



## Catch Up Chat with Sophie - CHSP Sector Support and Development

April 2016

We've had a busy month with lots of great discussions and work going on as we transition to the new wellness and reablement My Aged Care era plus watch the roll out of NDIS in the Northern Sydney region coming up in July.

### Highlights from Subregional Forums

It was interesting to note at the Hornsby Kuringai Subregional Forum Ken Johnson from the RAS said that the expected referrals to My Aged Care for the Northern Sydney region were down by approximately 50%. You may see this reflected in your own referrals.

### More support for Aboriginal sector and community

I am delighted to announce that my Sector Support and Development role will more closely focus on Aboriginal Aged Care Sector Development in the Northern Sydney Region. Watch this space for Aboriginal events, projects, services, strategies and cultural opportunities.

Did you know National Sorry Day is 26 May every year since 1998? This date marks the one year anniversary of the *Bringing Them Home* report on the inquiry into Aboriginal and Torres Strait Islander children removed from their families. Many older Aboriginal and Torres Strait Islander people today are part of this stolen generation or have felt the effects of the practice. Find out more about this important day at [www.australia.gov.au/about-australia/australian-story/sorry-day-stolen-generations](http://www.australia.gov.au/about-australia/australian-story/sorry-day-stolen-generations). The date also marks the start of the Guringai Festival each year here on the North Shore and Northern Beaches.

### Workshop

A peer supported workshop is being organised to discuss solutions to working with referrals, assessments, the portals and service finder. There is no tutor for this workshop, rather participants will share how they manage issues. Participants will be asked to contribute areas of concern prior to the workshop. I am calling for peer leaders to share at the workshop a solution or approach they have found to be useful.

**Dates:** Choose Thursday 12 May, 1pm – 4pm or Tuesday 17 May, 1pm – 4pm

**Venue:** Northern Beaches Community College, Narrabeen Annex – 1525 Pittwater Road, North Narrabeen  
Parking – in Lake Park Road carpark across the road from College. From the south - turn right at lights just after the college (Fitness Centre is visible from the road). From the north - turn left at the lights just before the College.

**Cost:** free

**Bookings:** [www.trybooking.com/KUNM](http://www.trybooking.com/KUNM)

People attending will need to have administrator status in the My Aged Care Portal. Attendees will need to bring their Auskey and password details as we will be accessing the portal. Confidentiality issues will need to be discussed.

Contact myself Sophie Davis, for more information [sdavis@hornsby.nsw.gov.au](mailto:sdavis@hornsby.nsw.gov.au).

*This workshop is run with kind assistance from Northern Beaches Community College*

Don't forget: My Aged Care provider and assessor helpline 1800 836 799 and resources available at <https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/programs-services/my-aged-care/information-for-service-providers>

### Joining Home Care packages and CHSP

The second stage of the aged care reforms will integrate the Home Care Packages Programme and the Commonwealth Home Support Programme into a single care at home programme, from July 2018. These changes move towards a future aged care system that is more consumer-driven, market-based and less regulated.

*Source:* <https://www.dss.gov.au/ageing-and-aged-care/programs-services/home-care/home-care-packages-reform/increasing-choice-in-home-care>

## **Allocation of packages should relieve pressure on entry level services**

The results of the 2015 Aged Care Approvals Round (ACAR) were released on 18 March 2016. Whilst less new home care places were allocated all together, more Level 3 and 4 places were allocated than the previous year. Of the 6,445 home care places 5,995 are Level 3 and 4 packages, an increase of 2,129 places (55%) compared to 2014 which should ease the burden on entry level CHSP services. However, 126,808 places were sought by providers. This is 1 place available for every 20 sought.

REMEMBER: The first stage of the aged care reforms from February 2017, will see home care funding packages attached to an individual, rather than a provider. *Source: <https://www.dss.gov.au/ageing-and-aged-care/aged-care-funding/aged-care-approvals-round-acar/results-of-the-2015-aged-care-approvals-round-acar>*

## **Responses from the Department**

I recently wrote to the Department of Health regarding clients being put off by the amount of assessment for entry level services and a few other issues. The response and comments (almost in full) follow –

*(The Dept)* ...Screening is conducted by MyAgedCare contact centre staff via telephone after registration..... An assessment tool is followed and a client record is created ..... If the assessment identifies more than basic (entry level) needs, the client is referred to full assessment by ACAT. If entry level is suitable, the client is referred for a face-to-face assessment by RAS. After screening, or face-to-face assessment, client's referral is either sent to their nominated provider or broadcast on MyAgedCare ..... and/or in limited circumstances, clients may be referred directly to services if their needs are episodic or related to a specific one-off event. In other words, the client's ability to live independently is compromised temporarily (such as while recovering from minor illness or injury). The services referred to should be for a one-off intervention (such as transport to a GP appointment) for a short period of time only and not ongoing service provision. Noting that already, all the client's other needs are being met sustainably.

*(The Dept)* ....MyAgedCare contact centre staff can bypass RAS if they think the client's needs are urgent, they will arrange for a RAS follow-up assessment at a later date.

*(The Dept)* ... The client ultimately determines which service provider he/she accepts.

*(The Dept)* ...existing clients who have already been registered with MyAgedCare should be referred back for re-assessment (*in the situation where a client's circumstances change and they need new or different services*).

*And our conversation continues.....*

*(Sophie)* Providers have told me that people are refusing service as they find the assessment process too onerous and confusing.

*(The Dept)* Feedback noted – it is recommended that service providers have sufficient resources and strategies in place to educate clients regarding the process for accessing services.

*(Sophie)* They recognise that it is important to get people into the entry level services such as social support or gardening and this needs to be as smooth as possible. They also recognise that most people will need more than one service but it needs to be done gradually.

*(The Dept)* Clients who are identified through the assessment as requiring multiple services can choose to receive one or multiple services at their own pace.

*(Sophie)* A new client to a service, who is not currently registered with MyAgedCare, wanting one service only such as meals on wheels or gardening for a short time (men's social support was raised as an example by a provider recently), can have the referral form to MyAgedCare completed by the provider and submitted by the provider.

*(The Dept)* This is an inbound referral sent on behalf of the client. In other words the client is still referred to MyAgedCare for registration and assessment to check their eligibility and to create a client record, if this hasn't been done already.

*(Sophie)* I suspect what is happening is that if a person wants a service they are largely told by a provider that they need to call and register with MyAgedCare first.

*(The Dept)* Service providers can help facilitate registration as per point 1 above

*(Sophie)* Once the person calls the contact centre at MyAgedCare they are referred to the RAS quite quickly and put through the assessment process, even if they only initially want one service.

*(The Dept)* This is correct

*(Sophie)* Hence, my initial question to you regarding the contact centre.

*(Sophie)* If an older person tells the MAC Contact Centre that they only want one service will this assist the process and possibly skip the RAS assessment?

*(The Dept)* No, while this will be taken into account during the screening process it won't necessarily mean the person will be able to skip a RAS assessment.

*(Sophie)* There is concern from the providers that there is over assessment and therefore at times over service provision.

*(The Dept)* Following feedback from the aged care sector the department and MyAgedCare are currently reviewing the assessment processes.

*(Sophie)* Also is there any way that we can have a discussion with the contact centre to decrease the number of referrals, where people only want one service, going to a RAS?

*(The Dept)* The MyAgedCare contact centre follows set protocols and a single discussion is unlikely to change current procedures.

*(The Dept)* The role of RAS is to ensure consistency in assessment and support access to services. As I mentioned above, the department and MyAgedCare are currently reviewing the assessment processes with a view to addressing some of these concerns.

### **System release**

A new My Aged Care system release that was scheduled for March is now 4 April 2016. Changes include:

- The ability for assessment organisations to transfer referrals to other assessment organisations
- The ability to add, review and remove attachments in each portal; and
- Improved My Aged Care contact centre processes, for example, streamlining the screening process.

These changes should improve the initial screening process for a client.

*Source: Email update My Aged Care Operational Control 21/03/16*