



WA HACC PROGRAM GROWTH FUNDING APPLICATION GUIDELINES

2016-2017

For Existing HACC Service Providers to Expand Current HACC Service Delivery

WA HACC PROGRAM GROWTH FUNDING APPLICATION GUIDELINES

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LODGEMENT OF A GROWTH FUNDING APPLICATION

The Western Australian (WA) Home and Community Care (HACC) Growth Funding Application (GFA) 2016-2017 document must be forwarded to the Department of Health (DoH), Subacute, Community and Aged Care Directorate (SCACD).

Assistance regarding this application may be obtained from Project Officers (see pages 4-5 for contact details).

CLOSING DATE: Wednesday 29 th June 2016 at 12 noon Western Standard Time.

A GFA lodged after the stipulated closing date and time will be deemed late and excluded from consideration unless no other acceptable applications are received.

The preferred method of submission is by email as a word document, except for the summary page with authority to apply for funding as a PDF format.

E-mail to: HomeandCommunityCareHACC@health.wa.gov.au

or

By facsimile: Dawn Kerr

HACC Administration Officer

08 9222 2192

If applications are:

- Electronically sent, please be aware of Conditions of Responding 1.5 Electronic Transmission of Responses.
- Hand delivered or posted these should be presented as a loose leaf, single sided document stapled at the top left hand corner. Please DO NOT bind or finish with plastic cover sheets or similar.

The GFA package is the total required documentation required. Please **DO NOT** include copies of annual reports, strategic plans or other similar documents.

An acknowledgement of a GFA will be emailed to you. If you do not receive an email within 24 hours of submitting an application please contact Dawn Kerr on 08 9222 4061.

CONTACT DETAILS OF HACC PROJECT OFFICERS

STATEWIDE/METRO PROJECT OFFICERS

Susan Dawson	08-9222 2083
Kristy Dunlop	08-9222 6852
Melody D'Cruz	08-9222 0258
Julie Edgeworth	08-9222 6828
Jan Fletcher	08-9222 4012
Clare Frazer	08-9222 4028
Ali Hollingsworth	08-9222 4219
Emily Patterson	08-9222 4289
Lynn Wade	08-9222 4264
Gerrie Williams	08-9222 4494

REGIONAL PROJECT OFFICERS

Goldfields	Cherie Winton	08-9080 5791
Great Southern	Desiree Cailes	08-9892 8215
Kimberley	Sue Carroll	08-9192 0307
Midwest	Nola Kevalaitis	08-9956 1903
Pilbara	Suzanne Millar Manager, Aged Care	08-9174 1073
Southwest	Denise Pelusey	08-9781 4013
Wheatbelt	Linda Smith	08-9690 1625

1. CONDITIONS OF RESPONDING

1.2 General

Existing WA HACC service providers are invited to take part in the 2016-2017 Growth Funding Round (GFR) to provide expanded support services, according to identified regional priorities. Support services being sought may be awarded to one or more service providers.

Growth funding availability is subject to growth funding being agreed to between the Commonwealth Government and the State Government based on the WA HACC Program 2016/17 Annual Supplement.

The Department of Health (DoH) reserves the right not to proceed with the outcomes of the HACC GFR.

Service providers are required to lodge:

- Mandatory Criteria
- Summary of the GFA
- Regional Breakdown of Growth Funding Request (Metropolitan/Rural)
- Service Group/Service Types Table (for recurrent funding application only)
- Sections 1 6, whichever section is applicable to the funding being requested.

Please send GFA documentation by the preferred method of submission by email with:

- a PDF version of the endorsed "Summary of Growth Funding Application" once signed
- a word version of other relevant pages and sections of the GFA as applicable.

1.2 Contractual Authority

The DoH on behalf of the Minister for Health (the Minister) invites this GFA. The Letter of Variation for 2017-2018 arising from a GFA will be between the DoH (the Principal) and the nominated service provider(s).

1.3 Number of Responses

One original of the response is required by the closing time and date.

1.4 Method of Submitting Responses

All responses must be addressed clearly as follows:

Provision of Home and Community Care Services GFA 2016/2017

It is compulsory to use the WA HACC Program GFA document.

An electronic version of the document will be available from the following DoH website http://ww2.health.wa.gov.au/Corporate/Articles/F_I/HACC-growth-funding or by contacting Project Officers (see page 4 for Project Officers' contact details).

Service providers identified for direct funding allocations will be contacted by their Project Officer to discuss the process for *Direct Allocation* (see page 8).

This process will need to be finalised by 12 noon Western Standard Time **Wednesday**, **29th June 2016**.

1.5 Electronic Transmission of Responses

Beware: Transmission by facsimile can be unreliable.

The preferred method of submission is by email. Confirmation of receipt of a GFA 2016-2017 document lodgement will be emailed back to you within 24 hours. If an email confirmation has not been received within 24 hours, please contact Dawn Kerr, HACC Administration Officer, on 08 9222 4061.

Responses submitted by facsimile must be received by DoH in full prior to the stipulated closing time and date.

The contents of the facsimile will prevail where there is any discrepancy between the contents of the facsimile or e-mail and the written confirmation.

1.6 Late Responses

Any GFA received by the DoH contrary to clause 1.4 of this GFA Guideline will be excluded from further consideration except when no other suitable application is received prior to the closing time and date.

1.7 Responsibility and Liability

Any parties expending money, making commitments or incurring liabilities on the basis of responding to this GFA, or in relation to any matter contained in this GFA, do so at their own risk and expense. The Minister, or the Minister's authorised delegate, excludes and disclaims all responsibility and liability.

1.8 Growth Funding Application

Neither the Minister nor the DoH is committed in any way to those service providers which respond to this GFA. The release of this GFA does not commit or otherwise oblige the Minister or the DoH to proceed with the purchase of HACC support services.

1.9 Confidentiality

Service providers are advised that any ideas or concepts submitted in the course of this GFA process may be either used, or be further developed by the Minister and/or the DoH, for the purpose of specifying the nature of the requirements in any subsequent GFA.

All information provided by service providers which is of a commercial nature will be treated as strictly confidential to the extent permitted by the *Freedom of Information (FOI) Act.*

The law does not protect, nor does the Minister or the DoH wish to protect, information which is not truly confidential. Consequently service providers are required to clearly identify those areas of their submission which they consider truly confidential. A statement that the entire submission is confidential cannot be considered accurate.

1.10 Freedom of Information

The main objective of the FOI Act is to extend as far as possible the rights of the public to obtain access to documentation held by Government. However, proprietary technical data, trade secrets and other information concerning the business, professional, commercial and financial affairs of a business which are contained in GFA submissions may be exempt matter under the provisions of the FOI Act.

Before considering release of the type of documentation referred to in the previous paragraph to applicants under the FOI Act, the DoH must first obtain the views of the Service Provider who provided that documentation in accordance with s.32 and s.33 of the FOI Act.

Where under the provisions of the FOI Act, it is decided to disclose documentation despite any objections by the said service provider, the service provider will be informed of their rights to review and appeal in accordance with s.34 of the Act.

The documents will not be released to the applicant until after the Service Provider's review and appeal rights have been exercised, if it chooses to so exercise such rights.

Information about the GFA process, other than that described above, for example the evaluation methodology used, may be disclosed outside of the FOI process upon written request, at the DoH's discretion.

2. WA HACC PROGRAM OBJECTIVES AND REQUIREMENTS

2.1 Purpose

To allocate WA HACC Program growth funding according to the identified priorities across the WA HACC regions established through regional planning and consultation processes.

2.2 Service Priorities

The overarching service priority for the WA HACC Program is to continue to promote Wellness focused services that support client independence.

Service priorities throughout WA will also be heavily influenced by:

- the changing demands of HACC clients/carers
- the WA Assessment Framework which has already resulted in increased demand for services that promote a Wellness philosophy

The WA HACC Program will monitor any changes in client/carer need and continue to offer flexible and responsive services to meet these needs.

The WA HACC Program regularly monitors needs and priorities within each HACC region across WA. Priorities within each region are identified on an annual basis taking into account each region's unique characteristics, client/carer demand and current service provision.

2.3 Process for allocation of growth funding

The WA HACC Program may allocate growth funding through the processes of <u>direct allocation and invited submissions</u> by service providers, against identified regional and sub-regional priorities.

Direct Allocation

The DoH may allocate funding directly to identified service providers in the growth funding round to strengthen particular service delivery in a region.

The WA HACC Program uses the direct allocation process for some/or all of the following reasons:

- to ensure viability of existing specialised services
- the service provider has the necessary infrastructure and skills to provide the services
- the quality, sustainability, and innovation of the specific service model
- an investment to develop the service system
- the only service provider in the region
- the value of the funding allocation is low
- to streamline the growth allocation process
- competitive procurement processes are unnecessary as the market has been tested

Service providers who have been identified to receive growth via direct allocation in *Attachment 1* will be contacted by their Project Officer to discuss the process.

Invited Submissions

HACC service providers apply for funding against the identified priorities in a region.

Submissions should address expansion of service delivery.

Applications submitted that do not address the identified growth priorities for the region will not be considered.

Attachment 1 of this GFA document contains the detailed information about regional identified priorities for direct allocation and invited submissions.

All submissions become public documents upon receipt by the DoH.

2.4 HACC Target Population

As defined in clause 4 of the 2007 HACC Review Agreement, the target population is:

- older and frail people, with moderate, severe or profound disabilities
- younger people with moderate, severe or profound disabilities
- such other classes of persons as agreed upon by the Commonwealth Minister and the State Minister
- the unpaid carers of people assessed as being within the National Program's 'target population'.

2.5 Distribution of Growth Funding

Regional priorities have been determined with growth funding notionally allocated between 12 HACC regions (State-wide, 4 Metropolitan and 7 Country).

For a GFA submission to be considered it needs to address the identified regional priorities.

2.6 Timelines

1st Round

8 June - 29 June	Service providers to complete GFAs
30 June - 29 July	Project Officers to evaluate GFAs
1 August – 10 August	Regional meetings between SCACD and regional Project Officers to discuss GFAs
August	Completion of actions from regional meetings
September	SCACD to finalise growth funding allocations and documentation for submission to the State Minister for Health
September	Submission of Package 1 to the State Minister for Health
15 September	Latest date for approval process for the State Minister
30 September	Latest date for submission to the Federal Minister

Anticipated 2nd Round

February	Project Officers to confirm recommended non recurrent items
February - March	SCACD to finalise non recurrent allocations and documentation for submission to the State Minister for Health
Mid March	Submission of Package 2 to the State Minister for Health
31 March	Latest date for approval process for the State Minister
15 April	Latest date for submission to the Federal Minister

3. CRITERIA FOR EVALUATING RESPONSES TO THIS GROWTH FUNDING APPLICATION

The following criteria will be considered when assessing the responses. It is compulsory that service providers use the <u>"WA HACC Program Growth Funding Application 2016-2017"</u> document to respond to this GFA.

3.1 Mandatory Criteria

- 1. Conditions of responding have been met.
- GFA Guidelines have been adhered to.
- 3. The GFA addresses the identified priorities for the region.
- 4. Identifying if there is a conflict of interest.
- 5. Compliance with State Supply Commission policies and principles when conducting purchasing activities.
- 6. Submission of a GFA.
- 7. Compliance with Contractual and other compliance issues. (Service providers need to understand that consideration will be given to compliance with contractual obligations, service specifications and other relevant WA HACC Program requirements).
 - Provision of Service Reports Minimum Data Set and/or other reports as specifically contracted
 - Meeting the outcomes of the Home Care Standards the 'Plan for Continuous Improvement' to address one or more 'Not Mets' and the 'Timetable for Improvement'
 - Service Specification Schedule volumes are being met, or reasons if not achieving volumes are provided and agreed upon
 - Insurance policies are current as per contract schedule
 - Provision of Financial Obligations and Reports annual financial statements
 - Provision of a Carers Recognition Act 2004 Annual Report to meet the requirements of the Carers' Charter
 - Provision of a Disability Access and Inclusion Plan Annual Report
 - Provision of a Sub Contracting Annual Report (if applicable)
 - Commitment to the WA HACC Service Provision Guidelines http://www.health.wa.gov.au/HACC/publications/index.cfm#other
 - Commitment to the WA HACC Fees Policy and Standard Fees Schedule http://ww2.health.wa.gov.au/Corporate/Articles/F_I/HACC-fees-policy
 - Commitment to the WA HACC Program's wellness philosophy to service delivery

3.2 Qualitative Criteria

1. Service Model (weighting 50%)

Describe how the <u>proposed</u> expansion of services, with a priority on service models that support individuals, including flexibility in service delivery, will meet people's needs.

2. Organisational Skills and Capacity (weighting 50%)

Outline how your organisation:

- a. Works in partnership with other organisations including aged and disability providers, local government and community groups.
- b. Approaches professional development and the strategies utilised to keep staff informed about state and national disability and aged care reform.
- c. Actively pursues and can demonstrate continuous improvement in all aspects of service management and delivery.
- d. Actively works to identify and address potential risk, to ensure the safety of clients, staff and the organisation.

3.3 Value for Money

Service providers need to understand that **value for money** will form part of the assessment process.

Value for money is a key government policy objective to ensure that when purchasing goods and services, public authorities achieve the best possible outcome for the amount of money spent. This does not necessarily mean selecting the lowest price offered.

Some considerations that will be addressed include:

- technical merits of the service
- contractual and technical compliance
- risk factors that may impact on cost and value
- the capacity of the Service Provider (i.e. financial, managerial, technical abilities)
- any wider benefits to the State (e.g. support for local industry, regional development, job creation).

Only submit the section of the GFA that you are applying for.

4. RECURRENT FUNDING

4.1 Service Groups/Service Types

To support the expansion of service delivery that aligns with the regional priorities identified at Attachment 1.

4.2 Statewide Business Cases

To support the expansion of non MDS services which align with the priorities and the strategic direction of the WA HACC Program.

Do not use a Business Case to expand recurrent service type delivery.

5. NON RECURRENT FUNDING

Non recurrent funding supports:

- purchase of additional assets
- development of service delivery business case
- community care research projects business case
- feasibility studies business case
- major capital works business case (buildings)
- one off minor capital works (improving facilities/functionality of buildings)
- one off minor capital items (priority will be given to support recurrent applications).

5.1 Additional Assets/Transport Vehicles

The purchase of additional assets/transport vehicles is usually associated with the application of growth funding to support increased service delivery. An asset is an item that is valued at \$1,000 or more or as a set of items to the value of \$1,000 e.g. 5 board room chairs @ \$200 each = \$1,000 and are used for a specific purpose "together". Items less

than this are classed as consumables and should be purchased as and when required with recurrent funding.

Information provided about items assists with the prioritising and allocation of funds. Therefore, it is recommended that some or all of the information listed below could be included in the "Justification" column.

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- description/model/year
- client or staff use both indirect and direct client use
- benefits to clients and/or staff and justification of need i.e. Occupational Health and Safety (OHS) risk, activity, stimulation, memory impairment, purpose, aim and include which client specific target group will benefit
- the consequences if requested funding is not approved through this GFA.

5.2 Replacement Assets

Replacement of assets (as a general rule) should be funded out of Asset Replacement Reserves (ARR).

HACC will not support a GFA for a replacement asset if there are sufficient reserves available.

The WA HACC Program does not expect service providers to completely exhaust their ARR but does expect a significant contribution from ARR when funds are available. That is the intent of allowing recurrent surplus funds to be dedicated to an ARR.

The ARR holds <u>non asset specific cash</u> up to the total amount of accumulated depreciation reported in the asset register. It is <u>not</u> necessary to hold ARR cash equal to the replacement cost of any given asset prior to replacing it, e.g. if a vehicle has been depreciated by \$15,000, the replacement cost is \$25,000 and the ARR holds \$75,000, then the service provider can replace the vehicle from the ARR.

Asset replacement is only considered if there are insufficient funds in the asset reserves. Information provided about the assets/items assists with the prioritising and allocation of funds, therefore some or all of the information listed below could be included in the "Justification" column:

- details of the current item being replaced description/model/year
- client or staff use both indirect and direct client use
- why the replacement is requested, include any OHS issues or potential OHS
 issues if still in use and include information on any risk assessment done. Include
 quotes to repair and if not repairable (or cost effective) quote to include justification
 of specific costs.
- benefits to clients and/or staff and justification of need i.e. OHS risk, activity, stimulation, memory impairment, purpose, aim, details of and need for replacement, include which client specific target group will benefit.
- the consequences if requested funding is not approved through this GFA.

5.3 Non Recurrent Funding for Transport Vehicles

The purchase of additional transport vehicles to support increased service delivery needs to consider:

- · vehicle use
- client use to support service delivery, direct transport for clients include number of trips per day/week, client numbers per day/week and days available for use
- sharing or supporting with another HACC service provider/site provide details
- supporting information for vehicle selection i.e. occupational therapy report details on suitability of vehicle for clients.

5.4 Community Care Research/Projects

Applications for community care research/projects are to support research partnerships which align with the priorities and strategic direction of the WA HACC Program.

5.5 Capital Works – Feasibility Study

Capital works is for the building component.

Service providers are encouraged to discuss any capital works initiatives with their regional Project Officer prior to the Annual GFR. The capital works proposal provides an outline of the service providers' plans. If the proposal is approved in principle, up to \$30,000 can be requested to engage a Consultant/Project Manager or Quality Surveyor to develop the design concept and project feasibility study.

Proposals could include:

- acquisition of new property construction of new facilities
- modifications to existing property to improve access for clients
- fit out of new modified property to assist service provision to clients.

Day to day maintenance and minor capital enhancement work up to \$50,000 (e.g. upgrade of air conditioning system) will not form part of the capital works proposal use the Application for Non Recurrent Funding.

Contribution from other funding sources towards the capital works projects, apart from the WA HACC Program, is encouraged and may be in the form of land, equipment or a funding allocation.

Service providers should consider applying to *LotteryWest* for funding to assist with the purchase of buildings and facilities. Details on grant types and application forms can be accessed on the website:

http://www.lotterywest.wa.gov.au/grants/grant-types/community-spaces

Royalties for Regions is another funding source that could be investigated on the website: http://www.drd.wa.gov.au/rfr/howtoapplyrfr/Pages/default.aspx

Local Governments may be able to assist with land for lease for projects that support community services.

5.6 Capital Works – Business Cases

Major Capital Works Business Cases are to be submitted when all the required information has been collated to justify the funding requested for the proposed projects.

The first stage of this process is to apply for funding for a feasibility study for any capital works proposal.

The second stage of this process is the submission of a GFA for any capital works project.

Note: Any non recurrent funding approved over \$100,000 will require a Terms and Conditions agreement between the DoH and the service provider.

6. WA HACC PROGRAM - SERVICE GROUPS

Service Groups/Service Types that can be applied for:

Group 1	Domestic assistance, Personal care, Social support, Respite care, Other food services
Group 2	Assessment, Client care coordination
Group 3	Nursing (home), Nursing (centre), Allied health (care received
	at home), Allied health (care received at centre)
Group 4	Centre-based day care
Group 5	Home modifications, Goods and equipment
Group 6	Meals at home, Meals received at centre/other
Group 7	Transport, Transport CBDC
Group 8	Other – Non MDS
Group 9	Counselling/support information and advocacy (carer)
	Counselling/support information and advocacy (care recipient)
Group 10	Home maintenance

Note: If a service provider is contracted by a particular <u>service group</u> they can provide the full suite of support services within that group.

Those service providers not contracted by service groups would apply for individual service types from this list.

7. PRICING DETAILS

Service providers' current contracted unit prices will only be considered for this GFA. If applying for a new service type or support services in an additional region the unit prices will be negotiated.

8. CONFLICT OF INTEREST

Service providers are required to disclose any information that might be relevant to an actual or potential conflict of interest.

- Service providers declare that the service provider has no conflict of interest.
 or
- Service providers should provide details of any potential or actual conflict of interest, and any mitigating circumstances that reduce these risks (see Mandatory Criteria to respond).

9. QUALITY REQUIREMENTS

The WA HACC Program quality requirements relevant to this GFA are:

TITLE

National Program Guidelines for the Home and Community Care Program

Home Care Standards

HACC Program National Minimum Data Set (Version 2.0)

WA MDS V2 User Guide

WA HACC Fees Policy

WA HACC Service Provision Guidelines

Wellness Approach Guidelines

Financial Obligations and Reports