



Further information: 1 October 2017 transition for Victorian CHSP funded nursing and allied health pathway to My Aged Care

For CHSP allied health and nursing service providers

Key points:

- Victorian Regional Assessment Service (RAS) and Commonwealth Home Support Programme (CHSP) service providers transitioned to My Aged Care on 1 August 2016.
- The only exception was the referral pathway whereby health professionals were able to refer people who only required CHSP allied health and/or nursing services, directly to CHSP providers, if this was the only service need(s) identified.
- This pathway was in place for 12 months. An additional three month transition period was provided to allow for further support and education to be provided to the sector. We encourage the sector to use this transition period to begin making these referrals through My Aged Care.
- From 1 October 2017, clients requiring CHSP allied health and/or nursing services will need to be referred through My Aged Care.
- This is consistent with other referrals health professionals would be making to My Aged Care.
- This document clarifies questions that arose during the recent consultation process.
- If you have any further questions, you can contact the Department of Health at: MyAgedCare.Victorianpathways@health.gov.au

Services for older people

- There is a variety of programs that provide nursing and allied health services for eligible older people in Victoria, including services funded through the Medicare Benefits Schedule and services provided by community health, hospitals and private health services.
- Clients do not need to come through My Aged Care to access these health care services.
- Referrals only need to be made to My Aged Care where the client may be eligible for Commonwealth-subsidised aged care services, such as the CHSP, Home Care Packages, Transition Care, Short Term Restorative Care, and also Residential Care.
- This is because My Aged Care is the national entry point for all Commonwealth-subsidised aged care services.
- For further information about the services available in Victoria, please see the factsheet "Service Care Options for Older People in Victoria".

Direct to service referrals: the urgent pathway

- A direct to service pathway can be used where a client has an urgent need for a service based on their circumstances which, if not met immediately, may place them at risk.
- The services where this is most likely to occur are nursing, personal care, meals and transport.

- We acknowledge that there may be a very small number of exceptions to these four service types. If the client's safety is at risk, you can provide other services in the interim until an assessment is undertaken by a RAS or Aged Care Assessment Service (ACAS) assessor.
- As the service provider, you are expected to make a referral to My Aged Care to arrange for an assessment as soon as possible. We recommend you include information about the current urgent services you are providing in your referral, to ensure the assessor is informed.
- You can make this referral either via phone with the client or via the My Aged Care web form.
- An assessment is expected to occur within two weeks. However, you can continue to provide urgent services until an assessment is undertaken.
- The RAS or ACAS will confirm any ongoing service requirements.
- If your service is recommended and you receive a referral, you will be able to view a copy of the client's home support assessment and support plan through the My Aged Care service provider portal.
- Further information about the urgent pathway is at: [Direct to service referral for CHSP providers](#)

Referrals for allied health and therapy services

- The RAS and ACAS determine eligibility and make service referrals at the CHSP service type level, i.e. allied health and therapy.
- This covers all the service subtypes, for example, a referral for allied health and therapy includes podiatry, physiotherapy, occupational therapy, social work etc.
- The RAS or ACAS may indicate which allied health subtypes the client may require, by selecting these on the referral.
- This may help you obtain an indication of the services the client seeks, however it does not limit the type of allied health services that could be provided to the client.
- Therefore, if your client has already had an assessment by a RAS, and has a recommendation for allied health and therapy, you do not need to make any additional referrals to My Aged Care in order to provide different allied health subtypes.
- Each service provider will need either the referral for allied health and therapy from the RAS or a referral code from the client to deliver services.
- If there are multiple providers required to meet a client's needs, multiple referrals for allied health and therapy will be required. This is because a referral code can only be used by one provider.
- This allows the multidisciplinary and co-located allied health professionals to continue the current collaborative practices when providing care to a client.
- You can continue to update the client record with any additional service delivery information.
- Further information about CHSP allied health and therapy services is available at: [CHSP Programme Manual 2017](#)

What to do when a client requires additional services

- If your client's needs or circumstances have changed and you think they may require other services not identified on their support plan, you can request a support plan review.
- This can be done from within the service provider portal.
- Further information is available within the [Recording and Updating Service Delivery Information Quick Reference Guide](#), and [Support plan review and new assessment](#)

Episodic care

- There may be instances where a client who has previously been assessed by a RAS or ACAS and referred to your service, re-presents for additional services.
- In this instance, given your service type was recommended on the client's support plan, you can continue to provide these services.
- If you have 'ceased' the client from within the service provider portal, you may need to either get the referral re-issued by the RAS or ACAS organisation, or obtain a referral code. A referral code can be obtained by the client from the My Aged Care contact centre.

Clients who may require additional assistance

- There is a range of processes and people available to support clients to engage with My Aged Care and access aged care services.
- This includes Access and Support workers who provide outreach services in Victoria, advocacy services as well as the RAS and ACAS who can provide linking support/care coordination. A client is also able to establish a representative within My Aged Care.
- The My Aged Care website provides useful information for consumers: [How do I get help to talk to My Aged Care](#), and for others seeking to help someone access services: [Talking to My Aged Care for someone](#)