SUSTAINABILITY

The following are important to sustain HC and CC as an integral part of the continuum of care, as part of the existing PHC system.

• Be realistic
• Effective coordination and collaboration between services and sectors
• Interactions between formal services, non-formal, private sector and informal sector.
• Capacity building of both consumers and service providers
• Ensure availability of appropriate resources, equipment, drugs and supplies.
• Continuous support
• Sense of ownership by the community
• Individual and collective leadership
• Dependency not created
• Relevance to local needs
• Integration into existing systems
• Periodic reviews of programme
• Updating programme with new scientific knowledge
• Recognition of responsibility to share information with colleagues within the ethical framework.

STANDARDS FOR HOME-BASED CARE / COMMUNITY-BASED CARE PROGRAMME

STANDARDS OF PROFESSIONAL CONDUCT (GOVERNANCE)

The following standards to be in place:
• A written management plan outlining:
  - mission and objectives of services
  - accountability
  - responsibility
  - lines of communication
• Role clarification (job description) in written form, revised yearly
  - Duty sheet in written form, revised yearly or 6-monthly
  - Staff appraisal done yearly.
• Adequate caregivers (staffing levels) available (planned and unplanned)
• Access to all relevant acts and regulations
• Written contract between roleplayers (current year)
  - admission/discharge/refusal criteria and procedures
  - options of care
  - scope of service to be provided
• Written policy and procedures for:
  - recruitment of caregivers and service providers
  - selection and appointment/hiring
  - staff records, leave, sick leave, injury on duty
  - complaints/grievances procedures for both caregivers and clients
  - code of ethics
  - accidental infection of caregiver
  - confidential information management
• Appropriate records
  - minutes of meetings (at least one per month)
  - all written communication
  - copies of prescriptions for clients
  - case management plans (individualised)
  - procedures of dealing with money/goods
belonging to clients
- injuries, accidents, disciplinary action, complaints, etc.
- equipment utilisation, back-up and maintenance

• Training coordinator appointed
• Written training plan
• Written training status report
• Training needs assessment (yearly)
• Standards for training of care providers
  - caregivers shall be orientated and demonstrate their knowledge during the week immediately following employment
  - first aid should be compulsory
• Coverage for transportation of clients in caregivers vehicles or waiving thereof
• Timely and appropriate written budget (resource allocation) available and communicated
• Internal controls of all resources

STANDARDS: PROVISION OF CARE TO THE CLIENT

The following standards to be in place:

• Minimum response time for emergency care
• - Client safety protocol
  - Waste management protocol

• “Do not resuscitate” and “right to refuse” care policy (Ethics policy)
• Informed consent to treatment or refusal thereof
• A written case management plan activity forms:
  - response to changed need/unmet need.
  - based on best practice treatment protocols.
- cultural sensitive
- agreed on by client/legal guardian/carer.
- Proof of client interaction or interaction with a moral agent (advocate) of choice.
- Infection control procedures
- Written document on the rights of the client
  - proof of communication of rights to client and carer
  - proof of communication of responsibilities of client
- Intermittent service, 24 hours a day, 7 days a week plan for those that need such treatment.
- Written referral system with direct contact numbers available to client and carer
- A local home-based care coordinator appointed
- Protocol regarding smoking in client’s homes
- Indicators and procedures to measure (monitoring and evaluation)
  - appropriateness of care
  - acceptability of care
  - provider competence
  - cost effectiveness
  - continuity of care
  - access to health professionals
  - access to drugs, supplies, assistive devices, medical devices
  - access to information/communication
  - consumer satisfaction
  - standards of practice met as per protocol

STANDARDS: SUPPORT SERVICES TO CARE GIVERS

- Supervisor appointed
- Safety protocol for:
- equipment, supplies and environment
- potential hazardous occurrences
- service delivery during disasters
- high risk situations and clients
- management of hazardous waste

• Written performance, review procedures and records
- service delivery during disasters
- high risk situations and clients

• Emergency plans
- at home of client
- within the system
- staff recall system

• Accessibility lines to information, communication
• Clinical consultants or mentors appointed/identified.
• Written disciplinary procedures/aid.
• Caregiver relief plan. (Respite care)
• Caregiver support plan e.g. social assistance, counselling services and bereavement plan.