

Living Longer Living Better: Aged Care Reform

The Living Longer Living Better: Aged Care Reform Measures were introduced in May 2012; they remain consistent with the Current Governments focus. The link to the full package can be found at: <http://www.health.gov.au/internet/publications/publishing.nsf/content/ageing-aged-care-reform-measures-toc>

The package is far reaching and comprehensive in its approach to overhaul and standardise aged care systems across Australia. The measures could be summarised into three main areas:

1. Staying at Home - increased programs and funding to enable Older Australians to stay at home longer and with better Carer support; to include a universal entry point, easier access, single funding instrument, single assessment tool
2. Residential Care - simplifying the transition to aged care, a universal assessment tool, better directed care, better relationships with other health care providers
3. Tackling Dementia - specific programs to support dementia in the home and in residential aged care

How this relevant to General Practice will change over time and as each new schedule arises the list below will grow; this is an attempt to bring you up to speed with what has occurred.

	Program / Initiative	Intention / Scope	Impact / Relevance to General Practice
Staying at Home	1. My Aged Care: a website / telephone support system which is accessible by all Australians at all times. Clients will be registered and then have a single client record which enables each step / provider to engage. Please go to: www.myagedcare.gov.au	My Aged Care Gateway: a single entry point for: <ul style="list-style-type: none"> - Funding and income assessment for community care. - Information about services available and eligibility. - Initial Over the Phone assessment; followed up by referral to Assessment team visit. - Support and information for Carers. - Client record to be linked the eHealth record. 	Need to know what is on the site an able to refer patients to access the system.
	2. National assessment tool; the ACAT will be remodelled to be a more consistent assessment tool.	The new assessment will take into account the clinical assessment in a similar fashion to the ACFI.	General Practice may be asked to provide Health assessments to support the new funding tool; this has still to be confirmed but has been a key recommendation.

	3. My Aged Care packages: review and ongoing use.	A scale of packages which can be scaled to the current conditions and needs of the client: <ul style="list-style-type: none"> - Packages will be reviewed against changing conditions and needs - There will be a consistent use and engagement of General Practice to support management of conditions, medications and use of the eHealth record. 	General Practice will have a recognised role in the support and care for home care package delivery.
Residential Care	1. All beds transition to being Commonwealth Funded.	Standardised funding and assessment for all aged care beds. State funded beds transitioned to Commonwealth funding 2012 to 2013. All assessed and Funded using the ACFI.	ACFI (Aged Care Funding Instrument) requires documented clinical diagnosis and guidance from General Practitioners.
	2. Removal of Classification for Care.	RACF Beds are no longer Low or High in terms of funding. Each Resident is now assessed according to their actual conditions, requirements for care and support of activities for daily living.	A Comprehensive Medical Assessment (CMA) is best practice to ensure ALL conditions are listed. GP's should actively use the Care planning/case conferencing items to document directives for care. Please see ACFI handout.
	3. Introduction of Better Medication management systems.	To reduce unnecessary medication use in RACF and the complications which arise. RACF's will be updating and improving the systems they have in place to deliver and monitor medication. To institute and actively use Medication Advisory Committees in RACF; these are to comprise of Pharmacy, General Practice and RACF staff.	The General Practice needs to ensure that they are referring for the Residential Medication Management Review and that they use and or refer to this document in their prescribing. General practice be prepared to support Medication Advisory Committees in the RACF.
Tackling Dementia	<i>Full program details to be updated in May 2016.</i>		