



home**care**today

Your resource hub for new ideas
and choices in home care

CONSTRUCTIVE CONVERSATIONS WITH CONSUMERS

MODULE 4

Consumers continuing control of their lives

Participant workbook

[www.home**care**today.org.au](http://www.homecaretoday.org.au)

An initiative of
COTA
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LEARNING MODULES OVERVIEW

These learning resources are provided for advisers/case managers working within community care environments. The aim of these modules is to enable advisers to embrace the *thinking, skills and practice (TSP)* for transitioning to and working in a Consumer Directed Care (CDC) model. It will provide participants with the knowledge and skills to work, and have conversations with consumers and their carers to achieve positive outcomes. The resources are designed to be delivered by an experienced trainer.

The learning modules have been prepared for Home Care Today by **CommunityWest Inc.** a respected not-for-profit organisation with over 20 years' experience working alongside service providers in the home and community care sector.



Who can I contact for further information or assistance?

Please feel free to contact us for assistance or conversations regarding the implementation of CDC.

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DISCLAIMER

This website provides some general practical advice for Home Care providers and is not intended as legal or financial advice. This website should not be the only source of information for providers of Home Care. Home Care Today encourages anyone who has questions about providing Home Care to get the relevant professional advice to discuss their organisation's particular situation.

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TRAINING OVERVIEW

This training is provided for advisers working within Home Care environments. The aim of these training modules is to enable advisers to embrace the *thinking, skills and practice (TSP)* for transitioning to and working in a Consumer Directed Care (CDC) model. It will provide participants with the knowledge and skills to work and have conversations with consumers and their carers to achieve positive outcomes.

For the purpose of this training the preferred terminology is 'adviser', however other names that may be used in the sector could be 'case manager' or 'coordinator.'

There are numerous skills that advisers need to facilitate positive consumer outcomes. Each adviser will develop their own personal style. Some of these are learned informally through life whilst others are learned theoretically and developed through formal training.

There is an assumption that advisers completing this training will be familiar with and understand essential adviser skills.

Some of these include:

- interviewing
- communication
- critical thinking
- negotiation and collaboration
- advocacy and mediation
- awareness of diversity.



Picture source: iStock

This training aims to provide advisers with the skills and tools to work in a CDC model to support people to remain living at home for as long as possible. It also aims to equip them with knowledge that can enable consumers to have choice and flexibility in the way that care and support is provided at home. Quotes, ideas and tools will be embedded throughout the modules as will the underpinning values and principles of CDC.

The content of these training modules is centred on giving advisers the tools to create partnerships and build relationships with consumers. The training includes practical strategies to have empowering conversations with consumers from their first point of contact through to monitoring, review and potential exit.

This training is broken into five training modules that can be used as a full training session or standalone units.

The five modules are:

- Module 1: Consumer Directed Care - Setting the scene
- Module 2: How to Work within a Consumer Directed Care model

- Module 3: Supporting consumers to live a good life
- **Module 4: Consumers continuing control of their lives**
- Module 5: Our approach counts.

The training explores theoretical concepts of CDC and the key principles that underpin this approach in Home Care environments. Practical activities and videos are used throughout each module to reinforce CDC philosophies and principles as a wellness and enablement framework. Videos are a central component of the training that include interviews with subject matter experts, advisers and consumers. Quotes, ideas and tools are embedded throughout the modules, with the underpinning values and principles of CDC.

A recommended reading list is provided for each module, with reference to other training that is available and that may be useful.

SECTION 1 CONSUMERS CONTINUING CONTROL OF THEIR LIVES

1.1 About this module

Welcome to *consumers continuing control of their lives* developed by CommunityWest. This module provides tools for advisers to have constructive conversations, videos are central to this module with practical activities to embed the knowledge.

1.2 Key concepts

The key concepts that are central to this workshop are:

- the consumer is the expert
- scales of control
- conversations, activities and videos on the following topics:
 - goal setting
 - new types of support
 - budgets.

1.3 Aim

This workshop aims to assist advisers to watch of the practical strategies to have constructive conversations with consumers.

1.4 Objectives

The workshop's objectives are to:

- provide skills development and tools for advisers to enable consumer choice, risk and control
- empower advisers to effectively have conversations with consumers.



Picture source: iStock

1.5 Methodology

The module is designed to be interactive; providing information to enable advisers to support clients within a CDC model. The material is developed within a practical and reflective framework and is designed to be delivered as a facilitated workshop which will be activity based with workshop participants' learning being drawn from their reflections and responses to the activities and peer discussion.

Brainstorming, sharing experiences and visual tools are utilised to enhance personal reflection, peer and facilitator engagement.

1.6 Participant workbook

This participant workbook is designed to provide a resource for advisers to utilise during and post workshop. Each session will be outlined along with associated reference material.



Picture source: CommunityWest

SECTION 2 THE CONSUMER IS THE EXPERT

2.1 The consumer is the expert on their own life

This does not mean that the consumer is all knowing about everything but rather knows what works and does not work for them, what makes them happy and safe and what gives their life meaning and purpose.



Picture source: iStock



Note space - include ideas, insights, queries and comments

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Each person is their own expert when it comes to *them*.

A doctor or nurse may know more about how your kidneys work and what their function is. However, you are the best person to explain what sensations or symptoms you are experiencing (whether you know you have kidney stones or not).

A counsellor may know the theory behind emotional distress, but only you can describe how that distress feels and how it impacts on your life.

While you and your organisation know a great deal about providing services to consumers, the consumer is the best person to describe their needs, what works for them and what does not work for them. Therefore, with your expertise about service delivery and their expertise about themselves a true collaboration with great respect for one another can develop.

For example there are varying levels of collaboration that can occur when consumers:

- are new to a service.
- are very familiar with a service.
- require more assistance.
- require less assistance.
- transition from one package level to another.
- choose to have you manage their budget.
- choose to manage their budget themselves.

Flexibility, individuality and respect foster and maintain a truly collaborative relationship as consumers move between levels.



Note space - include ideas, insights, queries and comments

2.2 Activity – scales of control

Below is a diagram that represents different levels of control a consumer may have over their Home Care Package. At one end you will see ‘the adviser has full control’ and at the other end you will see ‘the consumer has full control.’

Work in pairs or with the other participants on your table and use a grey lead pencil to:

- draw in three alternate possibilities of control between the adviser and consumer
- write in the consequences for the consumer if the adviser has full control and the benefits the consumer may gain by having more control.

Adviser has full control		Consumer has full control
List the consequences to the consumer		List the benefits to the consumer



Note space - include ideas, insights, queries and comments

2.3 Turning points in service delivery

Turning points in service delivery can occur at any time during the service episode between a consumer and the service provider.

Possible triggers for turning points include:

- admission to or discharge from hospital
- request by family or individual for review of support needs
- exit from package
- change in key support staff
- changes resulting from improved care processes
- change in individual circumstances for example:
 - increasing levels of difficulty across life domains/need for higher level of support
 - change in carer status (sickness, death).

These triggers can result in:

- short term change
- reduction in need
- increase in need.

2.4 Scenarios – scales of control

Mr Casey's Story

Mr Casey has been receiving a Home Care Package for three and a half years. Your organisation has now fully implemented CDC. Mr Casey has been involved in the discussion and consultations about CDC and he indicates that he has a very good understanding of what it means from your organisation's point of view and from his point of view. He appreciates that he can shop around for services, but he has expressed that he is very happy to stay with your organisation at this stage.

It is the first week that Mr Casey is receiving services under CDC. Where would he be on the scale of control?



Note space - include ideas, insights, queries and comments

Mrs Inca's story

Carlotta Inca organises everything for her mother, Mrs Inca. In the past six weeks, Carlotta organised for an Aged Care Assessment Team (ACAT) assessment to be carried out with Mrs Inca. The outcome is that Mrs Inca is eligible to receive a Home Care Package. Mrs Inca is on the cusp of a tier two/tier three package. The ACAT assessor determines that Mrs Inca would be suited to a tier two package but would require a review in six months to ensure this level of package is still appropriate and meeting Mrs Inca's needs.

Carlotta has come to your organisation to negotiate services for Mrs Inca. Carlotta is not aware of CDC, does not have time to adopt new philosophies and wants to get services sorted so her mother can have her needs met. Carlotta is a very busy woman and needs to resolve support for her mother as quickly as possible.

Where would Mrs Inca be on the scale of control?



Note space - include ideas, insights, queries and comments

SECTION 3 CONSTRUCTIVE CONVERSATIONS WITH CONSUMERS



Fadzi – narrator



Sue – adviser



Joyce – consumer



Note space - include ideas, insights, queries and comments

3.1 Client Profile

Name: Joyce MacDonald

Age: 80

Gender: Female

Marital status: Widowed

Family support: A neighbour calls in weekly. Joyce's daughter lives close by and assists her with shopping once a week. Joyce's son lives in Victoria but is in contact with her regularly. She has three grandchildren and two great grandchildren.

Carer: Joyce's main carer is her daughter, Sarah.

Other information: Joyce is a retired seamstress. She loves reading and gardening. She has a daughter Sarah, her youngest and her other son, Thomas lives over in Victoria. He works as an engineer. Joyce's partner passed away three years ago and Sarah and Thomas have been a support to her since then. Her daughter assists with shopping.

Ongoing functional disability

Decreased mobility due to osteoarthritis, this particularly affects her hip and knees. Joyce has diabetes and her vision is diminishing.



Picture source: CommunityWest

3.2 Conversation role play

Instructions:

- Read the case study of 'Joyce MacDonald'
- In your groups allocate each person to role play one of the following:
 - consumer – Joyce MacDonald
 - adviser
 - observer.
- In the same groups, using one of the following as a topic to have a conversation:
 - new types of support
 - introduction to budgets
 - monitoring conversations to budgets
- Each person will be allocated 5 minutes to have a conversation with the consumer on the topic.
- Please see instructions for each topic on page 15.



Picture source: CommunityWest

Instruction for each person's role:

Consumer	Adviser	Observer
You are the consumer (Joyce MacDonald). Role play the conversation about one of the topics.	Role play an empowering conversation with Joyce that supports self-direction. (Complete a self-reflection p.17.)	Observe the conversation using the observer checklist as a guide (see p.16). Give feedback using traffic light feedback model (see p.18.)



Note space - include ideas, insights, queries and comments

3.3 Instructions for role play conversation

Role play 1: Budgets – an introduction

- Joyce is currently assessed by an ACAT for a Home Care Package Level 2 – the amount allocated to this package is \$13,644*.
- She has had \$2,000 modification completed in the bathroom.
- She is being charged 15% administration fee.
- Currently she has 2 hours housework weekly assistance at \$40 per hour.
- Shopping assistance once a week at \$40 per hour.

Conduct an introductory conversation with Joyce to speak about her budget and discuss what is left in her contingency fund.

Role play 2: New types of support

- Joyce received an iPad from John (her grandson) for Christmas, however she currently is unsure how to use it.
- Joyce loves the water and the ocean, discuss with Joyce ways to incorporate this into her support.

Utilising the two points discuss with Joyce options for new types of support.

Role play 3: Budgets monitoring conversation

- There has been a change in Joyce's support and she now has to pay for an additional hour of support to attend a class – The support worker is \$40 per hour.
- Class – \$8 per session.

The budget needs to be adjusted (using the information referred to in Role play 1). Conduct a monitoring conversation with Joyce taking into account the adjustments and the contingency fund.

*As at 2014



Picture source: iStock

3.4 Observer checklist

Instructions:

1. observe the conversation between the adviser and the consumer
2. complete this table and make comments
3. give feedback to the adviser using the 'traffic light' feedback tool page.

What to look for	Yes	No	Comments
Did the adviser provide encouragement and put the consumer at ease?			
Questions asking for specific examples demonstrating particular qualities – “tell me about a time when...”			
Did the adviser use leading questions?			
Were there good questioning techniques e.g. use of follow up questions to probe for answers.			
Were there any tools incorporated e.g. important to/for - working/not working.			
Did adviser display any prejudices?			
Was enough time allowed for the consumer to answer questions and to ask questions of their own?			
Did the adviser explore options with the consumer?			
Did the consumer come up with solutions?			
Did the conversation empower the consumer?			
Were there any actions from the conversation?			



3.5

Self-reflection on role play activity

1. How did you feel your conversation went?

2. Did you empower the consumer to exercise choice and decision making? Give two examples below.

3. From the conversation you have just had with the consumer is there anything that you will now change at work?



Picture source: iStock

3.6 Traffic light feedback tool

Instructions:

Use the questions below as a guide to consolidate your feedback.

	What they do well and could keep doing doing?
	What could they start doing?
	What they could stop doing?

SECTION 4 VIDEO QUESTIONS



Picture source: CommunityWest

4.1 Activity – goal setting

1. Joyce identified that she would like to get out to the shops, have a coffee and see people. Are there other ideas you could think of to help Joyce do that? Does the trip need to involve shopping? What about other social opportunities?

2. Sue the adviser asked, “If you did get out what would you like to do?” Is this a good question? Did it elicit much information from Joyce? How else could you phrase it?

3. Should we involve Sarah or other members of the family in this conversation? Who else might be involved? If we do involve others what needs to happen first?

4. You will notice that the adviser uses the photo album and interested questions to encourage Joyce to 'tell stories.' Storytelling takes time but helps to build relationships and rapport and is a great way to identify interests which Joyce may have and what is important to her. Can you think of other ways to identify interests or encourage consumers to share stories with you?

Goals



1. _____

2. _____

3. _____

5. When Sue talks to Joyce about aqua aerobics it stems from a conversation about the beach. The adviser's role is to assist the consumer to make informed decisions about their support. Are there other options you could have explored with Joyce around her love of the beach and water?

6. In the conversation about Joyce trying aqua aerobics, Sue asks Joyce, "Is there anything I could do to help with that?" How do you rate this question? Do you think it elicits helpful information from Joyce? Can you think of a better question?

The format of the statement must be clear and easy to understand, should clearly state any unexpended or contingency funds, and should be consistent with the individualised budget. The means by which the statement is provided to the consumer, e.g. hardcopy, email or web-based, can be negotiated between the home care provider and the consumer. (Source: Home Care Package Programme Guidelines July 2014)

4.2 Activity – budgets video 1 and 2

1. What do you think of Sue’s explanation of the costs of the service? What was good about it? What could be improved about it? Do you think this is a question consumers will ask?

2. In the budgets conversation with Joyce – how do you think the conversation went? Is there anything you would do differently? Why? Why not?

The budget may also include a small “contingency” to make provision for emergencies, unplanned events or increased care needs in the future. However, it should be clear to the consumer that it is not a requirement for them to have a contingency fund.

If a contingency is set aside, it should be no more than 10 per cent of the total annual budget for the package. The contingency amount must be clearly identified in the individualised budget and in the monthly statement of income and expenditure provided to the consumer. Contingency funds must be used before accessing additional home support programme services.

The home care provider must provide the consumer with a monthly statement clearly showing the income and expenditure of the package, in a format that enables the consumer to understand where funds have been expended, as well as the balance of available funds (or unexpended funds). Unexpended funds are the difference between the consumer's income and expenditure within their monthly statement. This amount, including contingency funds, must carry over from month to month, and from year to year, for as long as the consumer continues to receive care under the package. There is no cap on unexpended funds for the consumer.

The format of the statement must be clear and easy to understand, should clearly state any unexpended or contingency funds, and should be consistent with the individualised budget. The means by which the statement is provided to the consumer, e.g. hardcopy, email or web-based, can be negotiated between the home care provider and the consumer. (Source: Home Care Package Programme Guidelines July 2014).

2. Did you notice any helpful questions Sue asked Joyce?

4.4 Activity – budgets video 3

1. Did you notice that Joyce is prepared to pay a bit extra for Jane? Why do you think this is?

In a CDC environment, the consumer should not be limited by a “standard” menu of services or service providers. Providers and consumers should be thinking about innovative ways to meet the consumer’s goals and care needs. This may involve the use of sub-contracted or brokered services if the home care provider is unable to provide the service/s itself or where the consumer would prefer the service be delivered by a particular worker. Sometimes this may involve additional costs of setting up sub-contracting or brokerage arrangements and these costs should be made clear to the consumer. Whatever is agreed must be affordable within the total budget available for the package. (Source: Home Care Package Programme Guidelines July 2014)

4.5 Activity – other considerations for advisers

1. Can you suggest 2 or 3 key things to bear in mind when working with a consumer with a culturally or linguistically diverse background, especially those with limited English language skills?

2. The needs and preferences of carers and consumers don’t always coincide - have you got any suggestions for how service advisers could handle this?

3. Do you have any suggestions on how to preserve consumers' rights to exercise choice and decision making in a meaningful way when the person has dementia?

4. Older people who identify as lesbian, gay, bisexual, transgender and/or intersex (LGBTI) can sometimes be fearful about sharing this information. Are there any strategies you can engage to work in this sensitive area?

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ABOUT US

Home Care Today is a national resource that aims to support both consumers and Home Care providers to make the most of the implementation of consumer direction in Home Care packages.

Home Care Today supports consumers accessing Home Care by providing information, resources and peer supports to make the most of the benefits and opportunities that CDC can offer.

To providers Home Care Today offers a range of tools, resources, and learning modules that will assist them to implement CDC across their organisations.

Who can I contact for further information or assistance?

Please feel free to contact us for assistance or conversations regarding the implementation of CDC.

Email us at:

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