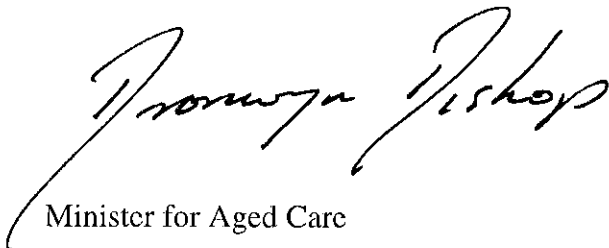




Classification Amendment Principles 2001 (No. 1)

I, BRONWYN KATHLEEN BISHOP, Minister for Aged Care, make these Principles under subsection 96-1 (1) of the *Aged Care Act 1997*.

Dated *4th June* 2001



Minister for Aged Care

1 Name of Principles

These Principles are the *Classification Amendment Principles 2001 (No. 1)*.

2 Commencement

These Principles commence on 1 July 2001.

3 Amendment of *Classification Principles 1997*

Schedule 1 amends the *Classification Principles 1997*.

4 Transitional

- (1) The *Classification Principles 1997* as in force on 1 July 2001 (the *new criteria*) apply in relation to the appraisal, or reappraisal, of a care recipient that begins on or after 1 July 2001.

- (2) The *Classification Principles 1997* as in force immediately before 1 July 2001 (the *old criteria*) continue to apply in relation to an appraisal, or reappraisal, of a care recipient that begins before 1 July 2001.

Examples

- 1 If a new care recipient enters a facility on 1 June and the appraisal for the classification of the care recipient begins on 25 June, the approved provider uses the old criteria to appraise the care recipient even though the Secretary may not receive the appraisal until 7 July.
- 2 If the classification of an existing resident expires on 3 July but the reappraisal for the care recipient begins on 28 June, the approved provider uses the old criteria to reappraise the care recipient even though the reappraisal is given to the Secretary in July.
- 3 If an appraisal (or a reappraisal) for the classification of a care recipient begins on or after 1 July, the approved provider must use the new criteria.

Note Changes to the criteria to be applied to an appraisal or reappraisal of a care recipient do not affect the date of effect of a classification or the date of effect of renewal of a classification under the Act.

Schedule 1 Amendment

(section 3)

[1] Schedule 1, Part 1

omit everything after question 8 and before question 15, insert

Behaviour

Questions 9 to 14 relate to a care recipient's care needs which are caused by the care recipient's behaviour.

Ratings for these questions are related to the frequency of observations and interventions designed to:

- (a) prevent recurrence of the behaviour itself or triggers for the behaviour;
or
- (b) reduce the frequency or duration of the behaviour; or
- (c) reduce the impact of the behaviour on the care recipient or others.

If no problem behaviours are observed or no observation is required to prevent known problem behaviour from occurring, record **A**.

If a care recipient requires observation, the facility should document the particular behaviour that is to be observed and develop a strategy for managing it when it arises.

The need for observation is to be based on an assessment of the care recipient. However, the assessment may include information about behaviour which occurred before admission.

If a care recipient requires observation because of occasional, irregular and short-lived occurrences of the behaviour and interventions are required only for such occurrences, record **B**.

For new care recipients, if during the appraisal period it is decided that observation is required, based on advice from, for example, previous carers, family, an Aged Care Assessment Team or a medical practitioner, or if, in the appraisal period after the first week from admission, intervention is required, record **B**.

For both new and reappraised care recipients, if observation and intervention to prevent or manage behaviours are required at least weekly, but less than daily, record **C**.

If observation and intervention are required daily, record **D**.

For Questions 9 to 14:

daily means once during each 24 hour period.

intervention means particular strategies, including ongoing observation:

- (a) to prevent the behaviour (for example, to redirect or distract the care recipient at times or in circumstances where there is an observed risk of the behaviour occurring); or
- (b) to manage the behaviour, or reduce its impact, when it occurs.

observation means ongoing watching of the care recipient for signs of the occurrence of the behaviour and, if applicable, triggers to the behaviour.

Q9 Problem wandering or intrusive behaviour

This question relates to a care recipient wandering, absconding or interfering with other people or their belongings.

This question does not cover the movements of a care recipient who is able to leave and return to the facility as part of a lifestyle preference that is not a problem.

This question does not cover verbally disruptive, noisy or physically aggressive behaviours which interfere with or disrupt other persons in the facility. These behaviours are covered in Questions 10 and 11.

This question would cover the behaviour of a care recipient who makes repeated attempts to leave the facility or who goes uninvited into areas within or outside the facility where his or her presence is not welcome or is not appropriate (for example, kitchens or other care recipients' rooms). It would also cover problem wandering which results in staff spending time seeking and finding the care recipient and taking the care recipient back to his or her proper location.

Secure facilities may claim for problem wandering behaviour that requires observation or intervention (in addition to the provision of secure facilities).

Observing the behaviour of a care recipient as part of the general observation of all care recipients to ensure they do not wander into other care recipients' rooms or interfere with other people or their belongings, would not justify a rating other than **A**.

An example of when a **B**, **C** or **D** rating would be appropriate is if a care recipient has been assessed previously as having wandered into other care recipients' rooms causing a disturbance or taking other people's belongings. The rating would be appropriate if recurrence is likely and staff are required to observe the care recipient and to put in place interventions to prevent or manage the behaviour.

If the care recipient does not require observation for wandering or intrusive behaviour, record **A**.

If the care recipient has been assessed as exhibiting problem wandering or intrusive behaviour and recorded as needing observation or intervention for occasional, irregular and short-lived occurrences of the behaviour, record **B**, or if both observation and intervention are needed, record **C** or **D**.

For new care recipients, if during the appraisal period it is decided that observation is required, based on advice from, for example, previous carers, family, an Aged Care Assessment Team or a medical practitioner, or if, after the first week from admission, intervention is required, record **B**. If no observation or intervention is required in the appraisal period, record **A**.

For both new and reappraised care recipients, if observation and intervention to prevent or manage behaviours are required at least weekly, record **C**.

If observation and intervention are required daily, record **D**.

Ratings		Q9 Problem wandering or intrusive behaviour
Not applicable	A	Does not require observation.
Occasionally	B	Requires observation or intervention.
Regularly	C	Requires observation for recurrence and intervention at least weekly, but less than daily.
Extensively	D	Requires observation for recurrence and intervention daily.

Q10 Verbally disruptive or noisy behaviour

This question relates to verbally disruptive or noisy behaviour of a care recipient, including abusive language and verbalised threats directed at another care recipient, a visitor or a member of staff.

The question would cover the behaviour of a care recipient who causes sufficient noise to disturb other people and require intervention. The noise may be vocal or non-vocal (for example, rattling furniture or other objects).

Monitoring the language of a care recipient as part of the general observation of all care recipients, would not justify a rating other than **A**.

An example of when a **B**, **C** or **D** rating would be appropriate is if a care recipient has previously been assessed as having been disruptive by making a significant degree of noise around meal times. The rating would be appropriate if recurrence is likely and staff are required to observe the care recipient to prevent the behaviour or manage it by reducing the degree of noise created. The rating would not be justified, for example, merely because all metallic items that can be clanged together have been removed.

If the care recipient does not require observation for verbally disruptive or noisy behaviour, record **A**.

If the care recipient has been assessed as exhibiting verbally disruptive or noisy behaviour and recorded as needing observation or intervention for occasional, irregular and short-lived occurrence of the behaviour, record **B**, or if both observation and intervention is needed, record **C** or **D**.

For new care recipients, if during the appraisal period it is decided that observation is required, based on advice from, for example, previous carers, family, an Aged Care Assessment Team or a medical practitioner, or if, after the first week from admission, intervention is required, record **B**. If no observation or intervention is required in the appraisal period, record **A**.

For both new and reappraised care recipients, if observation and intervention to prevent or manage behaviours are required at least weekly, record **C**.

If observation and intervention are required daily, record **D**.

Ratings		Q10 Verbally disruptive or noisy behaviour
Not applicable	A	Does not require observation.
Occasionally	B	Requires observation or intervention.
Regularly	C	Requires observation for recurrence and intervention at least weekly, but less than daily.
Extensively	D	Requires observation for recurrence and intervention daily.

Q11 Physically aggressive behaviour

This question covers any physical conduct that is threatening and has the potential to harm another care recipient, a visitor or a member of staff. It includes, but is not limited to, hitting, pushing, kicking or biting.

Observing the behaviour of a care recipient as part of the general observation of all care recipients would not justify a rating other than **A**.

An example of when a **B**, **C** or **D** rating would be appropriate is if a care recipient has previously been assessed as having been physically aggressive around bedtime, requiring staff to put in place an intervention to prevent or manage the behaviour. The rating would be appropriate if an intervention was put in place to modify the behaviour of the care recipient at times or in circumstances where there is a higher risk of physical aggression.

If the care recipient does not require observation for physically aggressive behaviour, record **A**.

If the care recipient has been assessed as exhibiting physically aggressive behaviour and recorded as needing observation or intervention for occasional, irregular and short-lived occurrences of the behaviour, record **B**, or if both observation and intervention are needed, record **C** or **D**.

For new care recipients, if during the appraisal period it is decided that observation is required, based on advice from, for example, previous carers, family, an Aged Care Assessment Team or a medical practitioner, or if intervention is required after the first week from admission, record **B**. If no observation or intervention is required in the appraisal period, record **A**.

For both new and reappraised care recipients, if observation and intervention to prevent or manage behaviours are required at least weekly, record **C**.

If observation and intervention are required daily, record **D**.

Ratings		Q11 Physically aggressive behaviour
Not applicable	A	Does not require observation.
Occasionally	B	Requires observation or intervention.
Regularly	C	Requires observation for recurrence and intervention at least weekly, but less than daily.
Extensively	D	Requires observation for recurrence and intervention daily.

Q12 Emotional dependence

This question relates to one-on-one interventions required by staff to respond to, manage and alleviate behaviours which result from a care recipient having a strong attachment or reliance on another person or persons.

This question is limited to the following behaviours:

- (a) active and passive resistance other than physical aggression;
- (b) attention seeking;
- (c) manipulative behaviour;
- (d) withdrawal.

Interventions to address these behaviours may include considerable additional personal attention by staff in order to calm the care recipient after visitors leave, or the careful design and scheduling of activities to distract the care recipient when he or she is at particular risk of adopting these behaviours.

This question also applies to one-on-one intervention by staff to manage the behavioural needs of a care recipient with withdrawal or depression.

This question does not relate to group activities that are covered in Question 15.

The rating should be based on the effort required to implement the intervention to prevent or manage the behaviour.

If the care recipient does not require observation for emotionally dependent behaviour, record **A**.

If the care recipient has been assessed as exhibiting emotionally dependent behaviour and recorded as needing observation or intervention for occasional, irregular and short-lived occurrences of the behaviour, record **B**, or if both observation and intervention are needed, record **C** or **D**.

For new care recipients, if during the appraisal period it is decided that observation is required, based on advice from, for example, previous carers, family, an Aged Care Assessment Team or a medical practitioner, or if intervention is required after the first week from admission, record **B**. If no observation or intervention for emotionally dependent behaviours is required in the appraisal period, record **A**.

For both new and reappraised care recipients, if observation and intervention to prevent or manage emotionally dependent behaviours are required at least weekly, record **C**.

If observation and intervention are required daily, record **D**.

Ratings		Q12 Emotional dependence
Not applicable	A	Does not require observation.
Occasionally	B	Requires observation or intervention.
Regularly	C	Requires observation for recurrence and intervention at least weekly, but less than daily.
Extensively	D	Requires observation for recurrence and intervention daily.

Q13 Danger to self or others

This question covers high-risk behaviour requiring observation or intervention and strategies to prevent, reduce or manage the behaviour. Examples of such behaviour include, but are not limited to, unsafe smoking habits, walking without required aids, leaning out of windows, self-mutilation and suicidal tendencies. It applies where there is an imminent risk of harm.

This question is about behaviour and does not apply to a medical condition that might lead to injury, for example, the risk of injury due to fitting or loss of consciousness. It does not apply to a range of behaviours which may in the long term cause damage to health such as smoking generally.

This question does not cover acts of physical aggression. These behaviours are covered in Question 11.

Observing the behaviour of a care recipient as part of the general observation of all care recipients would not justify a rating other than **A**. A rating of **B**, **C** or **D** rating would be appropriate if a care recipient has previously been assessed as endangering themselves or others. The rating would be appropriate if recurrence is likely and staff are required to observe the care recipient and to put in place interventions to prevent or manage the behaviour.

If the care recipient does not require observation for high-risk behaviour, record **A**.

If the care recipient has been assessed as exhibiting behaviour endangering themselves or others and recorded as needing observation or intervention for occasional, irregular and short-lived occurrences of the behaviour record **B**, or if both observation and intervention are needed, record **C** or **D**.

For new care recipients, if during the appraisal period it is decided that observation for high-risk behaviours is required, based on advice from, for example, previous carers, family, an Aged Care Assessment Team or a medical practitioner, or if intervention is required after the first week from admission, record **B**. If no observation or intervention is required in the appraisal period, record **A**.

For both new and reappraised care recipients, if observation and intervention to prevent or manage behaviours are required at least weekly, record **C**.

If observation and intervention are required daily, record **D**.

Ratings		Q13 Danger to self or others
Not applicable	A	Does not require observation.
Occasionally	B	Requires observation or intervention.
Regularly	C	Requires observation for recurrence and intervention at least weekly, but less than daily.
Extensively	D	Requires observation for recurrence and intervention daily.

Q14 Other behaviour

This question covers behaviours not covered in Questions 9 to 13 that require staff to spend time and effort in addition to support for daily activities.

Examples of behaviour are not given for this question as it is intended as a 'catch all' for any problem behaviour requiring additional staff time and effort not covered by Questions 9 to 13.

Observing the behaviour of a care recipient as part of the general observation of all care recipients would not justify a rating other than **A**. A rating of **B**, **C** or **D** would be appropriate where a care recipient has previously been assessed as exhibiting a certain behaviour requiring observation or an intervention by staff to prevent or manage the behaviour.

If the care recipient does not require staff observation or intervention for behaviours other than those listed in Questions 9 to 13, record **A**.

If the care recipient has been assessed as exhibiting other behaviour and recorded as needing observation or intervention for occasional, irregular and short-lived occurrences of the behaviour record **B**, or if both observation and intervention are needed, record **C** or **D**.

For new care recipients, if during the appraisal period it is decided that observation for other problem behaviours is required, based on advice from, for example, previous carers, family, an Aged Care Assessment Team or a medical practitioner, or if intervention is required after the first week from admission, record **B**. If no observation or intervention is required in the appraisal period, record **A**.

For both new and reappraised care recipients, if observation and intervention to prevent or manage behaviours are required at least weekly, record **C**.

If observation and intervention are required daily, record **D**.

Ratings		Q14 Other behaviour
Not applicable	A	Does not require observation.
Occasionally	B	Requires observation or intervention.
Regularly	C	Requires observation for recurrence and intervention at least weekly, but less than daily.
Extensively	D	Requires observation for recurrence and intervention daily.