



## Questions & Answers

### *MPS webinar: Aged care reforms: impacts on the MPS program and providers – 8 May 2024*

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#### Introduction

On 8 May 2024, the Department of Health and Aged Care (Health) hosted a webinar for MPS providers, to explain how aged care reforms will impact the MPS program and its providers. The webinar was attended by 177 people, with questions submitted online, and most questions answered during the session. Health thanks all attendees for their engagement.

It is intended that this webinar would be the first in a series, enabling Health to talk directly to MPS providers, sharing information, answering questions and seeking input for the design and implementation of reforms. These webinars build on Health's ongoing engagement on MPS reforms with state and territory health department officials, through the MPS Working Group.

This document aims to provide a summary of some of the key questions and answers from the webinar, grouped into themes:

- MPS trials of 24/7 Registered Nurse (24/7 RN) and direct care minute requirements
- Registration/Obligations for MPS providers under the New Act
- Referrals and entry pathways
- Other questions

If you have extra questions you would like answered or believe your question during the webinar was not included or fully addressed, please email us at [mpsagedcare@health.gov.au](mailto:mpsagedcare@health.gov.au).



## Question and Answers

### MPS trials of 24/7 RN and care minute requirements

**1. *Will there be additional 24/7 registered nurse funding for MPS's similar to the increased funding received by other residential aged care facilities?***

No additional funding will be provided for the 24/7 RN trial, because most MPS are expected to already have these nursing arrangements in place. However, Health will use the trial period to build an evidence base for any additional costs involved and the need for any additional funding.

**2. *What (how much) will the trial funding be as this may influence the decision to participate in the trial or pilot.***

As noted, there is currently no funding available for 24/7 RN initiative in MPS, however funding has been allocated to support the implementation of care minutes requirements in MPS.

The state and territory representatives on the MPS Working Group have been provided with high level information about funding that is on offer annually for care minutes so we encourage you to speak with your state/territory officials. (Health can provide contact details for your state/territory representatives if required, via [mpsagedcare@health.gov.au](mailto:mpsagedcare@health.gov.au).) The funding for the care minutes trial will be calculated per place per site and will take into account MMM classification location.

**3. *The 24/7 RN care as it stands particularly with the "on-site" requirement stated is very ambiguous. Will there be any further narrowing of this such as stating that the RN is employed for the sole purpose of the aged care home, or will this be open to interpretation by MPS providers?***

For MPS providers participating in the 24/7 RN trial, Health plans to develop a simple and easy to read policy document that explains what it means to be 'onsite'. However, there is no intention that an RN must be employed for the sole purpose of providing care to an aged care client. An RN will need to be onsite with coverage provided 24/7 but they could be located in the acute part of the hospital. As long as their employment allows them to cross health and aged care, then they would be deemed to be 'onsite' at the MPS.

**4. *What is the definition of 24/7? Your assumption that an RN will be on staff 24/7 may be correct for most MPS but you cannot assume they are "available" 24/7 They could be dealing with an acutely unwell patient on the acute side (eg in the ED) and therefore unable to respond to the aged care side.***

As noted in the previous question, Health will provide a policy document to clarify definitions, but the 24/7 RN policy only requires the RN to be onsite. MPS providers would be welcome to suggest how the trial might explore the availability of RNs to respond to the aged care side when needed.

**5. *Is there any update on the assessment tool to be used that will determine the care time minute requirements?***

We understand MPS is different as there is an integrated health component, and that is why Health plans to undertake the trial and pilot. During the pilot/trial phase we want to understand what other arrangements MPS providers already have in place for your nursing staff and whether there is existing reporting that can be utilised, and perhaps find innovative ways to ensure that direct care targets are met. The focus is really about the outcome for the aged care clients.



**6. How do you become or apply to be a trial site?**

We recommend MPS providers contact your state/territory health agency to discuss, but you can also contact the MPS Team directly via the MPS Reforms mailbox – [mpsreforms@health.gov.au](mailto:mpsreforms@health.gov.au).

## Registration/Obligations under the New Act

**7. When will provider registration requirements (and associated grandfathering arrangements) commence? Will this be aligned to the commencement of the new Aged Care Act? When do you anticipate commencing the data validation exercise with existing MPS Providers?**

The regulatory model and the provider registration process within it is due to commence with the new Act, but it is still a decision of government and timing will depend on how quickly it gets through Parliament.

The implementation of data validation arrangements (to confirm the details of providers that opt into the deeming process for registration under the new Act) will be worked through with the MPS Working Group. We anticipate that we will be sequencing it from when we understand the new Act will commence. We will allow time prior to that to validate the information with you so we can work through any particular issues and make sure that deemed information is accurate.

‘Grandfathering’ arrangements will apply to both MPS providers and clients. Grandfathering of MPS clients will be more complex, so we are keen to focus on this in a further webinar. Health does not currently collect identifiable MPS client data, so we will need to work with providers to work out who are the clients that are currently in MPS and what are the services they are receiving.

**8. For in home services, such as domestic assistance, allied health, or community nursing, how will reporting work?**

No specific advice on this issue was available for this webinar. However, Health is working to clarify reporting expectations across provider registration categories, as part of broader provider obligations and regulatory arrangements. This topic may be addressed at a future webinar when more information is available.

## Referrals and entry pathways

**9. Will the retrospective approval process for entry be managed in a similar way to emergency respite?**

It will be similar to the ‘emergency entry’ arrangements in the current Act but it will be expanded and will cover MPS more broadly where there is a delay in assessment being undertaken. More consultation is planned on alternative entry arrangements so MPS providers can highlight any unintended consequences and ensure enough ‘flexibility’ in the context of MPS. We are aware that in some case you will just need to commence delivery of care – it’s really just about how we retrospectively make sure those people are assessed.

**10. Will the MyAgedCare portal be updated to allow MPS outlets to accept referrals for permanent aged care?**

We are aware that this has been an issue and have raised with our IT colleagues, noting that the priority will be to implement IT changes that will be required under the new Act. The department is keen to discuss this further with providers who have ideas about how we can improve functionality. It is an important function for people who want to access aged care, to get the most accurate information. MPS providers are encouraged to come forward with any concerns and suggestions, so they can be included on wish lists for future IT improvements.



**11. Flexible entry to MPS sites is critical in regional areas for younger people with a disability, as home care providers are limited or non-existent in some remote areas. Will there be an exemption process for regional consumers when no alternate care provider is available and what will this involve?**

This topic is part of negotiation and discussions with states and territories, but the new *Aged Care Act* will make it clear who can access aged care. There will be grandfathering provisions for younger people who currently access aged care. The Commonwealth is working with states and territories on alternative arrangements to address concerns about some of the new eligibility provisions. We understand the pressures in regional areas but we are also conscious of the recommendations of the Royal Commission that aged care is not ideally suited to younger people. We want to ensure that younger people are getting services that best suit their needs.

**12. Would the assessment come from ACAT?**

Assessments will be done by the proposed new single assessment workforce. We can invite the assessment policy team along to a future webinar to explain assessment arrangements in more detail if that is an area of interest to providers.

## General questions

**13. What remoteness classification is currently used for aged care and the MPS program?**

The Modified Monash Model (various versions) is applied across aged care. The MPS program currently uses the 2017 version. A review of the model is currently underway with the final report due in July 2024.

**14. Who is leading the Residential Experience Surveys?**

The department has engaged HealthConsult to conduct a trial to expand the Residents' Experience Survey (RES) into MPS. Questions can be directed to the RES team [ACRES@health.gov.au](mailto:ACRES@health.gov.au) or you can visit the department's website for more information on RES.

MPS providers were invited to complete an EOI to participate in the trial, which was due to commence from 20 May 2024

**15. The additional MPS allocations foreshadowed for 2024 - will there be any impediment to an MPS service applying for an allocation where they are located in a community that also has a separate residential aged care facility operating within the community?**

This policy restriction was removed about a year ago, following the recommendation by the Royal Commission but it is something that is considered. The existence of an existing residential aged care home is taken into account, when reviewing an application with careful consideration given to proposed competition and the needs of the community.



## Document history

Version	Date	Q&As added	Q&As edited
1.1	May 2024	All	N/A

## Acronyms and abbreviations

Acronym / abbreviation	Definition
MPS	Multi-Purpose Service
Act	The new Aged Care Act
Health	The Department of Health and Aged Care
ACAT	Aged Care Assessment Team
MMM	Monash Modified Model
RES	Resident Experience Survey