



Australian Government



myagedcare

# Fact sheet for ACAT Assessors - Residential Respite Care

## AN-ACC Residential Aged Care Reform October 2022

### Purpose

This fact sheet provides information for Aged Care Assessment Team (ACAT) assessors on updated assessment processes for Residential Respite Care that apply since the Australian National Aged Care Classification (AN-ACC) funding reform for residential aged care came into effect on 1 October 2022.

### Changes to ACAT assessment and delegate decision from 1 October 2022

#### Assessment changes

From 1 October 2022, ACAT assessors need to ensure all clients that they recommend for Residential Respite Care approval have completed the Modified De Morton Mobility Index (DEMMI) assessment, before submitting for ACAT delegate approval.

ACAT assessors are required to assess a client's eligibility for Residential Respite Care under the *Aged Care Act 1997*.

From 1 October 2022, ACAT assessors will no longer recommend Residential Respite High Care or Residential Respite Low Care. ACAT assessors will, under the new funding model, recommend the client for residential respite care approval and use the Modified DEMMI assessment tool to inform the level of subsidy for the provider.

The Modified DEMMI assessment tool will inform the respite funding class by classifying clients into AN-ACC Residential Respite Classifications, as follows:

- **Independently mobile** - Respite Class 101
- **Assisted mobility** - Respite Class 102
- **Limited mobility** – Respite Class 103

#### ACAT delegate decision changes

The ACAT delegate continues to receive a residential respite recommendation from an ACAT assessor and to determine the client's eligibility and approval for Residential Respite Care. ACAT delegates will no longer be required to make a decision to limit the respite to a particular level (Residential Low Care or Residential High Care).

Any client who requires an approval backdated prior to 1 October 2022 under urgent circumstances provisions of the *Aged Care Act 1997*, will be able to receive a Residential Respite High Care or Residential Respite Low Care approval.

ACAT delegates will continue to grant or reject residential respite care extension requests as per usual business practice.

## Recommending Residential Respite Care

ACAT assessors need to complete a Modified DEMMI assessment when recommending a client for residential respite care during the comprehensive assessment, or as a standalone Modified DEMMI when a client requires a new Residential Respite Class as a result of a reassessment or reconsideration.

**A Modified DEMMI assessment must be completed face to face** and cannot be completed via telehealth or any other virtual means.

## Referrals

For a client who has not yet been approved as eligible for Residential Respite Care and resides in the community, the ACAT assessor will receive a referral.

For clients residing in a residential aged care facility, any referrals for Residential Respite Assessments, Reconsiderations or Reassessments will be completed by the Residential Funding Assessment (RFA) organisations (AN-ACC assessment workforce).

If a client leaves care prior to being assessed, the RFA will transfer a referral to the ACAT for a Residential Respite Assessment.

Equally, if the ACAT has a referral but the client goes into residential care, the ACAT can transfer the referral to an RFA organisation.

### Prior to 1 October 2022

If a client was not assessed prior to 1 October 2022 and has a Residential Respite Care approval, they will be mapped to a classification, without requiring a new assessment:

- Residential Respite High Care approvals will be mapped to Respite Class 102
- Residential Respite Low Care approvals will be mapped to Respite Class 101

## Reclassifications (Reassessments) and Reconsiderations

Providers, clients and their representatives can request a Reclassification if the client's respite care needs have changed. This may result in a Residential Respite Assessment referral being issued to the ACAT.

Also, a Reconsideration of a Respite Class can be requested by a provider within 28 days of the outcome of the initial assessment.

The classification generated by the Reclassification or Reconsideration will replace the Respite Class that was initially assigned and either backdated to the date of request (Reclassification) or replace the respite class being considered (Reconsideration).

It is important to note that this may result in a change of Respite Class and change of payment for residential respite providers.

All Reclassification and Reconsideration (Modified DEMMI) assessments must be completed face to face.

The Department of Health and Aged Care (the Department) will monitor the implementation of these reforms and the volume of referrals issued to ACATs.

## The My Aged Care Assessor Portal

For a client who has not yet been approved as eligible for Residential Respite Care, the ACAT will receive a comprehensive assessment referral through the Assessment Referral tab on the Assessor Portal as per usual business practice.

From 3 October 2022, the My Aged Care Assessor Portal has a new Residential Funding Referrals menu tile. The Residential Funding Referrals menu tile will contain referrals for clients who require a Residential Respite Assessment for a reassessment or a request for a reconsideration of the respite class

ACAT assessors will complete the Residential Respite Assessments from the [myAssessor app](#).

A Residential Respite Assessment will only require the Modified DEMMI assessment, however it is important to review the client's situation and initiate a support plan review or new assessment using the NSAF if needed.

The Department encourages as best practice for assessors to complete the assessment in a timely way within four weeks to capture accurate assessment of mobility at time of respite episode. This also ensures the provider will receive payment for the level of respite care provided and the client can continue to receive the level of care they need.