Community Visitors Scheme (CVS)
POLICY GUIDE
2013-2016
Introduction
Since the commencement of the Community Visitors Scheme (CVS) in 1992, organisations have successfully provided friendship and companionship for recipients of Australian Government subsidised aged care who are socially isolated or are at risk of social isolation or loneliness.

The CVS is available to recipients of Australian Government subsidised residential aged care services or Home Care Packages who have been identified by their aged care provider as experiencing or being at risk of, social isolation whether for social or cultural reasons or because of disability.

The CVS supports organisations to recruit and match volunteers to provide the following types of volunteer visits:

- a one on one visit by a volunteer visitor to a care recipient in an Australian Government subsidised aged care home; or
- a group visit that consists of two or more care recipients at the same time, in an Australian Government subsidised aged care home; or
- a one on one visit by a volunteer visitor to a care recipient in receipt of a Home Care Package.

The CVS aims to ensure that recipients’ lives are enhanced by the visits they receive or the contact they have with CVS volunteers. The anticipated quality of life improvements for the aged care recipients participating in the CVS include:

- increased self-esteem or general feeling of well-being;
- diminished feelings of depression and anxiety;
- increased sense of purpose;
- feeling cared for and/or connected to the community;
- reduced feelings of loneliness and isolation;
- a sense of connectedness to a care recipient’s individual culture;
- a sense of achievement through participation in a one on one relationship;
- a sense of connectedness to other care recipients in the residential aged care home and increased dynamics between the group of care recipients visited; and
- maintenance or increase in independence.

The target group of the CVS are recipients of Australian Government subsidised residential aged care services or Home Care Packages:

- who do not have regular and reasonably frequent positive and engaged contact with friends or relatives;
- who feel very isolated and lonely and would benefit from a volunteer’s friendship/companionship;
- whose frailty or mobility or communication impairments prevent them from participating in social or leisure opportunities; and
- who are socially isolated or at risk of being socially isolated, including if they belong to a special needs group under the Aged Care Act 1997.

This document has been developed as a Policy Guide for CVS auspices, following the expansion of the program through Aged Care Reform. It is supported by a set of Frequently Asked Questions (FAQs) that may be relevant to CVS auspices, Community Visitors, Aged Care Service Providers or aged care recipients. These are available on the Department of Social Services website (www.dss.gov.au).

This Policy Guide identifies the strategic policy direction for the delivery of the CVS from 2013-2016.
Aged Care Reform Context

The 2013 aged care reform agenda: Five Bills formed the aged care reform package of bills that passed into law on 28 June 2013. These reforms represent the commencement of a programme to create a flexible and seamless system for more choice, control and easier access to a full range of services, where aged care recipients want it and when they need it. The aged care system is legislated under the Aged Care Act 1997 (the Act).

One element of these aged care reforms was to provide additional funding to CVS auspices from 2013-14 to increase their capacity to respond to strong demand for volunteer visitors in a range of aged care settings. From 2013, additional funding has been allocated over three years to June 2016 to expand the CVS to include volunteer visits to people receiving Home Care Packages as well as group visits in Australian Government subsidised aged care homes. The increase in funding equates to approximately 3,600 new visitor places per annum. The expansion is intended to leverage off new technology in home care and targets special needs groups as defined by the Act.

Increasingly, older people from diverse backgrounds are entering aged care. In implementing the programme across all three service types, auspices will continue to deliver the CVS in line with the intent of the programme but with a focus on ensuring volunteer visits are also being targeted to special needs groups. These groups have been identified as experiencing, or being at higher risk of social isolation due to circumstances such as language barriers and cultural background.

CVS in Residential aged care settings

One on one visits
From 2013, 143 existing auspices were funded to continue to provide one on one visits to care recipients in Australian Government subsidised aged care homes who are socially isolated or at risk of social isolation or loneliness and would benefit from companionship to June 2016. This funding equates to approximately 7,500 visitor places per annum and continues the provision of one on one volunteer visits to care recipients in Australian Government subsidised aged care homes.

Group visits
The CVS has been expanded to include provision for group visits, to increase the extent to which more people can benefit from companionship.
A group visit includes volunteer/s meeting with two or more care recipients at the same time, in an Australian Government subsidised aged care home. Care recipients who are already receiving a Community Visitor on a one-on-one basis would not qualify to participate in the group visit.

The CVS volunteer should meet all care recipients who have been identified by their aged care provider as needing companionship to ensure a group visit would be of benefit to them. Should a care recipient not be suitable to participate in a group visit, the volunteer should consult with their CVS auspice to determine if it would be more appropriate for a one-on-one visit.

CVS to Home Care Package recipients
A Home Care Package is a coordinated package of services that has been tailored to meet a person’s specific care needs as defined by the Aged Care Act 1997. These services help a person to stay at home, and give them the flexibility to choose how that care and support is provided.
A range of services can be provided, such as personal care (assistance with showering, meal preparation), support services (help with cleaning, home maintenance, or transport) and clinical care (including nursing, physiotherapy and podiatry) as per the Home Care Packages Programme Guidelines.
Under the CVS expansion, Community Visitors may be matched by CVS auspices with people in receipt of a Home Care Package, who have been identified by their aged care service provider as socially isolated or at risk of social isolation or loneliness and needing friendship/companionship.

**Special Needs Groups**
Aged care service providers must now ensure the specific needs and consumer preferences of special needs groups are embedded in delivery of all services. Special needs groups as per Division 11-3 of the Aged Care Act 1997 consist of:

- a) people from Aboriginal and Torres Strait Islander communities
- b) people from culturally and linguistically diverse backgrounds;
- c) people who live in rural or remote areas;
- d) people who are financially or socially disadvantaged;
- e) veterans;
- f) people who are homeless or at risk of becoming homeless;
- g) care-leavers;
- ga) parents separated from their children by forced adoption or removal;
- h) lesbian, gay, bisexual, transgender and intersex people; and
- i) people of a kind (if any) specified in the Allocation Principles.

While it is important for CVS auspices to have an understanding of these nine special needs groups, the key objective of the CVS is to target people who are socially isolated or at risk of being socially isolated. It is acknowledged that social isolation may be more prevalent in some special needs groups (not necessarily all) in some aged care settings including:

- people from Aboriginal and Torres Strait Islander communities;
- people from culturally and linguistically diverse backgrounds;
- Lesbian, Gay, Bisexual, Transgender and Intersex people;
- care leavers (including Forgotten Australians, Former Child Migrants, Stolen Generations); and
- people who live in rural or remote areas.

It should be noted that some people may identify as being from more than one special needs group. There is recognition that some aged care clients may not wish to identify themselves as being from a special needs group as this may be deemed private and sensitive. While CVS auspices are now required to capture and report on the delivery of services to special needs groups, it is understood that there may be barriers in obtaining this information.

In delivering CVS services to these groups, consideration should be given to their specific needs.

**Rural and Remote**
Consumers may be required to move away from their familiar environment in order to access aged care services in rural areas, increasing their risk of social isolation. Community Visitors may need to travel distances to meet with an appropriately matched care recipient. CVS auspices should endeavour to develop good working relationships with aged care service providers in rural/remote communities to promote the CVS for care recipients who may benefit from the programme.

**Aboriginal and Torres Strait Islander People**
It is expected that Aboriginal and Torres Strait Islander people be treated by CVS auspices and Community Visitors in a culturally appropriate manner which is acceptable to both the client and their community. It is desirable that CVS auspices develop a good understanding of the communities in which they operate and communicate this knowledge to their Community Visitors. This will facilitate effective and appropriate visits for the consumer. Auspices should establish links with Aboriginal and Torres Strait Islander community and health services to gain a greater knowledge base of the needs of older people from these backgrounds. Providers are encouraged to explore ways of ensuring visits are culturally appropriate, using guidance from local indigenous communities.
People from culturally and linguistically diverse (CALD) backgrounds

Older people from culturally and linguistically diverse (CALD) backgrounds may seek the company of people who speak the same language, from a similar background with comparable experiences. CVS auspices are expected to have an understanding of the cultural and linguistic needs of older people from CALD backgrounds. This is particularly important in matching consumers with Community Visitors, where requested or deemed by the aged care service provider to be necessary. CVS auspice standards must meet the cultural and linguistic needs of older people from CALD backgrounds. Auspices should establish links with community and health services that support people from CALD backgrounds to gain a greater knowledge base of the needs of these older people. Providers are encouraged to explore ways of ensuring visits are culturally appropriate, using guidance from CALD specific organisations and communities.

Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) people

Older LGBTI individuals may have limited supportive family networks and may not be able to access their community. Community Visitors who have an understanding of older LGBTI peoples’ experiences of historic discrimination and existing care needs can help to make care recipients feel accepted, less isolated and safe in their environment. Auspices should establish links with community services that support older LGBTI people to gain a greater knowledge base of the specific needs of these older people.

National Ageing and Aged Care LGBTI and CALD Strategies

Some older Australians with special needs find it difficult to find company of people who have an understanding of their backgrounds and circumstances and their individual needs. The National Ageing and Aged Care Strategy for people from CALD backgrounds and the National LGBTI Ageing and Aged Care Strategy have identified CVS as an area requiring ongoing review. This will ensure an emphasis of promoting, supporting and maximising access to CVS for older people from these groups.

Delivery of CVS visits 2013-2016

Volunteer visits are delivered for the benefit of aged care recipients and should be viewed as similar to that of a visit from a close friend or family member. These are designed to provide companionship and reduce isolation or loneliness of an older person receiving aged care services, whether in their own home or an aged care facility. CVS auspices should ensure visits are friendly, safe, comfortable and focused on the needs of the individual consumer.

Visits provided by CVS auspices should be delivered in a manner which maintains current working systems and procedures, but furthermore delivers the new policy focus. Delivery must align with the Standard Funding Agreement which sets out Key Performance Indicators (KPIs) and reporting requirements for the 2013-16 funding period. Under the 2013-2016 Funding Agreement, police check requirements continue to be mandatory for voluntary visitors (every three years).

The revised funding agreement between the Commonwealth and CVS auspices sets out the minimum percentage of services to be delivered to people who identify as being from a special needs group. There is recognition that, due to privacy reasons, aged care clients and providers may not wish to disclose sensitive information such as being considered part of a special needs group. The Department acknowledges that this may impact on the ability to meet the exact target. In cases where privacy concerns are demonstrated, CVS auspices are strongly encouraged to communicate the importance of disclosing this information where possible as it is essential to appropriately match visitors to aged care consumers.

There may be a varying degree of success or challenges in targeting special needs groups amongst CVS auspices. A collaborative approach to delivering efficient CVS visits is encouraged by the Department. CVS auspices should continue to communicate and work in partnership with their network members in local regions as well as other states and territories to share strategies and practices which will ultimately result in an improved quality of life for people receiving their services.

CVS National Network Members

CVS Network Members receive funding to represent and support CVS auspices within in each State and Territory. Further information can be found in the Role of CVS Network Members.
Annual CVS Networking Meetings
The Department will support collaboration through annual Network Member meetings. These meetings will provide an opportunity for the Department to update CVS auspices on issues across the aged care portfolio of relevance to auspices and additionally, provide an avenue for auspices to raise discussion with the Department on emerging issues where a resolution could not be determined through collaboration between auspices.

CVS auspices
CVS auspices should develop internal policies and procedures in line with the overarching CVS policy objectives to assist in facilitating the delivery of the programs.

Relationship between CVS auspices and aged care providers
The relationship between CVS auspices and Australian Government subsidised aged care service providers is critical to ensuring the objectives of the programme are being achieved and those who will benefit most are being reached.

CVS auspices need to continue to be proactive in establishing new relationships with aged care providers as well as maintaining strong linkages and continuing to work closely and collaboratively with existing aged care providers.

The Department will support auspices in achieving this through regular promotion and communication with aged care providers, with a particular focus on Home Care Package providers to support the implementation of the expansion.

Privacy and Protection of Personal Information
CVS auspices must observe the Australian Privacy Principles under the Privacy Act 1988 to ensure protection of an individual’s personal information.

CVS Beyond 2016
Information on emerging trends being reported by auspices through the activity reporting, as well as issues raised at the annual networking meetings will be considered in the development of future policy directions of the CVS.