

Residential Care Subsidy Amendment Principles 2012 (No. 2)¹

Aged Care Act 1997

I, MARK BUTLER, Minister for Mental Health and Ageing, make these Principles under section 96-1 of the *Aged Care Act 1997*.

Dated 26 June 2012

MARK BUTLER Minister for Mental Health and Ageing

1 Name of Principles

These Principles are the Residential Care Subsidy Amendment Principles 2012 (No. 2).

2 Commencement

These Principles are taken to have commenced on 1 July 2011.

3 Amendment of Residential Care Subsidy Principles 1997

Schedule 1 amends the Residential Care Subsidy Principles 1997.

Schedule 1 Amendments

(section 3)

[1] Section 21.34

substitute

21.34 Definitions for Part 14

In this Part:

Amount Determination, for a day, means the determination under subsection 44-29 (8) of the Act that is in force on that day.

1997 scheme service means a residential care service that:

- (a) meets the requirements of subsection 21.35A (1); and
- (b) does not meet the requirements of subsection 21.35C (6).

2001 scheme service means a residential care service that:

- (a) meets the requirements of subsection 21.35B (1) or (6); and
- (b) does not meet the requirements of subsection 21.35C (7).

2005 scheme service means a residential care service that meets the requirements of subsection 21.35C (1), (6) or (7).

[2] After subsection 21.35B (3)

insert

Section 21.35C 2005 scheme services

[3] Schedule 2

substitute

Schedule 2

Appraisal procedures for targeting care for homeless people or people from Aboriginal and Torres Strait Islander communities

(subsection 21.35C (4))

1.1 Appraisal procedures

(1) Appraisal of whether a person demonstrates complex behavioural needs and social disadvantage associated with their background as a homeless person or their background as a person from an Aboriginal or Torres Strait Islander community must be undertaken using either appraisal tool A or appraisal

tool B in Item 1.3 of this Schedule.

(2) If a person is both a homeless person and a person from an Aboriginal or Torres Strait Islander community then both appraisal tool A and appraisal tool B must be completed.

1.2 Time for completion of appraisal procedures

- (1) For a care recipient who enters residential care on or after 1 July 2012, notification of the outcome of the appraisal must be received by the Secretary within the period commencing 28 days after the day on which the approved provider began providing care to the care recipient (the *care recipient's entry day*) and ending 2 months after the care recipient's entry day.
- (2) However, if the care recipient dies or leaves the residential care service through which the approved provider provides care before the end of 28 days after the care recipient's entry day, notification of the outcome of the appraisal may be given to the Secretary before the end of 28 days after the care recipient's entry day.
- (3) If the care recipient's entry day is before 1 July 2012, notification of the outcome of the appraisal must be received by the Secretary within the period ending either 2 months after the care recipient's entry day or before 1 September 2012, whichever is the later day.
- (4) If notification of the outcome of the appraisal is received by the Secretary before the end of the period specified in subsection (1) or (3) (whichever is applicable), any points that may be added under subsection 21.35C (4) for the purposes of Step 3 of the viability supplement points calculator in subsection 21.35C (1) of the Principles as a result of the outcome of the appraisal take effect on either 1 July 2011 or the care recipient's entry day, whichever is the later day.
- (5) If notification of the outcome of the appraisal is received by the Secretary after the end of the period specified in subsection (1) or (3) (whichever is applicable), any points that may be added under subsection 21.35C (4) for the purposes of Step 3 of the viability supplement points calculator in subsection 21.35C (1) of the Principles as a result of the outcome of the appraisal take effect on the day the notification of the outcome of the appraisal is received by the Secretary.

1.3 Appraisal tools

APPRAISAL TOOL A - HOMELESSNESS: ADDITIONAL SPECIAL NEEDS

The care recipient must demonstrate complex behavioural and/or social support needs. They must meet EACH of the following four criteria:

		Tick if YES		
1. Homelessness background				
a.	The person has a history of homelessness or is at severe risk of homelessness, including people who immediately prior to entering care at the current or a previous residential aged care home:			
	 Were living in a public place or temporary shelter; short-term crisis, emergency or transitional accommodation; boarding house, rooming house or private hotel; or supported community accommodation; and/or 	□i		
	ii) Had no recent housing address; and/or	□ii		
	iii) Had a long history of unsuccessful tenancies/ unstable housing arrangements.	□iii		
2. Financial Status				
	The person is eligible for the maximum basic rate of social security pension or benefit defined in the <i>Social Security Act 1991</i> or service pension or disability pension as defir in the <i>Veterans Entitlement Act 1986</i> .			
3. Rele	vant behavioural diagnosis			
	The person has mental and behavioural diagnosis associated with one of the following disorders (ACAP codes shown in brackets). This checklist aligns with the range of conditions recognised by the Mental and Behavioural Diagnoses section of the ACFI:			
	 Dementia, Alzheimer's disease including early onset, late onset, atypical or mixed type or specified.(ACAP code 500) 	□i		
	ii) Vascular dementia e.g. multi-infarct, subcortical, mixed (ACAP code 510)	□ii		
	iii) Dementia in other diseases, e.g. Pick's Disease, Creulzfeldt-Jakob, Huntington's, Parkinson's, HIV (ACAP code 520)	□iii		
	iv) Other dementia, e.g. Lewy Body, alcoholic dementia, unspecified (ACAP code 530)	□iv		
	v) Delirium (ACAP code 540)			
	vi) Depression, mood affective disorders, Bi- Polar (ACAP code 550A)	□v □vi		
	vii) Psychoses e.g. schizophrenia, paranoid states (ACAP code 550B)	□vii		
	viii) Neurotic, stress related, anxiety, somatoform disorders e.g. post traumatic stress disorder, phobic and anxiety disorders, nervous tension/stress, obsessive—compulsive disorder (ACAP code 560)	□viii		
	ix) Intellectual and developmental disorders e.g. intellectual disability or disorder, autism, Rhet's syndrome, Asperger's syndrome etc.(ACAP code 570)	□ix		
	 Other mental and behavioural disorders e.g. due to alcohol or psychoactive substances (includes alcoholism, Korsakov's psychosis), adult personality and behavioural disorders (ACAP code 580) 	□х		
	For the purposes of the checklist, the diagnosis can be made by any health professional acting within their approved scope of practice.			

4. Challenging behaviours and/or need for intensive social support				
a.	The person displays challenging behaviours which require ongoing management and prevention including:			
	 Episodic catastrophic behaviours such as severe physical and verbal abuse, violent mood swings, aggression; and/or 	□i		
	ii) Is considered at high risk of leaving without warning with ongoing staff intervention required to prevent this from occurring.	□ii		
AND/OR				
b.	The person requires intensive social support or intensive assistance with continuing to perform activities of daily living including initiation of and assistance with:			
	 Personal care and hygiene matters (for example, shows aversion to showering and washing hands, has problems with toileting and dressing, requires assistance or guidance with meals); and/or 	□i		
	ii) Social and recreational activities, with significant one-on-one staff intervention necessary to enable the client to participate in community activities.	□ii		

APPRAISAL TOOL B - INDIGENOUS AUSTRALIANS: ADDITIONAL SPECIAL NEEDS

The care recipient must demonstrate complex behavioural and/or social support needs. They must meet EACH of the following four criteria:

	Tick if YES			
1. Indigenous status				
Is the person of Aboriginal or Torres Islander origin?	□1			
2. Financial Status				
The person is eligible for the maximum basic rate of social security person defined in the Social Security Act 1991 or service pension or disabiling the Veterans Entitlement Act 1986.				
3. Relevant behavioural diagnosis				
The person has mental and behavioural diagnosis associated with o following disorders (ACAP codes shown in brackets). This checklist range of conditions recognised by the Mental and Behavioural Diagrathe ACFI:	aligns with the			
 Dementia, Alzheimer's disease including early onset, late onset mixed type or specified.(ACAP code 500) 				
ii) Vascular dementia e.g. multi-infarct, subcortical, mixed (ACAP of				
iii) Dementia in other diseases, e.g. Pick's Disease, Creulzfeldt-Jal Parkinson's, HIV (ACAP code 520)	kob, Huntington's,			
iv) Other dementia, e.g. Lewy Body, alcoholic dementia, unspecifie 530)	d (ACAP code □iv			
v) Delirium (ACAP code 540)	□v 			
vi) Depression, mood affective disorders, Bi- Polar (ACAP code 55	OA)			
vii) Psychoses e.g. schizophrenia, paranoid states (ACAP code 550	OB)			
viii) Neurotic, stress related, anxiety, somatoform disorders e.g. pos disorder, phobic and anxiety disorders, nervous tension/stress,	obsessive-			
compulsive disorder (ACAP code 560)	□ix			
 ix) Intellectual and developmental disorders e.g. intellectual disabili autism, Rhet's syndrome, Asperger's syndrome etc.(ACAP code 				
 Other mental and behavioural disorders e.g. due to alcohol or p substances (includes alcoholism, Korsakov's psychosis), adult p behavioural disorders (ACAP code 580) 				
For the purposes of the checklist, the diagnosis can be made by any professional acting within their approved scope of practice.	health			

4. Challenging behaviours and/or need for intensive social support				
a.	The person displays challenging behaviours which require ongoing management and prevention including:			
	 Episodic catastrophic behaviours such as severe physical and verbal abuse, violent mood swings, aggression; and/or 	□i		
	ii) Is considered at high risk of leaving without warning with ongoing staff intervention required to prevent this from occurring.	□ii		
AND/OR				
b.	The person requires intensive social support or intensive assistance with continuing to perform activities of daily living including initiation of and assistance with:			
	 Personal care and hygiene matters (for example, shows aversion to showering and washing hands, has problems with toileting and dressing, requires assistance or guidance with meals); and/or 	□i		
	ii) Social and recreational activities, with significant one-on-one staff intervention necessary to enable the client to participate in community activities.	□ii		

Note

1. All legislative instruments and compilations are registered on the Federal Register of Legislative Instruments kept under the *Legislative Instruments Act 2003*. See http://www.frli.gov.au.