



Australian Government



When to request a Support Plan Review from an assessor

Purpose

This fact sheet outlines the circumstances where a Support Plan Review (SPR) is requested by the service provider.

Review by a service provider

A service provider is expected to deliver services for the client consistent with the service recommendations in the My Aged Care support plan and in line with relevant program guidelines. Providers may develop a care plan or equivalent for recording these service delivery details.

The service provider is responsible for monitoring and reviewing a client's services and should have review processes in place. Where the support plan recommends short term or time-limited services, these factors should be reflected by incorporating suitable review points in the client's service provider's care plan.

Reviews are important to ensure clients requirements and goals are met. This is particularly imperative when the client's goals are centered solely on reablement or where a client's needs or service provisions are likely to change.

Where there is no recommended review date included in the support plan, service providers are expected to undertake a review of the services they are delivering, at least every 12 months.

Clients receiving aged care services, including through the Commonwealth Home Support Programme (CHSP) or the Home Care Packages Program (HCP) may request a review of their support plan to accommodate changes in their circumstances. A predetermined review date may be set by the assessor, or a review may be requested by a client or their service provider at any time where a change in circumstances is evident to them.

The assessor is best placed to determine whether a new assessment is required and will review the SPR request to decide whether there has been a significant change in the client's needs or circumstances.



When to request a Support Plan Review by an Assessor

To prevent unnecessary requests for SPRs, and to encourage a consistent and timely experience for the client, a SPR should only be requested in the following instances:

- There is a change to the client's needs or goals and additional services or an extension to services is needed
- Informal care arrangements have changed/ceased
- Services are required to be set up prior to a client moving to a new location

Note: The service provider is able to check the support plan and the My Aged Care client record to see if an assessor has set a scheduled review date before requesting a support plan review through the portal – where a review is already scheduled, it may not be necessary for the provider to request the review through the portal. The service provider is able to add notes to the client record to support the next support plan review. If the provider has concerns regarding the timing of the scheduled review they should contact the assessment organisation to discuss the review. Assessor contact details can be accessed through the client record.

Client specific considerations

For *Aged Care Act 1997* (the Act) based aged care services such as home care, the service provider does not need to request a SPR if any additional services or a change in frequency of existing services can be accommodated by adjustments to the client's care plan, including if relevant, using their existing budget.

This is a discussion a provider should have with their client and supports the principles of Consumer Directed Care.

In addition, the home care provider needs to refer to the guidance documentation [Assigning priority for service](#) prior to submitting an SPR request relating to a reassessment of a person's home care priority.

For clients whose needs can no longer be met by the current approvals for Act-based services, a new comprehensive assessment by an ACAT must be undertaken. Approval decisions will be made based on legislative requirements, guidance materials and an assessor's clinical and independent judgement.

The table at **Attachment A** (p.4) provides further considerations relating to clients receiving CHSP or interim HCP and will assist you with determining whether you should progress with a SPR request.

Information to include in a Support Plan review request

The SPR request to the assessment organisation can be facilitated from the provider portal. Service providers can also ring My Aged Care (1800 200 422) to request a SPR.

When requesting a SPR through the provider portal, providers are required to capture as much detailed information as possible to justify the review. If an assessor



deems the information provided does not support the need for a review, the request may be cancelled by the assessor and a notification will be sent to the referrer.

A SPR request should include:

- the primary reason for the SPR that outlines the circumstances that have changed for the client
- the services the client is currently receiving and how the change has affected the client's need for services
- contact details of the staff making the request
- an attachment to support the request (optional)

Note: if you believe a review of the client's support plan is required urgently, you must include a reason to support this request and clearly specify that the SPR request is urgent.

In the SPR request, service providers should include information confirming their review of the client's current care plan and provide details to indicate the client's changed care needs can no longer fit within the existing budget.

Outcome of Support Plan Review

A review by an assessor will look at the following aspects:

- the reason a review has been requested and its impact on the client's existing assessment information and support plan
- the appropriateness of the services in meeting the client's goals
- any new goals for the client, and associated referral(s) for service
- the appropriateness of setting another review date or an end date for service delivery.

The outcome of a review by an assessor may be:

- no changes to the support plan are required
- support plan is updated to recommend extension to existing service, additional or decreased services
- new assessment is required (either by the RAS or ACAT) as the support plan no longer reflects the outcomes of the assessment and the client's needs have changed significantly
- review request cancelled and SPR not undertaken. In the case of a cancellation, a notification is sent to the referrer. If necessary, the assessor and service provider should communicate about the rationale for the cancellation to ensure the client's needs are being met.

Where the review outcome affects the current delivery of services to the client, the assessor may contact the service provider and discuss the results of the review and the recommendations that apply to that provider's services.

After a client's SPR by an assessor, the service provider will be able to view the outcome in the My Aged Care provider portal. Depending on the outcome of the review, the service provider may need to make changes to the way they deliver services to the client.



Related Documents

- [Assigning priority level for service](#)
- [Video - How to request a support plan review](#)
- [Fact Sheet – Actioning changes to a client’s support plan](#)



Client receiving CHSP services and circumstances for additional CHSP services or changes to CHSP services	Client receiving interim HCP and circumstances for additional CHSP services
<ul style="list-style-type: none"> The CHSP is designed to provide small amounts of a single service or a few services to a large number of people. CHSP services are ideal for those who only need a small amount of assistance or support to enable them to stay independent, continue living safely in their homes and participating in their communities. CHSP clients that require a new service type or a significant increase in their level of service must have a support plan review before any additional services can be provided. Where a client's needs can no longer be met by entry-level support services delivered under CHSP, then it may be more appropriate to receive services from other Commonwealth funded programs such as a HCP and a new assessment will be conducted by an ACAT. The new assessment referral is an outcome of a support plan review conducted by an assessor. 	<ul style="list-style-type: none"> There are three defined circumstances in which a Home Care Package (HCP) client may be able to access some government-subsidised CHSP services in addition to the services they are receiving from their HCP budget. <p>The three defined circumstances are:</p> <ol style="list-style-type: none"> For clients on a Level 1 or 2 HCP: where the client's HCP budget is already fully allocated, the client can access additional, short-term or episodic Allied Health and Therapy services or Nursing services from the CHSP, where these specific services may assist the client to recover after a setback. For clients on a Level 1 to 4 HCP: where the client's HCP budget is already fully allocated and a carer requires it, the client can access additional planned respite services under the CHSP (on a short-term basis). For clients on a Level 1 to 4 HCP: in an emergency (such as when a carer is not able to maintain their caring role) and where the client's HCP budget is already fully allocated, additional services under the broader CHSP can be obtained on an emergency or short-term basis. These instances must be time limited, monitored and reviewed.

