Summary of the Victorian RAS Assessment Information Session

Held Thursday 8 August 2024

Introduction

The Victoria assessment landscape is experiencing significant change and transformation, with the number of Regional Assessment Service (RAS) providers reduced from 75 to 12 as of July 2024. This shift has involved approximately 11,000 to 12,000 clients during the transition.

Incoming assessment services have extensive experience in Aged Care Assessment and have been operating across various states in Australia since 2015. These assessment services will join RAS providers who are continuing to provide assessment services within Victoria during this transition period, including Local Governments, and local health services.

A webinar and panel discussion were held on Thursday 8th August 2024 to introduce some of the assessment services – Access Care Network Australia (ACNA), Aspire4Life, APM (Serendipity), and Department of Health (Vic). Attendees were asked to submit questions at registration, and these were used to develop the panel discussion.

This Frequently Asked Questions (FAQ) Information Sheet includes a summary of responses to questions discussed during the webinar and questions submitted by the audience during the live discussion.

Access the webinar recording here: https://youtu.be/QAhQk4hdnHA?si=GK-5WIJj-SBVuhtm

About the changes to assessment in Victoria

In April 2024, agreement was reached between Victorian and Commonwealth Governments for the Commonwealth to progress RAS transition arrangements across Victoria from 1 July 2024. Given the Commonwealth did not have individual contract arrangements with existing RAS services, the Commonwealth undertook a limited tender process, open to existing assessment services, in a very short period of time. This took place at the same time as training for the assessment workforce to support the commencement of the Integrated Assessment Tool (IAT).

A Transition Advisory Group was established to guide the transition, which included all three levels of Government and RAS.

The outcomes of the limited tender in Victoria resulted in significant change:

- Assessment providers have transitioned from around 75 to 12 organisations
- Assessments transitioned away from Local Government assessment boundaries to Aged Care Planning Regions (ACPR); and

It is important to acknowledge the large amount of change that has occurred, which is separate to the National Single Assessment Tender, due to commence 1 January 2025.

We appreciate that, as with any change, there will be a period of adjustment for all involved. This resonates through the words of Rochelle Collard – Victorian Department of Health:

> *"It is important to acknowledge that this is a transition period, we've had a way of doing things in Victoria and that's now changed. So, we encourage all of us here and out in the sector just a little bit of generosity in the time that it takes for these changes to come on board. We are all learning a new process, learning what our roles are, what our responsibilities are, how we engage with each other to get the best outcomes for Victorian older people. So, encourage everybody to maintain that generosity of spirit in the space so that we can achieve positive outcomes."*
>
> *Rochelle Collard, Victorian Department of Health*

By working together and communicating, we can build a system of assessment and service provision that will be responsive to community and keep the client at the centre of all we do.

Thank you to all involved in the Panel discussion for their participation.

Contact information

ACNA		https://acna.org.au/our-services/mac-regional-assessment-services
		1300 972 920, press 3 for VIC RAS team
		enquiries@acna.org.au
APM		https://apm.net.au/aged-care/your-aged-care-assessment
		1300 987 945
		RASVICproviders@apm.net.au
Aspire 4 Life		Home - Aspire4Life
		1300 012 055
		info@aspire4life.com.au
Vic Dept of Health		https://www.health.vic.gov.au/ageing-and-aged-care/my-aged-care-assessment-services
		1800 200 422

Frequently Asked Questions

1. Who are the assessment services operating across Victoria and what geographic area do they cover?

   The Department of Health and Aged Care has released a list of Assessment services operating nationally. To identify the assessment services operating in your area please visit: https://www.health.gov.au/resources/publications/regional-assessment-service-organisations-by-state-and-territory-and-region

   It is important to note that whilst Regional Assessment Services (RAS) have previously worked within Local Government boundaries, they will now (generally) operate across the whole of an Aged Care Planning Regions (ACPR). So CHSP providers can expect to receive referrals from multiple assessment services.

2. Are ACAS and RAS assessment services remaining separate or combining?

   ACAS and RAS will remain separate until the Single Assessment Workforce is operational. This will involve moving to a system where the same assessment organisation will do both simple and complex assessments. The blended single assessment workforce is expected to commence from January 2025.

3. Where are assessment staff located, and are assessments conducted face-to-face?

   Assessment workforces are embedded in Aged Care Planning Regions where assessments take place. The workforce uses a range of assessment methods including in-home active assessments, phone and telehealth options. Whilst the assessment approach is dependent on various factors including alignment with contractual agreements and client choice and capability, it is expected that the large majority of assessments will continue to be conducted in-person. Interim arrangements may require telephone assessments more often, whilst assessment services grow their workforce.

   ACAS service delivery continues in line with previous conditions, including the RAS services. The exceptions to this arrangement include Lyndoch Living RAS which has transitioned to Barwon Health, and Goulbourn Valley Health exiting as a RAS provider but continuing as an ACAS provider.

4. How are requests for assessments and support plan reviews issued to assessment teams?

   The My Aged Care system uses an algorithm to direct referrals for assessments and support pan reviews to Assessment services based on their contractual region and proportioned business allocation. If only one Assessment service is contracted for an ACPR, they will receive 100% of the referrals.

   The My Aged Care Contact Centre remains the primary source for information on the allocation of client referrals or Support Plan Reviews, ensuring transparency and accurate dissemination of referral data. This process is intended to streamline the distribution of assessments and support plan reviews to ensure they are handled efficiently and according to the designated regional responsibilities.

   Note: Support Plan Review's active prior to 1 July 2024, have been 'batch allocated' to Assessment services in accordance with the contracted regions.

5. How are referrals for CHSP services issued by assessment services?

Assessment staff utilise provider information on My Aged Care when discussing service options with clients. Depending on the client's needs and preferences, assessment services will broadcast the referral, provide the clients with a referral code or refer directly to a service provider. Where a client is provided with a referral code, clients are empowered to understand who to contact. Referrals for reablement are more likely to be direct referrals to specific service provider as are referrals for Linking services.

6. What is the estimated waiting time for an assessment?

The change to assessment services in Victoria included the transitioning of approximately 11-12,000 clients to new assessment services. RAS are working hard to reduce the backlog and continue to prioritise assessments, reassessments and support plan reviews based on urgency of need. In some planning regions, assessment services have been able to work through backlogs and are starting to respond to current referrals.

Estimated waiting times vary across planning regions, and it is difficult to provide current wait times. As RAS 'ramp up' their capacity and resources we should see a return to the usually agreed timelines within the next few months.

Business as usual requires RAS to meet the following timelines:

- 10 days for high priority referrals
- 14 days for medium priority and
- 21 days for low priorities.

7. What advice should CHSP providers offer older people about an outstanding assessment or support plan review?

RAS acknowledge that there is sensitivity around the untimely wait that some clients have experienced. Please be mindful about setting expectations around assessment timeframes with clients at present. If an older person is in urgent of need services (within the next 2 weeks), they should contact My Aged Care to access an urgent direct to service referral. The My Aged Care Contact Centre is aware of the changes in Victoria and is ready to explain them to assessment candidates.

8. How do the new RAS teams approach clients when there is no service availability?

Service availability is challenging and varies across different regions in Australia. RAS staff adopt a flexible and client-centred approach which includes providing comprehensive information on available options, including informal strategies and supports, to the client, their carer, and family.

During the assessment, the assessor and client discuss various options based on the specific service type needed. Strategies might include:

- Direct Referrals: Providing the client with a referral code and details of potential providers so they can contact them directly.
- Community and Council Supports: Exploring available options within the community, local council supports, or the Carer Gateway, if relevant.
- Linking Support: If the client has higher complexities or vulnerabilities, they may be linked with local Care Finders or placed under a period of linking support to ensure they get the help they need.

9. How can service providers best communicate with RAS?

   RAS use My Aged Care as their primary source for service information. It is therefore critical that service providers ensure the information in their portal is accurate and up to date. This includes the description of service, postcode areas covered and availability. Service providers should continue to use the notes function in My Aged Care to communication changes or service outcomes.

   Where there are specific questions related to client assessments, reviews and reassessments, referrals or other, service providers are encouraged to contact RAS by phone or email.

10. Will there be capacity for assessment services to connect at a local or regional level?

    Yes, with local assessors now actively in the field, RAS will move into phase two of service establishment. RAS are keen to establish regional and local connections with service providers and hope to progress this as the workforce increases. RAS teams are committed to building relationships with providers, and welcome participation in local service networks and interagency forums.

11. How are clients from different diverse communities supported at assessment?

    Assessment staff have undergone a range of diversity and cultural sensitivity training to support an inclusive and culturally holistic approach to assessment. RAS providers acknowledge the importance of ongoing professional development are committed to ensuring assessment staff have access to continual refresher training supported via peer support, case discussions and other professional development activities.

    Where possible RAS engage staff who are representative of the local community. Additionally, assessment staff use a variety of specialist supports when working with people from diverse backgrounds including translators, and support people.

12. Do assessment staff utilise Specialisation Verification when discussing service choices with clients?

    Yes. Specialisation Verification validates a provider's claim to the delivery of inclusive service for specific communities on My Aged Care. Assessment staff recognise the value of specialisation in supporting a client's need, choice, and preferences for service. Assessment staff actively look for the validation tick when discussing service options with clients.

13. Are RAS working with Care Finder services?

    Yes. RAS acknowledge the value of Care Finders program. Assessment services have strong relationships with Care Finders in planning regions outside of Victoria and are in the process of building relationships and connections with local navigation services.

    Care finders: https://www.myagedcare.gov.au/help-care-finder

14. Are Assessment staff aware of Access & Support Workers in Victoria?

    RAS are aware of the Access & Support Program in Victoria and are in the process of making connections with providers and peak bodies to build relationships that will best support the clients in the community.

15. What will be the process for support plan reviews?

Support plan reviews remain an important part of ensuring that people can access services that meet their needs. The transition has resulted in the transfer of clients (with support plans attached) to the new providers. RAS will continue to conduct support plan reviews (both existing and new) and are prioritising reviews to reduce the backlog - remembering the ramping up of assessment provision.

It is really important for service providers (and/or clients) to clearly communicate changes in client need to Assessment Providers via the My Aged Care portal. This approach supports timely decisions about prioritisation of the support plan review and whether reassessment is required.

16. How do CHSP providers know which assessment service has been allocated their requests for Support Plan Reviews transferred during the transition period?

To identify the new assessment service responsible for Support Plan reviews transferred during the transition period, please view the client's notes in My Aged Care.

17. Does Reablement continue to be a focus for RAS?

Yes. Reablement continues to be a focus for assessment services. Assessment staff actively engage with clients to identify opportunities for reablement and in most cases, RAS are exceeding the required performance indicator of 10%.

To support time-limited and short-term service provision activities such as Reablement, it is important that service providers maintain accurate service descriptions, locations and availability in the My Aged Care portal. This will help RAS to direct referrals in a timely manner.

18. Are Assessment staff aware of and refer to GEAT2Go; and is it standard to provide referral codes for GEAT and home modifications if referring to Occupational Therapist?

The GEAT2Go program is well understood and utilised by Assessment staff and established relations exist.

Referrals to an Occupational Therapist (OT) for GEAT and home modifications are accompanied by referral codes to enable the OT to support a client requirements following assessment. If referral codes are missing, please reach out to the referring assessment services by email or phone.

19. Will assessors place notes in My Aged Care relating to client assessment appointments?

Yes. Client notes is used to record relevant information, noting that RAS aim to avoid duplicating information that is already available in the My Aged Care record (such as the assigned assessors or outcomes of the assessment).

20. How is the process of escalating clients from RAS to ACAS managed?

RAS and ACAS communicate regularly, including at a local intake level and for specific case discussion. All escalations are communicated and managed via the My Aged Care portal. If the client requires referral to ACAS following an assessment or Support Plan Review, this is also done via the portal with the client's consent.

It is important to use the referral system in the My Aged Care portal, so the client journey is tracked and prioritised.

21. What qualifications and experience do the RAS staff have?

The Department of Health and Aged Care prescribe the necessary qualifications and training for RAS and ACAS staff.
https://www.health.gov.au/our-work/aged-care-assessment-programs/before-providing-aged-care-assessment-services

22. What advice would you give to providers to support the transition of assessment organisations during this period?

- Ensure the information in your My Aged Care Portal is accurate and up to date. This includes the description of service, postcode areas covered and availability.
- Continue to use the notes function in My Aged Care to communication changes or service outcomes.
- Work collectively and set a shared expectation about the purpose of home support assessments with older people. This includes not pre-empting outcomes with clients.
- Ensure clients are aware that a referral has not been accepted when a bulk rejection of referrals occurs.

This resource is supported by the Australian Government Department of Health. Although funding for this event has been provided by the Australian Government, the material contained herein does not necessarily represent the views or policies of the Australian Government.