

Department of Health and Aged Care

Australian Government

Residential Aged Care Funding Reforms

17 November 2022



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24/4 registered nursing: <u>https://www.health.gov.au/initiatives-and-programs/aged-care-247-</u>

registered-nurse-requirement

> health.gov.au/aged-care-reforms

Agenda

- 1. Independent Health and Aged Care Pricing Authority
- 2. Services Australia statements, claims and payments
- **3.** Palliative care entry process
- 4. 24/7 registered nursing requirements
- **5.** Care minutes
- Q&A
- Next steps

Progress of residential aged care funding reform

1. Start of AN-ACC funding model on 1 October 2022

2. Start of Transition Fund on 1 October 2022

3. Legislation passed for 24/7 registered nurse requirements on 27 October 2022



Section 2

Providing advice on residential aged care costing and pricing

Independent Health and Aged Care Pricing Authority

Joanne Fitzgerald A/g Chief Executive Officer

Genevieve Donnelly Executive Director, Aged Care Policy & Communications Branch





Outline

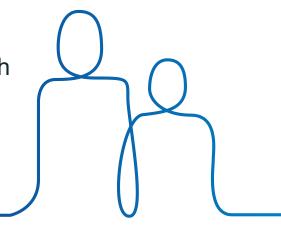
- Background to IHACPA
- Our role in aged care costing and pricing
- Developing advice
- Developing the Pricing Framework for Australian Aged Care Services





Background

- Established in 2011 as the Independent Hospital Pricing Authority (IHPA) under section 129 of the *National Health Reform Act 2011* (the NHR Act).
- Established to promote improved efficiency in, and access to, public hospital services through provision of independent advice to Australian governments.
- IHACPA determines and publishes pricing for Australian public hospital services
 - National efficient price for activity based funding (ABF).
 - National efficient cost for block funding of services not suitable for ABF, such as small rural hospitals.
- Renamed the Independent Health and Aged Care Pricing Authority (IHACPA) in August 2022







IHACPA's role in aged care

- Recommendations of the Royal Commission into Aged Care Quality and Safety
 Independent pricing authority for aged care services.
- The Aged Care and Other Legislation Amendment (Royal Commission Response) Act 2022 (Cwlth) amended:
 - National Health Reform Act
 - Aged Care Act
- IHACPA will provide advice to the Commonwealth for 1 July 2023.
- Represents part of larger sector reform measures.







IHACPA's approach to developing residential aged care costing and pricing advice





The costing and pricing cycle Costing Data Analyse cost of residential aged care services Regular activity data collections Costing studies \$ \$ Pricing Classification Review and potential refinement of classification Analysis of cost and activity data Pricing advice to Government Policy Annual public consultation **Refinement of Pricing Framework** HACPA



Developing a Pricing Framework for Australian Aged Care Services



Version 1.0 August 2022 Independent Health and Aged Care Priving Au







Pricing Principles

Overarching principles

- Access to care
- Quality care
- Fairness
- Efficiency
- Maintaining agreed roles and responsibilities



Process principles

- Administrative ease
- Stability
- Evidence-based
- Transparency



System design principles

- Fostering care innovation
- Promoting value
- Promoting harmonisation
- Minimising undesirable and inadvertent consequences
- Activity based funding pre-eminence
- Recipient based



Proposed future priorities

These include:

- Refinement of residential respite pricing
- Consideration of whether hotel costs could and/or should be incorporated in AN-ACC
- A review of the one-off adjustments for new residents
- Consideration of how Multipurpose Service and National Aboriginal and Torres Strait Islander Flexible Aged Care Program funding could be aligned to the AN-ACC funding model
- Following future reforms, development of costing and pricing advice for home care







Connect with us

Subscribe to our mailing list to receive updates on our work developing aged care costing and pricing advice.

Further information

To learn more about the Independent Health and Aged Care Pricing Authority, get in touch with us via the details below.

(02) 8215 1100

enquiries.ihacpa@ihacpa.gov.au



() www.ihacpa.gov.au





Independent Health and Aged Care Pricing Authority



@IHACPA

Section 2

Residential Aged Care Funding Reform AN-ACC - Aged Care Payment System changes

Angela Tulk – Director, Aged Care Transformation Branch



Key topics

- ACFI end dating
- AN-ACC claims processing
- System feature changes
- Reconciliation of bank statements
- **NAPS ID**
- Provider education material

Background

- As part of the Residential Aged Care Funding Reform (RACFR), Services Australia launched the Aged Care Payment System (ACPS) for residential aged care on 20 August 2022.
- Changes in October 2022 included features to support the new Australian National Aged Care Classification (AN-ACC) funding model and some enhancements to functionality in the ACPS.
- From 1 November 2022, the first AN-ACC claims were lodged.

AN-ACC claims process

- The process for claim finalisation in the Aged Care Provider Portal (ACPP) has not changed for AN-ACC.
- Services Australia are taking a cautious approach for processing claims to ensure calculations are occurring correctly.
- The result of the October claim checking process means it may take a little longer for the approval of claims.
- In future, our internal process will be simplified enabling more timely processing and payment of claims

ACFI end dating

- ACFI has been end dated
- The current claims for October and November are now displaying AN-ACC
- Every care recipient will have their current ACFI end dated as of 30 September 2022
- This can be seen on the ACFI summary screen



Care Recipient AN-ACC classification

Australian National Aged Care Classification (AN-ACC) summary

Current AN-ACC classifications

AN-ACC classification	Classification type	Care type	Care sub-type	Start date 🍦	End date 🖕	Created date	Last updated
Class 12	Assessment	Residential Care	Permanent Care	01/04/2022	_	04/09/2022	10/09/2022
listorical AN-ACC cla	ssifications						
AN-ACC classification	Classification type	Care type	Care sub-type	Start date 🍦	End date 🍦	Created date	Last updated
No records available							

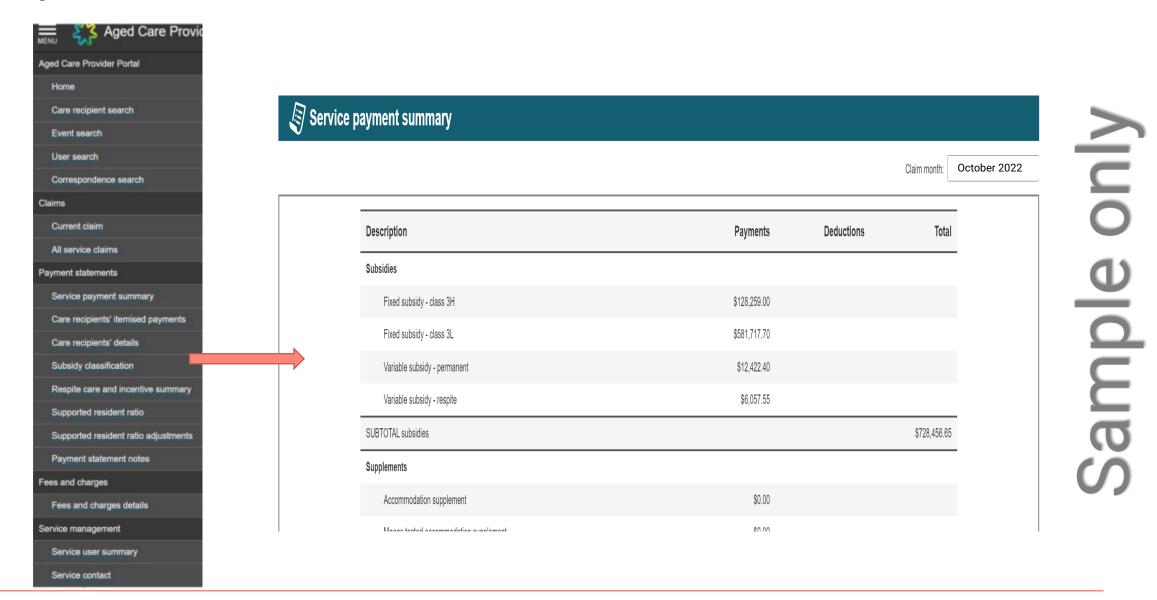
Service AN-ACC classification



Payment statement – what stays the same

- General look of the payment statement
- Subsidies and supplements are displayed in separate sections
- Payments are itemised to individual care recipients
- Care recipient details will still be viewable for all care recipients
- Payment statement notes are viewable
- ACFI details and their corresponding columns will continue to display if there are adjustments relating to ACFI payments
- CSV and XML versions of the payment statement are available for download.

Payment statement – what is new



SERVICES AUSTRALIA

Service payment summary

Transitional accommodation supplement\$0.00Veterans supplement\$0.00	
Transitional accommodation supplement \$0.00	
Respite accommodation supplement \$1,124.55	
Pensioner supplement \$0.00	
Oxygen supplement \$0.00	
Initial entry adjustment payment \$0.00	
Hardship means tested accommodation supplement \$0.00	
Hardship BDF supplement \$0.00	
Hardship accommodation supplement \$0.00	
Ex-hostel supplement \$0.00	
Enteral feeding supplement \$0.00	
Concessional supplement \$0.00	
Clean energy supplement \$0.00	
Accommodation charge top-up supplement \$0.00	
Means tested accommodation supplement \$0.00	
Accommodation supplement \$0.00	

Supplements

Service payment summary continued

	SUBTOTAL subsidies, supplements and adjustments	\$754,835.30
•	Outstanding balance and advance	
	Outstanding balance from February 2021	\$0.00
	Advance	\$0.00
	SUBTOTAL outstanding balance and advance	\$0.00
	Payment held over	\$0.00
	TOTAL amount paid to provider	\$754,835.30

Special payments		
Special payment made on 19/04/2021	\$150.25	
Special payment made on 18/04/2021	\$150.25	
TOTAL amount paid to provider		\$300.50

Care recipients itemised payments

Search Search using any keyword in the table. To search for multiple														Legend
	ble keywords, provide a space bet													Legend
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	ole keywords, provide a space bet										Clain	n month: Aug	ust 2022	~
	sie keywords, provide a space ber	twoon words												
	_										Filter by	All	Respite	Permanent
Care recipient				Р	Paid leav	ve days	s	Unpaid						
		▼		ļ.,,				da	ys					1
ID Family name Given name	Payment type Rate eff		t Adjustments for claim month	SL	HP ≜	TC ≜	EL	SL	TC	Paid care days 🛓	Non claimable days	Rate per day	Subtotal	Total
	ubsidy - Pending ion (Class 99) 01/07/201	019 Current			11			×		20		\$117.07	\$3,629.17	\$6,922.30
Fixed sut	sidy - Class 6 01/07/207	019 Current								31		\$106.23	\$3,293.13	
412841324 HoweWnyi EmelysVnH	subsidy - Class 3 01/07/201	019 Current		5						26		\$67.21	\$2,083.51	\$5,376.64
	sidy - Class 6 01/07/207	019 Current								31		\$106.23	\$3,293.13	\$0,010.01
Variable	ubsidy - Class 2 01/07/201	019 Current								26		\$41.19	\$1,070.94	
412841333 KuhlmanxmhC RosieKjky Variable	ubsidy - Class 2 01/07/207	019 Current						5				\$0.00	\$0.00	\$3,832.92
Fixed sub	sidy - Class 6 01/07/201	019 Current								26		\$106.23	\$2,761.98	
	ubsidy - Pending ion (Class 100) 01/07/207	019 Current								31		\$87.59	\$2,715.29	
classifica		019 Current								31		\$106.23	\$3,293.13	\$7,039.48
	sidy - Class 6 01/07/207	Guirein										\$1001E0		

Care recipients' itemised payments continued

ID	Family name	Given name	Payment type	Rate effective date	Entitlement type	Adjustments for claim month	SL	HP \$	TC ≜	EL \$	SL	тс	Paid care days 🖕	Non claimable days	Rate per day 🖕	Subtotal 🍦	Total
			Respite accommodation supplement	01/07/2020	Adjustment	February 2021							27		\$31.86	\$860.22	
2856591	RodriguezqyqL	ViviannesIOM	Variable subsidy - class 99	01/07/2019	Current								30		\$117.07	\$3,512.10	\$3,512.1
			Variable subsidy - class 11	01/07/2019	Current								30		\$179.94	\$5,398.20	
			Variable subsidy - class 11	01/07/2019	Original	March 2021							-15	-7	\$179.94	-\$2,699.10	
<u>2856597</u>	RunteWbZq	PierrehJTB	Variable subsidy - class 11	01/07/2019	Adjustment	March 2021							16		\$179.94	\$2,879.04	\$7,425.2
			Variable subsidy - class 99	01/07/2019	Adjustment	March 2021							6		\$117.07	\$702.42	
			Initial entry adjustment payment	01/07/2019	Adjustment	March 2021										\$1,144.70	
			Variable subsidy - class 103	01/07/2019	Current								30		\$187.32	\$5,619.60	
			Respite accommodation supplement	20/03/2021	Current								30		\$32.13	\$963.90	
			Variable subsidy - class 103	01/07/2019	Original	March 2021							-15	-6	\$187.32	-\$2,809.80	
			Variable subsidy - class 103	01/07/2019	Adjustment	March 2021							16		\$187.32	\$2,997.12	
			Variable subsidy - class 100	01/07/2019	Adjustment	March 2021							5		\$87.59	\$437.95	
0050500	Malland and		Enteral feeding supplement	01/07/2020	Original	March 2021							-15		\$18.98	-\$284.70	A7 404
<u>12856598</u>	WalkerLxap	WymanwWTG	Enteral feeding supplement	01/07/2020	Adjustment	March 2021							12		\$18.98	\$227.76	\$7,494.
			Enteral feeding supplement	01/07/2020	Adjustment	March 2021							8		\$18.98	\$151.84	
			Respite accommodation supplement	01/07/2020	Original	March 2021							-3		\$31.86	-\$95.58	
			Respite accommodation supplement	01/07/2020	Adjustment	March 2021							5		\$31.86	\$159.30	
			Respite accommodation supplement	01/07/2020	Adjustment	March 2021							4		\$31.86	\$127.44	
																TOTAL	\$33,923.

Show All 🗸 records - Showing 1 to 33 of 33 records

Download payment statement

only

ample

Care recipients itemised payments continued AN-ACC with ACFI retro 🖉 Care recipients' itemised payments Legend Claim month: April 2021 Search Search using any keyword in the table. To search for multiple keywords, provide a space between words. 0 Filter by All Respite Permanent Care recipient Paid leave days Unpaid leave days ID SL HP TC EL SL TC Non claimable Family Given Payment type Rate effective Entitlement Adjustments for Appraisal Paid care Rate per Subtotal Total name name date type claim month payment indicator days davs day Variable subsidy -01/07/2019 31 \$3,629,17 Adjustment January 2021 \$117.07 class 99 Variable subsidy -412855324 01/07/2019 31 \$117.07 \$3,629,17 \$22,817,47 LarkiniJYf CydneywkMe Adjustment December 2020 class 99 Adjusted subsidy 01/09/2020 November 2020 DEFAULT 30 \$0.00 \$0.00 Adjustment - DNA Variable subsidy -01/07/2019 30 \$3.512.10 Current \$117.07 class 99 \$8,292,60 412855320 MooreDxHM VItoKGGU Fixed subsidy -01/07/2019 15 \$1,788.60 Current \$119.24 class 7 TOTAL \$81.854.44 Show 5 ∨ records - Showing 21 to 25 of 34 records First Previous 5 Next Last 6

CSV

XML

Care recipients' details

Claims Payment statements

•	🖉 Ca	re recipient	ts' details												
															Legend
														Claim month:	October 2022 V
	Search Search using ar	y keyword in the tak	 ble. To search for m	ultiple keywords	, provide a space	e between	words.								
													Fi	lter by All	Respite Permanent
Ο		Care recipient		Admissi	on details				AN-	ACC				Days remain	ing
	ID 🛓	Family name 🖕	Given name	Entry 🍦	Departure 🍦	RCT 🛔	SR 🌲		Classification	Effective date	Room type 🛔	Compensation	Respite care 🍦	Social leave 🖕	Transition care leave
Φ	412856593	CassinwKdj	WaltonQMFo	04/02/2021		STD		R	Class 99	04/02/2021				52/52	
	412856594	ProsaccoVyfN	VellaCLyr	02/02/2021				Н	Class 100	01/01/2021			0/63		
\bigcirc	<u>412856591</u>	RodriguezqyqL	ViviannesIOM	01/01/2021		STD		R	Class 99	01/01/2021				52/52	

Show 10 v records - Showing 1 to 5 of 5 records \mathbf{r}

PierrehJTB

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Download payment statement

12/63

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001A

16/03/2021

16/03/2021

Supported Resident Ratio

	Claim month: April 2021 🗸 🗸
Description	
Supported resident ratio met?	No
Total number of payable days of eligible care recipients receiving supplements	0
Total number of payable days of eligible care recipients receiving basic subsidy	90
Supported resident ratio %	0.00

Supported Resident Ratio Adjustments continued

Claims Payment statements

	Claim month: April 2021 🗸 🗸
	*Adjustment month: March 2021 ~
Description	
Supported resident ratio met?	No
Total number of payable days of eligible care recipients receiving supplements	0
Total number of payable days of eligible care recipients receiving basic subsidy	66
Supported resident ratio %	0.00

Download payment statement

XM

17 NOVEMBER 2022

Services Australia supported browsers

We recommend the following minimum browser versions to use with PRODA:

- Firefox 72.x
- Google Chrome 80.x
- Microsoft Edge 79.x
- Safari 14.x.

Older versions or other browsers may work but may not display correctly and are not tested or supported.

Using updated Aged Care payment descriptions to reconcile payments received

Residential Aged Care payment descriptors have changed since the implementation of RACFR*. This resource will assist you to reference payments received for claims and advances in the Aged Care Provider Portal, the Portal

The bank statement will display the following details...

Example bank statement shows Claim (CL) and Advance Payment (AP) using relevant NAPS** ID.

If several services are paid to the same account, the NAPS ID can be referenced.

	DATE	PARTICULARS	WITHDRAW	DEPOSIT
		Balance Forward	0.00	0.00
	13-May-2022	Direct Credit 002221 AC-PAYMENT CL-RAC0-00 <u>60501</u>	0.00	13,190.10
õ	02-Jun-2022	Direct Credit 002221 AC-PAYMENT AP-RRC0-00 50501	0.00	5,500.00
2	14-Jun-2022	Direct Credit 002221 AC-PAYMENT CL-RACO-00 60501	0.00	23,162.90
3	13-Aug-2022	Direct Credit 002221 AC-PAYMENT	0.00	79,511.12
		Direct Credit 002221 AC-PAYMENT AP-RACO-00 <u>60501</u>	0.00	5,500.00
1	14-Sep-2022	Direct Credit 002221 AC-DAYMENT CL-PRC0-0050501	0.00	27.685.27
		e viewed via the Portal to cro		
he total amo	ount paid to	p provider will match with the re	elevant pay m	nonth and an
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he total amo	ount paid to Payment stat	o provider will match with the re tements	elevant pay m	tements Clair
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Claims P SERVICE	ount paid to Payment stat	tements Claims	Payment sta	tements Cleir nt summar
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Claims P SERVICE vice claims month	Payment stat	e provider will match with the re tements ised = 2 2	Payment sta	tements Clair nt summar ance April 2022

TOTAL amount paid to provider

17 NOVEMBER 2022

* Residential Aged Care Funding Reform ** National Approved Provider System

29/08/2022

29/08/2022

2

May 2022

April 2022



statements

Infographics

How to reconcile payments received

against your payment statement

Colour coded to provide clarity and

service payment summary and bank

linkages between the Payment statement,

ist 2022

\$0.00 -\$5,500

-\$5,500

\$27,685.27

hpe.servicesaustralia.gov.ar

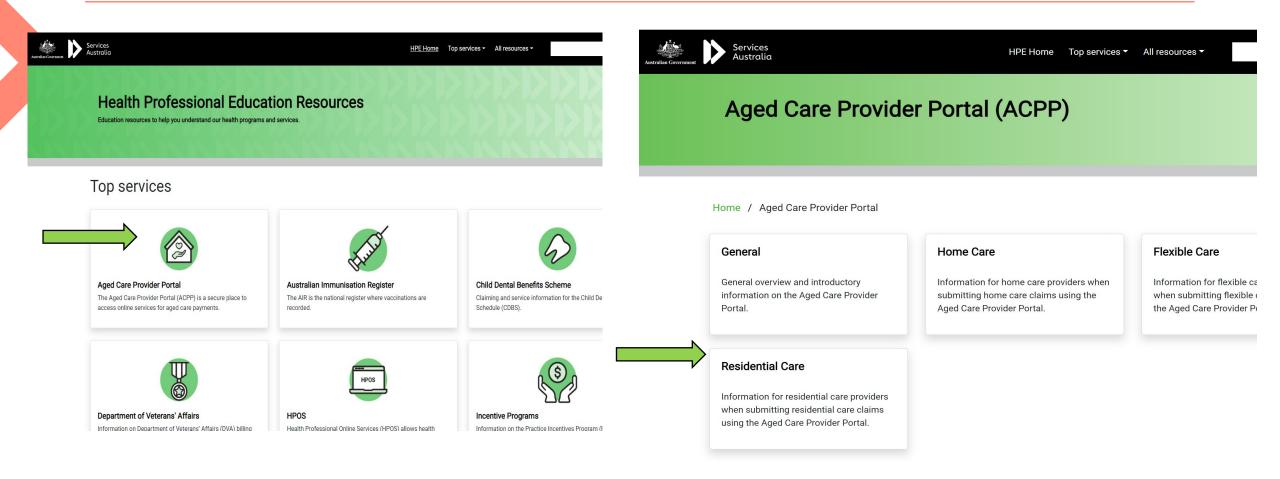
\$0.00

NAPS ID

Following the launch of the Aged Care Payment System, services will need to view and use their 'service ID / NAPS ID in most circumstances

The service RACS ID will display in some places on the system - BUT you will need to use you NAPS ID in most search fields

Health Professionals – Provider Education Resources



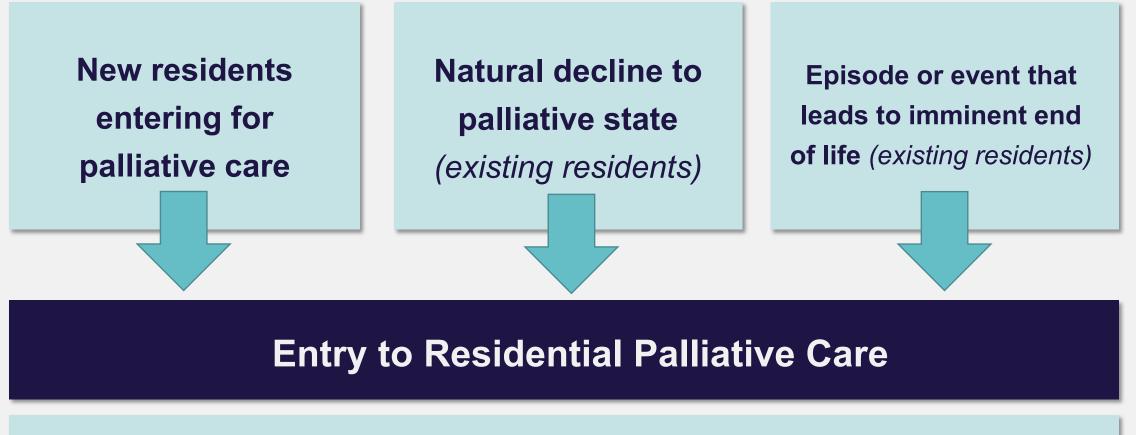
Educational resources are available on Health Professional Education Resources Gateway:

<u>Health Professional Education Resources (servicesaustralia.gov.au)</u> <u>Aged Care Provider Portal (ACPP) - Health Professional Education Resources (servicesaustralia.gov.au)</u> Section 3

Palliative care entry process

Robert Montefiore-Gardner – Director of Funding Regulation

Palliative care entry – three methods of entry



Email: ANACCAssessments@health.gov.au

Palliative care entry – Palliative Care Status Form



Palliative Care Status Form For individuals entering residential aged care after 23 July 2022 for the purpose of receiving palliative care

Purpose of this form

This form is used by the Department of Health and Aged Care (the Department) to determine whether an individual entering a residential aged care service for non-respite care has palliative care status for classification and funding purposes.

To be eligible for *palliative care status*, the individual <u>at the</u> <u>date of entry</u>, must have:

- a life expectancy of 3 months or less, AND
- an Australia-Modified Karnofsky Performance (AKPS) score of 40 or less.

That life expectancy and the AKPS score must have been given by a medical practitioner or nurse practitioner operating within their scope of practice, using this approved form, prior to the date the individual enters the aged care service for non-respite care.

Who should fill out this form?

Part A and Part B of this form must be completed and signed by a medical practitioner or nurse practitioner who is not an employee or contractor of the residential aged care service and prior to the date the individual enters the aged care service for non-respite care.

Part C of this form must be completed and signed by a representative of the residential aged care service where the individual will reside.

Part D of this form must be reviewed and signed by the person who will be receiving palliative care at the aged care service recorded in Part C (or their authorised representative).

Instructions for completing this form

This form should be printed out and completed in black or blue pen, using capital letters, as outlined below.

- A medical practitioner or nurse practitioner should complete Parts A and B, including signing and dating Part B, and retain a PDF copy for records purposes.
- A copy of the form should be given to the individual (or their representative) and to the proposed aged care service (if known).
- The aged care service is responsible for completing Part C and submitting a copy of the completed form, including the consert at Part D.
 Department of Health and Aged Care - Residential Aged Care: Paliative Care Status Form Version 10.23 July 2022

Submitting the completed form The completed form must be submitted to the Department

by a representative of the residential aged care service that will be providing the paliative care, within 14 days of notification of entry to the Department via the My Aged Care Service Provider Portal.

The date of the medical assessment noted in Part A should be less than 3 months prior to the date of non-respite entry into the residential aged care service identified in Part C.

All fields on this form must be completed unless stated otherwise.

Privacy and your personal information

Your personal information is protected by law, including the *Privacy Act* 1988 and the Australian Privacy Principles. The Department is collecting personal information in this form for the primary purpose of determining the palliative care status of individuals entering residential aged care.

The Department may share information collected in this form with medical practitioners and staff of the residential aged cars eavies where an individual resides or intends to reside, so care can be provided that is appropriate to the individual's circumstances and needs, including the use of funds as required under the *Aged Care Act* 1997.

By providing your personal/sensitive information to the residential aged care service provider, you consent to the Department collecting that information about you from the provider for the purposes indicated above.

The medical practitioners and aged care service provider, who may collect personal information contained in this form, are also subject to privacy obligations.

Further information and assistance

For any questions regarding this form, including the Department's Privacy Policy, please contact the Department by telephone on (02) 6289 1555 or freecall 1800 020 103, or complete the online enquiries form at www.health.gov.au/about-us/contact-us/general-enquiries.

Parts A and B

completed by an

independent

Medical Practitioner or

Nurse Practitioner

Parts C and D completed by

- the person (or their representative) AND
- the person's provider

Palliative phases: Stable, Unstable, Deteriorating, Terminal



https://www.health.gov.au/resources/publications/ palliative-care-status-form

Palliative care scenarios - 1

If the person is palliative but doesn't meet the criteria?

Resident will be referred for AN-ACC assessment



What happens if the person dies before a decision is made?

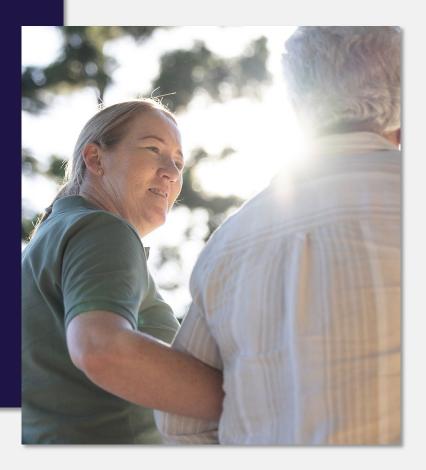
Provider will receive the default rate, which is the same as the Class 1 rate (\$216.80)

Palliative care scenarios - 2

What happens if an existing resident becomes palliative?

If a resident who becomes palliative after entry, the provider can request a reclassification of that resident.

A resident in such circumstances may receive a higher classification – class 13 which is equivalent to a class 1



Palliative care scenarios - 3

What happens if the resident lives longer than 3 months?

The provider receives palliative care rate of funding to care for the resident until they depart the service or the provider or resident requests a reclassification.



Section 4

24/7 registered nursing requirements

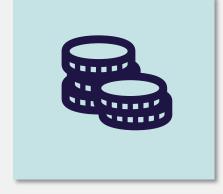
Claudia Dukats – Director of Policy and Care Minutes

24/7 registered nurse requirement details



Requirement

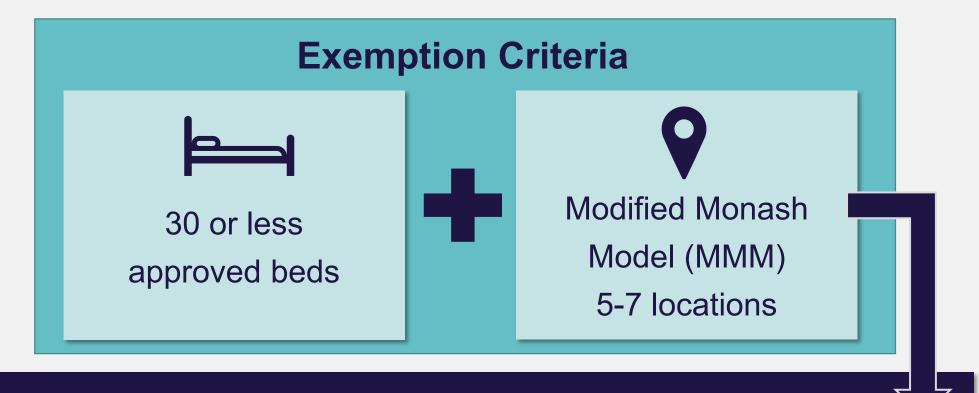
From 1 July 2023 - approved residential aged care services must have a **registered nurse on-site and on duty 24-hours a day, 7 days a week**



Supplement

Residential aged care services with 60 residents or less based on **occupied beds** - are eligible for a funding supplement to employ extra RNs to deliver 24/7 RN care

24/7 registered nurse exemption



Eligible for a one-off 12-month exemption from the 24/7 RN requirement



24/7 registered nurse supplement

Additional funding for residential aged care services with 60 or less occupied beds to provide an RN on-site and on duty 24/7



Available to eligible providers from 1 July 2023

Two supplement tiers/rates (based on the location of the service):

- Metro services (MMM 1- 4)
- Rural, remote, and very remote services (MMM 5-7)

 \checkmark

No application required



24/7 registered nursing reporting





Providers must report monthly on all periods of 30 minutes or more where an RN is not on-site and on duty

24/7 registered nursing examples - 1

What happens if I miss the 24/7 monthly reporting?

It will impact on your funding, and supplement funding if you are eligible, and all services will be reported to the ACQSC.



If a service had 29 occupied beds one month, and was located in a MMM 7 location, and qualified for the specialised homeless base care tariff, would this be accepted for an exemption?

The exemption policy is based on approved beds, not occupied beds. Base Care Tariff is not a factor for exemption.

24/7 registered nursing examples - 2

If my service has 30 approved beds and is located in a MMM 6 location, how do I apply for an exemption?



1 April 2023 - exemption
process will open.
Email will be sent to eligible
services asking for a response,
including an acceptance and
signed statement.
Responses will be due by 30
April 2023.

<u>https://www.health.gov.au/initiatives-and-programs/aged-care-247-registered-nurse-requirement</u>

<u>https://www.health.gov.au/health-topics/aged-care/providing-aged-care-services/funding-for-aged-care-service-providers/247-registered-nurse-supplement</u>

health.gov.au/aged-care-reforms

Section 5

Care minutes updates

Claudia Dukats – Director of Policy and Care Minutes

24/7 registered nursing and care minutes comparison

		24/7 nursing	Care minutes
Purpose	$\mathbf{\Psi}$	Continuous resident access to high level care from RN	Increase time of direct care for residents
Includes RNs		\checkmark	\checkmark
Target Introduction	Ø	×	1 October 2022
Mandatory Requirement	-	1 July 2023	1 October 2023
Funding Mechanism	T	Separate Supplement	Via AN-ACC
Reporting		Monthly by Exception	ACFR and QFR
Star Ratings	★★☆	\checkmark	
Exemption	•1 Ľ•	\checkmark	X

A health.gov.au/aged-care-reforms

Care minutes definitions – RN and EN

Government will provide \$5.4 billion over 4 years from 1 October 2022 to fund care minutes and additional \$1.9 billion from 2024-25 to increase to the average of 215 minutes care minutes

Registered nurse (RN)

- Registered with AHPRA

Duties include

- assessing patients
- developing a nursing care plan
- administering medicine
- providing specialised nursing care

Enrolled nurse (EN)

- Registered with AHPRA

Duties include

- regularly recording patients' temperature, pulse, blood pressure, and respiration
- providing interventions, treatments, and therapies from patient care plans
- assisting RNs and other team members with health education activities
- helping patients with their activities of daily life

Care minutes definitions – personal care worker

Personal care worker

Duties include

- daily living routines and direct care activities (such as self-care or personal care)
- social and emotional support for residents and their families
- regular monitoring and support of residents' health and wellbeing

Social and emotional support

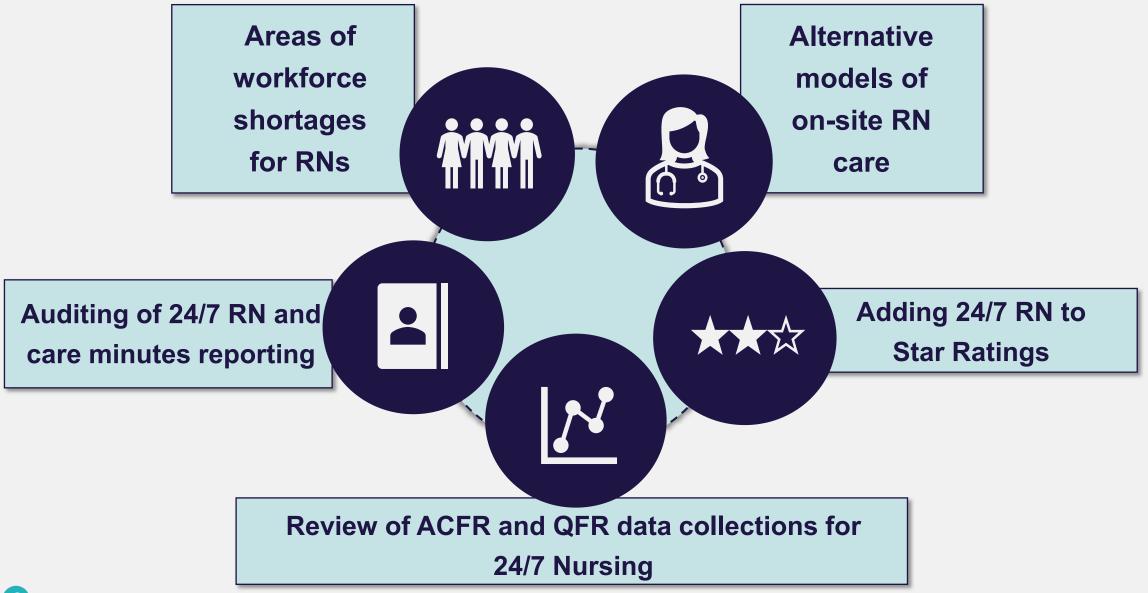
Social and emotional support includes activities that support residents to be and feel connected, heard, valued and fulfilled

Example activities

- when a PCW spends social time with a resident to have a conversation
- assists them personally to undertake personal interests (for example reading or playing a game)
- assists them personally to participate in a group activity

<u>https://www.health.gov.au/resources/publications/care-minutes-and-247-nursing-requirements-guide</u>

Residential aged care consultancies





Care Minutes and 24/7 Nursing Requirements Guide https://www.health.gov.au/initiatives-and-programs/aged-care-247-registered-nurse-requirement





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24/4 registered nursing: <u>https://www.health.gov.au/initiatives-and-programs/aged-care-247-registered-</u> nurse-requirement

Star Ratings webinar

https://agedcareengagement.health.gov.au/engagement/webinar:-star-ratings-information-forresidential-aged-care-providers/







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If you have any questions after the webinar, please email them to

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