



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

For health professionals making referrals

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 you to use this transition period to begin making these referrals through My Aged Care.
- From 1 October 2017, patients requiring CHSP allied health and/or nursing services will need to be referred through My Aged Care.
- The easiest and quickest way to make a referral to My Aged Care is via the [health professional web form](#). However, if your patient requires urgent services, you are able to make a direct referral to the CHSP service provider.
- This is consistent with other referrals you 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.
- Your patient does 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 your patient 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 your patient's safety is at risk you can refer them directly to a service provider for other services on an interim basis until an assessment is undertaken by a RAS or Aged Care Assessment Service (ACAS) assessor.
- You only need to make the referral for urgent services directly to the service provider. It is expected that the service provider will then make a referral to My Aged Care to arrange for an assessment.
- An assessment is expected to occur within two weeks. However, your patient can continue to receive urgent services until an assessment is undertaken.
- Further information about the urgent pathway is at: [DoH: Information for health professionals](#)

Making a referral to My Aged Care

- The easiest and quickest way to make a (non-urgent) referral to My Aged Care is via the [health professional web form](#)
- If all relevant information is included in the referral, it will be sent directly to an assessment organisation without the need for the My Aged Care contact centre to contact your patient.
- You can select whether the assessment is sent to a RAS or ACAS.
- The RAS conduct holistic assessments for clients who seek entry level support at home, under the CHSP. ACAS undertake comprehensive assessments for clients with complex aged care needs who may seek services such as a home care package, transition care, residential care etc.
- You can attach documents to the referral form, for example occupational therapy assessments, relevant GP letters, specialist advice etc.
- Information entered in the web form populates a client record. This information is used to support your patient's assessment and ensures ongoing retention of information to support their My Aged Care journey, now and into the future.
- If you make a clear service recommendation in your referral, we expect the RAS would take this into consideration during their assessment with your patient.
- We recommend you keep the confirmation number you receive after submitting the form as you can use this to follow-up on the referral.
- Further information is available at: [My Aged Care: Information for health professionals](#), or [DoH: Information for health professionals](#)

How to find out about your patient in My Aged Care

- If you believe your patient is receiving aged care services and you would like to find out more information before making a referral, you can call the My Aged Care contact centre.
- The contact centre will confirm you have your patient's consent to obtain this information.
- They will also ask for your details and that of your patient (including your patient's full Medicare number) before providing you with information.
- If required, the contact centre can give you the following information:
 - whether a referral has been made to an assessment organisation
 - the type of assessment
 - the name and contact details of the assessment organisation
 - whether the patient has been referred for services, including the type of services and if they have been accepted by a provider
 - whether the client has existing aged care approvals in place, and/or
 - whether the referral you made has been closed, including the reason for closure.
- As a health professional providing health care to your patient (and with their consent), you are able to access this information. You do not need to become a My Aged Care representative for your patient.

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.
- Therefore, if your patient already has had an assessment by a RAS or ACAS, and a recommendation for allied health and therapy, you do not need to make any additional referrals to My Aged Care for an alternate allied health and therapy subtype. Instead, you can directly refer to the allied health provider.
- Further information about CHSP allied health and therapy services is available at: [CHSP Programme Manual 2017](#)

Patients who may require additional assistance

- There is a range of processes and people available to support your patient 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. Your patient 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](#)