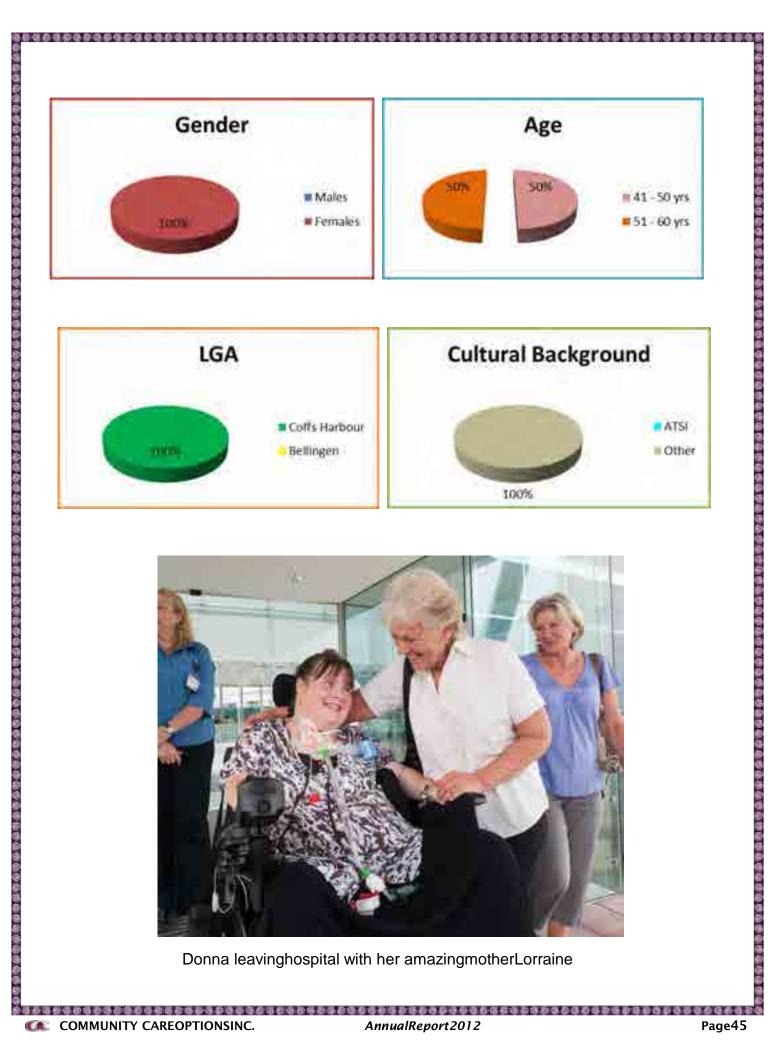


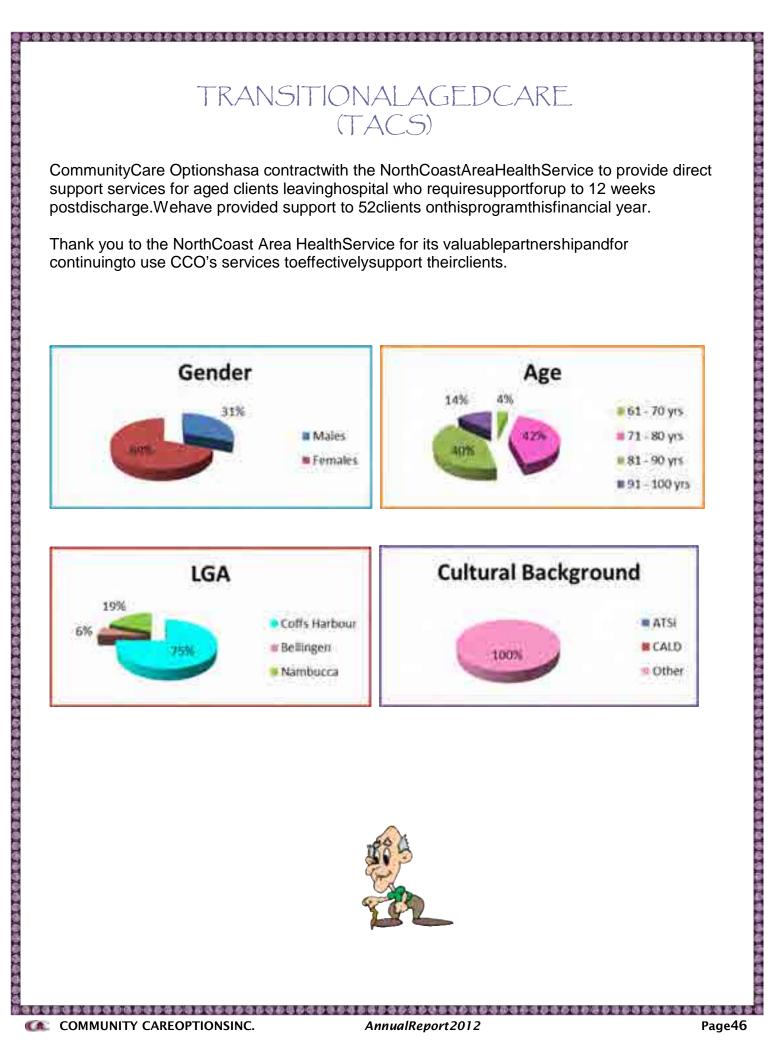


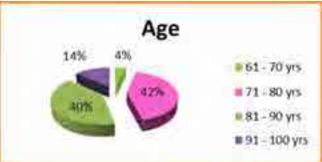


















PRIVATESERVICES

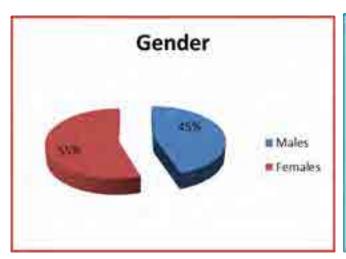
CommunityCare Options provides arange of services to private clients where needed.

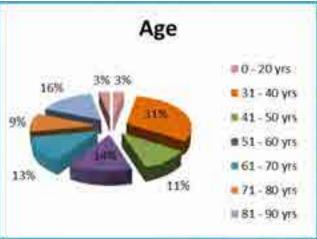
At times theorganisation is brokered by other agencies to provide services to their client's or to provideadditional support to existing CCO clients. 46 private clients were supported.

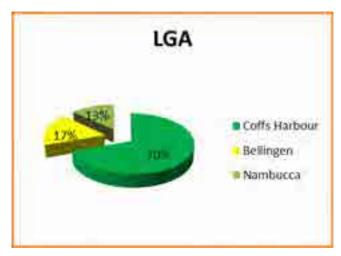
CCCO currentlyhas brokerage agreements with-

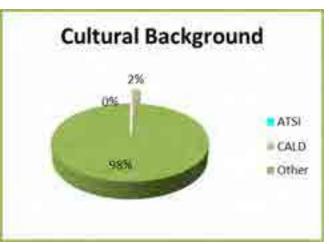
AustralianHome CareService **NSWHome Care** LifeWithoutBarriers The Home NursingGroup

Wethank youforutilisingour expertise to support your clients.









SERVICES

CommunityCare Options provides thefollowingservices-



Eligibilityand priorityfor CCO programs is determined byprogramcontract guidelines.



COMPREHENSIVE ASSESSMENT SUPPORT&SERVICE COORDINATION **MONITORING** PERSON CENTREDPLANNING CASE CONFERENCES **ADVOCACY CONSULTATION-CLIENTS & CARERS** REFERRALSTOOTHER SERVICES PROVISIONOF ASUPPORT PLAN **INFORMATION**

PERSONAL CARE MEALPREPARATION/COOKING **DOCTORS APPOINTMENTS** SUPERVISIONOF MEDICATION MAKE APPOINTMENTS LEISURE ACTIVITIES PROVISIONOF EQUIPMENT **CLEANING**

PETCARE

TRANSPORT

SHOPPING

LAUNDRY

ARRANGE TOPAY BILLS

RESPITE

OUTINGS







CARER EDUCATION







Wecanarrange access to-

LINEN SERVICES HOMEMAINTENANCE PODIATRY LAWNMOWING HYDROTHERAPY PHYSIOTHERAPY COUNSELLING **GARDENING NURSINGSERVICES ALLIED HEALTH SERVICES**

24 HR ALARMSUPPORT & MONITORING











Annetteand Bill enjoying a socialouting.

REFERRALS

Requestsforassistance comefroma varietyofsources.

CCO has adedicated IntakeCoordinator whodeals with enquiries, processes referrals, collects initial intake information, provides information aboutour programs and assists linking people tocommunityresources. This positional somanages program occupancy and our waiting lists.

Clients seekingaged care packages musthave beenassessed andreferredbythe AgedCare AssessmentTeam(ACAT).

Compacks referralsare generated through Hospital Discharge Planners, Social Workers and other clinical stafffromreferringpublichospitals.

Referralsfor otherprograms are receivedfromthefollowing-

Aged CareTransitionalIntervention Program (ACTIP)

CommunityNurses

The person wantingthe service or their carer

GeneralPractitioners/Women's HealthCentre Home

Care

Other HACCservices

Government Departments such as Centrelink, Department of Family & Community Services,

DepartmentofHousing, ProtectiveCommissioner

Head Injuries Service

DisabilityServices

Other organisations

Thankyouforallyourreferralsandassistance.

OURCLIENTS

CCO remainscommitted to ensuringwe receive meaningfulfeedback thattells us what we are doingright and where we can improve.

CommunityCare Options receives much praise and thanksfrom clients. The videntify that we assist themin remaining as active and independent aspossible to continue to live within the communitywith maximumqualityoflife.

Some of the positive feedback received about what we do wellincludes -

Wonderfulattitudebystaff.Cheerful,friendly, good boundaries,professionalism.Valuable help to relieve the full time care rofsome of the work. Having another person come into the home &sharethe situation is greatfor bothclient &carer.

SWwerealways prompt, patient and arrived with a smile. Packagewas fantastic! Thank you for it!

Listening, communication, helpingathome, caring& compassion. Regular service is excellent. These comments are reflective of the workers that visited myhome.

You reallycare about you're clientsand treat themwith respect. It's nice to see someone cares especially when you are sick.

Goodservice &pleasant workers.

Provideefficiency& courtesyat alltimes.

Excellent support, very good.

Showing genuinerespect and care.

If allthe care workers in Australia followed your example the world would be abetter place. I

was very impressed with the careandhelpl received. If elt that whatever needsl required your organisationwould accommodatethem. SW's

were hardworking& sensitive.

Everything! Ifoundtheservice excellent I couldn't have managed without amsincerely grateful. Love andthanks to allofyou.

The waylwas spokento&treatedduringserviceswas completelyprofessional. Staffalso showed empathybyrememberingthatthis was aworrying& stressful timeforme&my children. Thank youtoallwho spoke with &/or assistedme. lappreciate it more than you willknow.

Communication, friendliness, helpfulness. CCO helpedmethrough averytough time & nowl'mstronger &able to cope on myown.

The service you provide excellent.

It's a great service. The ladieswho visited mymother were alwaysbright & cheery. Always good company&always performed their duties very well.

The whole lot couldnot befaulted. Thanks amillion. You

help in any way&are anexcellentorganisation.

Individual planning. Excellent staff. Respite. Carers & activities planned. Teaching life skills.Confidence building.Encouraginghealthlylifestyle &exercise. (Co'ord) supported familyin I.E.P. plans&with GuardianshipTribunal. HelenFry(Co'ord) was excellent took onthe "too hard jobs helpedmyson into an independent living arrangement.

Fantastic support.

The personaltouch, achat & acuppago alongway. Plus the quality of the housework done was excellent!!

Allstaffwere mostpleasant&helpful & treatedusasfriendsnot customers. Personal attention was verygood.

It was the whole package-fromcasemangers to carersthat understoodmy circumstances.

Your always professional SW's are sensational-keepupthe goodworkgirls!

We could not have been more pleased with the service given to us.

I thinkoverallthis service deserves topmarksas everyone concerned was veryhelpful & caring. Thishelpspeople regain theirindependence & dignity. Welldone to the whole team & thank you.

Your organisation exceeded all my expectations - well done!

You gave us assurance & confidencebecause we knewhelp was only a phone callaway.

The communciation&care were verygood.

I thinkthat apartfromthe tasks required &carried out so well, your staff make themselves at home &have avery real rapport with theclients. They are outstanding in everyway.

You take good care ofclients. I couldn't askfor better care.

Offer aservice thatmakes areal differencetopeople who would otherwise struggle.

I can'tfindfault. Allseemed prepared tofindan outcomeforallproblems. That eased my mind, making mylife easier & making mefeel much more secure.

Provideagood service-Have agood contact/feedbackservice. Theservice is friendly, efficient, prompt, flexible. From beginning to end Ifelt very grateful to have the service & found it incrediblyhelpful.

You are an excellent communityresourceforthosewith disabilities and theirfamilies. I couldn'tfault your service in any way. As faras I amconcerned itwas top service.

Everyone concerned was polite, compassionate, giving&understanding.

"Ifitain'tbrokedon'tfixit". Seriously, we think the service is excellent.

Carerswere all fantastic in all ways-very wellorganised service in general.



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TRIBUTETOOURCLIENTS

Wepaytributetothose that we have assisted and hopethat we have madeadifference to theirlives. Our services are about these people.



Lynn &Patricia



Barbara &Sylvia



Phyllis &Eva



Don & Eunice



Eileen &Katie



Kerrie with Lorraine



Elaine, Melinda &Yvonne



Trudy&Linda



Guy& JillatFriendsofCCO



Vida, Carmen& Ruth



Bill, Laurie & Colin

on on the contraction of the con

QUALITYCOMMITTEE

The CCOQualityCommittee meets bimonthlyon thefirstTuesdayto discuss issues of concerntoemployees of the organisation and acts a same chanism for staff consultation. Work group representatives providefeedbackfromstaffand identifymatters that require reviewor consideration. The working partyalso provides input intopolic and procedure development.

Achievements of the Quality Committee over the last 12 months have been-

- QualityImprovement suggestions tobeanagenda itemfor all work groupmeetings
- NewCode ofConductandEthicsdevelopedanddistributed to allstaff
- Consideration of issues such as changes to awards and impacton staffandorganisation; blockingofSupportWorkersfollowingclient feedback-tobeexploredfully with client and SWbefore beingblockedfrom service;
- Supportfor SocialSupport groupsandclientsocial events
- Reviewed proceduresre contactingOn Call, use ofTaskLists and insufficient risk information reTACS clients
- Reviewed feedbackfromQualityReview
- Reviewed feedbackfromstaff survey
- Reviewed feedbackfromclientsurvey
- Reviewed feedbackfromclientannual evaluations



Thank you to the representatives ofthis workingpartyfortheirconstructive feedback and commitmentto service improvement.

QualityCommittee Representatives-

DebRyan (Management)-Employer Rep Steve

Bullock(Case Manager) - Employee Rep

KerryMarsh (Coordinator)-Employee Rep

Kathleen Dobell(SupportWorker Coffs) - Employee Rep Roger

McGuigan(SupportWorker Urunga)-EmployeeRep Sue Unwin

(SupportWorker-Woolgoolga)-Employee Rep



STAFFTRAININGS DEVELOPMENT

CommunityCare Optionsis committedtoensuringthat staffarewellskilled and qualifiedto undertaketheirdutiesandthat theyhave access toongoingtraininganddevelopment opportunities. The following represents some of the training attended and undertaken by CCO staffduringthe year -

Management

Leadership Management Australia (LMA) course CommunityCare StandardsWorkshop Strategic CommunicationWorkshop

Work Health & Safety

NDS workshop onWork HealthandSafetyAct OH&S

Conference

WH&STraintheTrainer Part 1&2

AllStaff meeting-reviewed changes toWH&S legislation and CommunityCare Common Standards.

Allwork groups—workshops in changes toWH&S legislation, review ofpolicies and procedures

Case Managers/Coordinators

Cultural CompetencyTraining

Head Space Mental Health workshop.

Spinal Outreach Cliniceducation workshop

Falls Prevention workshop

BetterAged CareProfessionalsAsk Better Questions Professional

Boundaries

Mental Health First AidTraining

Dementia CareWorkshop

PresentationbyAgedCare Rights Service

CoordinatorsTeamBuildingDay

CaseManagementWorkshops-Strengths basedpractice 1 &2

Enablingand Restorative Approaches

Goal Setting

Person Centred Goals

CaseConferencingWorkshop ONI

Support Workers

VentilatorTraining

First Aid Training DementiaTraining DiabetesEducation Universal InfectionControl/Infectious Diseases StrokeRecognitionand InitialTreatment Regional SupportWorker Conference-NDS



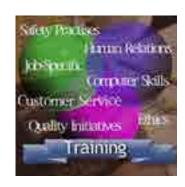
A number of staff members (SW's and Coordinator's) experienced professional development and support through the opportunity to actinhigher positions and learn newskills.

On the job competency assessments commenced for SW's.

Internal workshops were heldre rosteringissuesandtodiscussaward changes.

CommunityCare Options operates aspart of a wider community and is committed to ensuring engagement, networking and professional relationships with a widerange of other stakeholders inorderto optimize theoutcomes and opportunities for our clients. To this end we participateinawiderange offorums within our local communityandthebroader community, aged anddisabilitysector-

Regional EACHforums CaseManagementProject Regional NRCPforums ExtendedAged Careforums CommunityCareforums National DisabilityServices (NDS) Regional meetings LocalandAreaRespite Coordination Groups(RCG) Consumer Directed Care (CDC)Taskforce DisabilityExpoWorkingParty



2012 Program Performance

Program	Funded by	Number of packages	Number of clients	Number of Hours	ATSI	CALD
Attendant Care	ADHC	9	9	10,925.5	1	
YPIRAC	ADHC	2	2	3,295.75 direct 407.25 CM		
СОР	ADHC		413	8,263.5 direct 16,093 CM	9	17
Connect			13	1007.25 CM	1	
ERIF	ADHC	2	2	1,307.25		
EACH	DoHA	15	31	12,397.25		2
CACP	DoHA	141	203	31,320.75	7	14
CDC	DoHA	8	8	3,893.25		2
CRS-NRCP	DoHA		34	3,110.75		2
DRS-NRCP	DoHA		29	4,863.75	1	5
				79,377.75		
Compacks	Health	856	782	8,528 direct 4,814.5 CM	18	37
TACS	Health		52	1,209.25		
Private			46	2,639.5		1
Total			1,624	91,754.5 – direct 42,410 CM	37	80

