

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Additional Estimates 13 & 15 February 2013

Question: E13-022

OUTCOME 4: Aged Care and Population Ageing

Topic: ACFI Monitoring Group

Type of Question: Written Question on Notice

Senator: Senator Smith

Question:

Can the Department please provide copies of the minutes of all meetings of the ACFI Monitoring Group since (but not including) 26 September 2012?

Answer:

The Department of Health and Ageing provides copies of the following meetings:

- 23 October 2012(Attachment A);
- 13 December 2012 (Attachment B); and
- 8 February 2013 (Attachment C).

The minutes of the Aged Care Funding Instrument (ACFI) Monitoring Group meeting held on 27 March 2013 are awaiting endorsement by members.



Australian Government

Department of Health and Ageing

**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 3 – 23 October 2012**

Members

Ms Rosemary Huxtable (Chair)	Department of Health and Ageing
Mr Ross Johnston	Aged Care Guild
Mr Richard Gates	Australia and New Zealand Banking Group
Mr Nick Mersiades	Catholic Health Australia
Mr Ian Yates	COTA Australia
Mr Gerard Mansour	Leading Age Services Australia
Ms Lee Thomas	Australian Nursing Federation
Ms Netty Horton	The Salvation Army
Ms Maree McCabe (proxy)	Alzheimers Australia
Dr Jeffrey Rowland	Australia and New Zealand Society for Geriatric Medicine

Departmental Attendees

Ms Carolyn Smith	Department of Health and Ageing
Mr Iain Scott	Department of Health and Ageing
Mr Keith Tracey-Patte	Department of Health and Ageing

Secretariat

Mr Robert Hurman	Department of Health and Ageing
Ms Kathryn Foley	Department of Health and Ageing

Apologies

Prof John Kelly	Aged and Community Services Australia
Mr Chris Grover	Uniting Care Australia
Mr Glenn Rees	Alzheimer's Australia
Prof Tracey McDonald	Australian College of Nursing

Agenda Item 1 Welcome

The Chair welcomed all members, noting Professor Tracey McDonald was attending by teleconference from China and apologies had been received from Prof John Kelly, Mr Chris Grover and Mr Glenn Rees. The Chair welcomed new member Ms Horton to her first meeting and Ms Maree McCabe who was attending as a proxy for Mr Rees. Due to technical difficulties, Professor McDonald was unable to join the meeting by phone.

Agenda Item 2 Conflict of Interest

Members were asked to declare any additional conflicts of interest to the group. No declarations were made.



Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 3 – 23 October 2012

Agenda Item 3 Minutes and Actions from Previous Meeting

The Chair noted that the Department had circulated the minutes from meeting 1 (10 August 2012) and the final terms of reference on 19 October 2012. Members provided additional comments on the minutes from meeting 2 (26 September 2012).

Mr Johnston requested the minutes of meeting 2 be amended to reflect his request for specific advice on total residential care budget compared to total residential care expenditure, on a monthly basis and an annual basis. He also repeated his request for this information to be provided at future meetings, in addition to the average subsidy information provided at the current meeting.

Members endorsed the Meeting Outcome document from meeting 2 for circulation.

Action item

- A1. The Department will circulate the revised minutes from meeting 2 to members out of session.
- A2. The Department will upload the meeting 2 meeting outcome document on to the Department of Health and Ageing website.

Action outcome:

- A1. The Department circulated the revised meeting outcomes for meeting 2 to members on 15 November 2012.
- A2. On 29 October 2012, the meeting 2 meeting outcome document was posted on www.health.gov.au/ACFI .

Agenda Item 4 Expenditure Growth

Members noted the agenda paper provided and asked for further clarification of the formulation of the forward estimates. Members were concerned about the ability of the group to track expenditure when the actual budget for residential aged care spending remains unclear.

The Chair and departmental members answered a number of questions from the members about the forward estimates. It was agreed the Department would prepare a guide to the forward estimates model for the benefit of members. Mr Johnston agreed to provide a blank template with desired financial information for consideration by the Department.



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 3 – 23 October 2012**

The Group also discussed the expenditure graph in detail (attachment A to agenda paper 4) and requested additional information is included in this graph for future meeting including information on monthly averages and data for 2011-12. The Department noted this may need to be broken into two graphs.

Action item

A3. Mr Johnston agreed to provide a blank template with desired financial information for consideration by the Department.

A4. The Department will prepare a brief background paper on the forward estimates model as background for members.

A5. The Department will review the format of current data tables and expenditure graphs.

Agenda Item 5 Report on the Impact of Measures: ADL; CHC; and Price Reduction

The Monitoring Group reviewed ACFI data from July and August 2012 which showed that average ACFI subsidies in August 2012 (\$134.77) were in line with average subsidies provided in July 2012 (\$134.78) and 0.6% above June 2012 (\$133.96). Average subsidies for July to August 2012 (134.78) were 5.71% above the same period last year (\$127.50).

The Monitoring Group noted that, as only two months of data was available, it remained too early to draw conclusions on expected growth against the Budget. The analysis was further complicated by the higher than usual number of appraisals in June (9,860), followed by lower than usual numbers of appraisals in July (5,403) and August (6,083) compared to typical levels of around 7,300 per month. The Group expected to gain greater confidence in data over the coming months.

The Monitoring Group reviewed a range of data in relation to the impact on different service/provider characteristics. Noting the limitations on the data, as mentioned above, the changes to date do not appear to have had a disproportionate impact on any service/provider type. The Department noted it would continue to work on ways to identify whether there were any specific impacts on services for people with dementia.

The Department noted some parts of the sector appeared to have lower than average ACFI subsidy levels than others: smaller services, services caring for people with a history of homelessness and services located in remote areas. As this was not a result of the impact of the ACFI changes, it was outside the scope of the Monitoring Group. However the Department agreed to explore whether it is a matter which could be referred to the Aged Care Financing Authority.



Australian Government

Department of Health and Ageing

**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 3 – 23 October 2012**

Agenda Item 6 Proposed February 2013 Changes

The Chair noted the purpose of this item was to provide feedback on the comments received on the 1 February 2013 changes discussed at the previous Monitoring Group meeting and to provide an update on the current process.

Mr Tracey-Patte briefly summarised the proposed 1 February 2013 changes and noted the comments received from members. He supported the comment from members that these changes would not change the intent of the tool but would enhance the evidence recorded to support appraisals and therefore improve the validation process.

Mr Mansour commented on the adaptability of current IT systems to adjust to the proposed changes. He noted he had sought advice from a range of IT vendors and has received an early report which highlighted some systems issues. The Chair urged all peak bodies to continue discussions with IT vendors to ensure systems changes can be implemented in a timely manner.

Members noted it was important to ensure communication with the sector clearly explains the proposed changes and how they would be implemented. The Department agreed to develop a communication strategy for consideration by the Monitoring Group.

Action Item

A6. The Department will prepared a communications strategy for consideration by the Group

Agenda Item 7 Report from the ACFI Technical Reference Group

Members received a verbal report on the meeting of the Technical Reference Group on Friday 19 October 2012.

The TRG reviewed a set of proposed changes to the ACFI to be implemented by 1 July 2012 which will contribute to the moderation of future growth in aged care subsidies. The TRG also noted a schedule which identified the ACFI change proposal which will be considered in at the October and November meetings.

The TRG agreed to recommend to the ACFI Monitoring Group two changes to the ACFI from 1 July 2013:



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 3 – 23 October 2012**

1. That providers be required to use an appropriate pain assessment tool to support claims under ACFI 12.3, 12.4a and 12.4b. Appropriate tools include the Modified Residents Verbal Brief Pain Inventory (M-RVBPI), the Abbey Pain Scale and the Pain Assessment in Advanced Dementia Scale (PAINAD).
2. Additional wording be added to questions 2 and 7 to limit incongruent claiming: "Generally, a claim of D on question 2 should not be accompanied by a claim of C or above on question 7. The only circumstance where this would be allowed is where a resident requires physical assistance with manual lifting equipment for transfers but is then able to freely move themselves and exhibits problem wandering to the frequency specified within rating C or D in question 7".

The TRG also considered a proposal that the weighting of item 4b (complex pain management) within question 12 be reduced to four points. However, this proposal was not endorsed. Some members thought this change would not achieve what was hoped, while others thought it may discourage appropriate complex pain management interventions.

The TRG also discussed a number of ideas for longer term consideration. This included:

- Further restructuring of the pain management questions;
- Redistributing the funding from the medication management question so that behaviour issues associated with medication are counted within the behavior domain and other complex medication management issues (eg swallowing and intravenous injection) are considered within question 12 (complex health care).

Members sought clarification about process by which issues were put forward to the TRG for consideration. It was noted that the Department had identified issues raised by service providers, ACFI validation officers and which were identified as part of the 2011 ACFI review.

Action Item

A7. Following endorsement of the minutes by the TRG, a paper on the outcomes of the TRG meeting will be provided to the ACFI Monitoring Group

Agenda Item 8 Meeting Outcomes

Members noted the draft meeting outcomes document and provided a number of specific edits. The Secretariat agreed to circulate a finalised version to members as soon as possible.



Australian Government

Department of Health and Ageing

**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 3 – 23 October 2012**

Action Item

A8. The Secretariat will circulate a revised meeting outcome document for comments.

Action Outcome

On 5 November 2012, a revised meeting 3 outcomes document was provided to all members.

Agenda Item 9 Other Business

The Chair noted the analysis of monthly data required a significant amount of time and the current forward meeting schedule did not allow enough time. She suggested the next meeting could be rescheduled to later in the year. Members agreed to consider alternative meeting dates.

The Chair also asked the Group to consider whether future meetings could be held using video or teleconference noting there were resources in each state and territory which could be accessed. Members agreed this was a good alternative

Action item

A9. The Department will provide alternative meeting dates for consideration of members.

A10. The Department will provide advice on the availability of video or teleconference for future meetings.



Australian Government
Department of Health and Ageing

Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 4 – 13 December 2012

Members

Mr Iain Scott (Acting Chair)	Department of Health and Ageing
Mr Ross Johnston	Aged Care Guild
Mr Richard Gates	Australia and New Zealand Banking Group
Mr Nick Mersiades	Catholic Health Australia
Mr Ian Yates	COTA Australia
Mr Gerard Mansour	Leading Age Services Australia
Ms Lee Thomas	Australian Nursing Federation
Ms Netty Horton	The Salvation Army
Mr Glenn Rees	Alzheimer's Australia
Prof Tracey McDonald	Australian College of Nursing
Prof John Kelly	Aged and Community Services Australia
Dr Jeffrey Rowland	Australia and New Zealand Society for Geriatric Medicine

Departmental Attendees

Ms Carolyn Smith	Department of Health and Ageing
Mr Keith Tracey-Patte	Department of Health and Ageing

Secretariat

Mr Robert Hurman	Department of Health and Ageing
Ms Kathryn Foley	Department of Health and Ageing

Apologies

Ms Rosemary Huxtable (Chair)	Department of Health and Ageing
Mr Chris Grover	Uniting Care Australia

Agenda Item 1 Welcome

The Chair welcomed all members, noting Ms Rosemary Huxtable and Mr Chris Glover were apologies for this meeting.

Agenda Item 2 Conflict of Interest

Members were asked to declare any additional conflicts of interest to the group. No declarations were made.

Agenda Item 3 Minutes and Actions from Previous Meeting

The Chair noted the minutes from meeting 3 (23 October 2012) and invited comments from members. No edits were proposed. Members also noted the status of the action items.



Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 4 – 13 December 2012

Agenda Item 4 Expenditure Growth

Members considered the range of data tables provided with the agenda papers. Members noted the flattening trend of growth, and the change in the difference between growth and the budgeted forward estimates. Given the trajectory of the trend, members sought advice from the Department about the approach if the cumulative average of the rate of growth dropped below the budget estimate. The Department noted that if remedies to address any drop in growth below the estimate were required, they could be implemented quickly.

Agenda Item 5 Report on the Impact of Measures: ADL; CHC; and Price Reduction

The Monitoring Group discussed the tables provided which identified the impact of the ADL and CHC measure. It was noted these changes affect a small percentage of the population but have had a strong impact on the rate of growth in average subsidies.

Members sought advice on whether the high number of appraisals in June, followed by a lower number in subsequent months, was still having an impact on growth, or whether recent data on average subsidies is likely to represent the ongoing trend.

Members discussed the possibility of releasing data and holding a meeting in early January 2013, noting the importance of monitoring the impact of the measure closely. The Department noted that it would not be possible to hold a meeting in January due to staff availability but that it would aim to hold a meeting in early February.

Action Item

A1. The Department will confirm a meeting for 8 February out-of session.

Action Outcome: Confirmed with members on 10 January 2013.

Agenda Item 6 1 February 2013 Changes – Communications Strategy

The Chair noted the purpose of this item was to provide feedback on the comments received on the 1 February 2013 changes discussed at the previous Monitoring Group meeting, and to provide an update on the current process.

Mr Tracey-Patte briefly summarised the proposed 1 February 2013 changes and noted the comments received from members. He supported the comment from members that the 1 February 2013 changes would not change the intent of the tool but would enhance the evidence recorded to support appraisals and therefore improve the validation process.



Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 4 – 13 December 2012

Mr Mansour commented on the adaptability of current IT systems to adjust to the proposed changes. He noted he had sought advice from a range of IT vendors and has received an early report which highlighted some systems issues. The Chair urged all peak bodies to continue discussions with IT vendors to ensure systems changes can be implemented in a timely manner.

The Chair noted the comments received from the Monitoring Group and agreed to distribute the fact sheet, and Questions and Answers document on the 1 February 2013 changes to members out of session. Members noted that some stakeholder groups had been omitted and the Department undertook to revise the strategy to include these groups.

Action Item

A2. The Department will distribute the fact sheet for the 1 February 2013 changes, and question and answer document.

Action outcome: Completed 17 December 2012

A3. The Department will update the Communications Strategy to include omitted stakeholder groups.

Action outcome: Completed 2 January 2013

Agenda Item 7 Report from ACFI Technical Reference Group -
Proposed 1 July 2013 changes

Members discussed the report from the meeting of the Technical Reference Group (TRG) on Friday 19 October 2012.

The TRG reviewed a set of proposed changes to the ACFI to be implemented by 1 July 2013. The TRG agreed to recommend, to the ACFI Monitoring Group, two changes to the ACFI from 1 July 2013:

1. Providers will be required to use an appropriate pain assessment tool to support claims under ACFI 12.3, 12.4a and 12.4b. Appropriate tools include the Modified Residents Verbal Brief Pain Inventory (M-RVBPI), the Abbey Pain Scale and the Pain Assessment in Advanced Dementia Scale (PAINAD).
2. Additional wording be added to questions 2 and 7 to limit incongruent claiming: "Generally, a claim of D on question 2 should not be accompanied by a claim of C or above on question 7. The only circumstance where this would be allowed is where a resident requires physical assistance with manual lifting equipment for transfers but is then able to freely move themselves and exhibits problem wandering to the frequency specified within rating C or D in question 7".



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 4 – 13 December 2012**

The Group requested amendments to the impact statements that had been prepared for these two proposals.

A number of change proposals were also considered by the TRG at the 16 November meeting. The Department noted that the TRG outcomes and recommendations from their 16 November meeting had not yet been finalised due to further consultation out-of-session. The Monitoring Group considered three proposals from the 16 November 2012 meeting, noting their status. Monitoring Group members requested they be discussed in detail at the next Monitoring Group meeting to allow for consultation with their members. The Department agreed to send the final TRG meeting outcome, and agreed proposals with impact statement, to member's out-of-session for feedback by mid-January 2012.

Members noted it was important to ensure communication with the sector that clearly explains the proposed changes and how they would be implemented. The Department agreed to develop a communication strategy for the 1 July 2013 changes for consideration by the Monitoring Group.

Action Items

A4. The Department will circulate all proposals from the October and November TRG meetings including impact statements, once endorsed by the Technical Reference Group. The Department will also provide impact statements for each proposal for comments from members by mid-January.

Action Outcome: Completed 20 December 2012

A5. The Department will prepare a communications strategy for the 1 July 2013 changes for consideration by the Monitoring Group.

Action Outcome: See Agenda Item 6

Agenda Item 8 Dementia Data and Analysis

Members noted information provided in Agenda paper 8 on the development of a data analysis model to determine the specific impact of changes on residents with dementia. The Department noted the difficulties in identifying specific impacts on this group noting the prevalence of this diagnosis in residents and the broad range of dementia classifications used.

The Department reiterated its commitment to continue to work with Mr Rees and Alzheimer's Australia to identify possible models for data analysis.



Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 4 – 13 December 2012

Action Item

A6. The Department will continue working with Mr Rees and Alzheimer's Australia to undertake further analysis on the impact of the measure on people with dementia.

Agenda Item 9 Budget Information and Guide to Forward Estimates Model

The Chair opened the discussion on this item noting that consideration of how ACFI funding is incorporated in the Forward Estimates Model had been an item of discussion at each of the previous ACFI meetings. He acknowledged the work of Ross Johnston in working with the Department to develop the attached table which provides a broader framework to discuss the specific ACFI measure.

The Chair emphasised the sensitivity of the information provided in agenda paper 9 and its attachments, and asked that all documents be treated as confidential and not to be circulated outside the committee. He noted that the Department had been generous in the information provided in order to ensure the Group could undertake its role in monitoring the impact of the implementation of the ACFI measure. It was important to note that the information provided was only a small proportion of the full aged care budget and, if used out of this specific context, could be misinterpreted.

The Department noted it would need to review whether this level of information could continue to be provided.

Agenda Item 10 Meeting Outcomes

Members suggested a number of additions to the Meeting Outcomes document to simplify the language and provide clarity about the issues discussed. Members agreed the outcomes document should emphasise that it is still too early to determine the full extent of the impact of the measures.

Action item

A7. The Department will revise the meeting outcomes document and distribute it to members out-of-session.

Action Outcome – Completed 2 January 2013

Agenda Item 11 Other Business

Members discussed briefly the role of the group. Some members noted the Group had dual aims of monitoring the impact of the changes to the instrument as well as improving its operation. Members queried how issues which were discussed at the Monitoring Group but were outside the scope of the group were considered.



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 4 – 13 December 2012**

Departmental officers commented they had a wide portfolio of policy responsibilities within aged care policy, and the issues raised at these meetings also contributed to the consideration of other policy work undertaken in their portfolio and this was noted.

Members discussed the need to confirm a meeting schedule for 2013 at the earliest possible opportunity. Some members noted they were involved in a number of committees and had already committed to a range of meetings in 2013. A number of members suggested 8 February 2013 as being the best date in for the first meeting in 2013.

Members discussed whether there was a need for a meeting in January 2013 to assess the data received. It was leave arrangements during January may limit the type of data analysis which could be provided but October and November data would be available in late January for discussion at the 8 February 2013 meeting.

The Chair informed the Group that some providers would receive a letter advising them that the classification of some residents had been changed. He noted this reclassification related to the 1 July 2012 ACFI changes that were announced in June 2012 and would only affect residents who had entered care since 1 July 2012 and residents who have had their classification changed recently. The Chair emphasised that this was not a new Government decision and that no adjustments would be made. The Department agreed to provide members de-identified copies of these letters, and a question and answer document which would be posted on the website, and a short description they could use in communication materials.

The Chair stated that these changes would have no impact on providers and they would not need to take any remedial action. As the classifications will be amended using reclassification powers in the Act to align with the ACFI changes announced in June, no adjustment needs to be made to past or future payments and providers will continue to receive funding in line with the announced ACFI changes.

The Chair noted this action was required due to an administrative oversight by the Department. He also stated this reclassification did not represent a change to the ACFI nor a new Government decision but was ensuring that that the measures announced in June are given the necessary effect.

Action Items

A8. The Secretariat will circulate proposed meeting dates out of session.

Action Outcome: Completed 10 January 2013



Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 4 – 13 December 2012

A9. The Secretariat will provide members with a copy of the letter which will be sent to providers affected by the recent reclassification of residents. A copy of the proposed questions and answers will also be circulated. The Secretariat will also prepare a short paragraph summarising the issue and the minimal impact on providers.

Action Outcome: Completed 21 December 2012



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 5 – 8 February 2013**

Members

Ms Rosemary Huxtable (Chair)	Department of Health and Ageing
Mr Ross Johnston	Aged Care Guild
Mr Richard Gates	Australia and New Zealand Banking Group
Mr Nick Mersiades	Catholic Health Australia
Mr Ian Yates	COTA Australia
Mr Patrick Reid	Leading Age Services Australia
Ms Netty Horton	The Salvation Army
Mr Glenn Rees	Alzheimer's Australia
Prof Tracey McDonald	Australian College of Nursing
Prof John Kelly	Aged and Community Services Australia

Observer

Ms Kay Richards	Leading Aged Services Australia
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Departmental Attendees

Ms Carolyn Smith	Department of Health and Ageing
Mr Iain Scott	Department of Health and Ageing
Mr Keith Tracey-Patte	Department of Health and Ageing

Secretariat

Mr Brian K Harrison	Department of Health and Ageing
Ms Kathryn Foley	Department of Health and Ageing

Apologies

Mr Chris Glover	Uniting Care Australia
Ms Lee Thomas	Australian Nursing Federation
Dr Jeffrey Rowland	Australia and New Zealand Society for Geriatric Medicine

Agenda Item 1 Welcome

The Chair welcomed all members, noting Mr Chris Glover and Ms Thomas were apologies for this meeting. Dr Rowland was expected to join the meeting by teleconference but was unable to join due to clinical commitments.

The Chair noted Mr Mansour from Leading Aged Services (LASA) had stepped down from his position as Chief Executive Officer of LASA on 1 February 2013 and had therefore stepped down from the ACFI Monitoring Group. The Chair acknowledged Mr Mansour's contribution to the committee.

The Chair introduced Mr Reid who is the new Chief Executive Officer (CEO) for LASA and is the new representative for LASA on the committee.



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 5 – 8 February 2013**

As Mr Reid commenced his role on 7 February 2013, the Chair noted Ms Richards's attendance as an observer to assist Mr Reid.

Agenda Item 2 Conflict of Interest

Members were asked to declare any additional conflicts of interest to the group. No declarations were made.

Agenda Item 3 Minutes and Actions from Previous Meeting

The Chair noted the minutes from meeting 4 (13 December 2012) and invited comments from members.

Ms Horton requested that the minutes from this meeting be amended to note that the Department would write to the Aged Care Funding Authority (ACFA) to request consideration of aged care funding arrangements for providers who provide specialist homeless services.

The Chair noted that ACFA had received a letter from the Chair of the Prime Ministers Council on Homelessness requesting further investigation of this issue, and that a response was being prepared. She also noted that the departmental officials present had provided advice to ACFA about the multifaceted nature of aged care service delivery for people with a background of homelessness and the need to ensure any funding measures considered the impact on this sector.

Mr Johnston sought clarification of the minutes for agenda item 9 from this meeting. He noted that the papers provided at this item were informative and he was wanted clarification of what advice would be provided in the future. The Department agreed to consider this request.

The Chair noted that two papers had been provided at agenda item 9: a summary paper on the forward estimates model; and a summary of the Residential Care Subsidies Budget information. The Chair noted the aim of the former paper was to provide advice to members about the forward estimates process. The Chair stated the latter paper was to remain confidential to this group and included information about the aged care budget. The Chair agreed to amend the action list for this meeting to add an action for the Department to consider what information on the aged care budget could be provided in the future.

Members noted the action item list and the status of each item.

Action Item

A1. The Secretariat will amend the minutes and action items list for the meeting held on 13 December 2012.



Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 5 – 8 February 2013

Agenda Item 4 Expenditure Growth

Members considered the range of data tables provided with the agenda papers. Mr Tracey-Patte noted the tables showed that growth was tracking in line with the budget within the forward estimates. He also noted that the expected level of growth was in-line with departmental modelling of the impact of the 1 July 2012 changes.

Mr Mersiades noted the latest data showed an increased impact for services in remote and very remote areas and asked for clarification about this data. Mr Tracey-Patte noted this data reflected the change in resident mix for these services and did not reflect the broader impact of the measure. Mr Mersiades requested further information on the impact for this group at the next monitoring group meeting.

Ms Horton noted her organisation had recently completed some calculations on the average rate of subsidies providers to providers with specialised homeless services. She noted the base value of subsidies was consistently less than the national average. The Department agreed to review this issue and discuss it with Ms Horton out-of-session.

Mr Tracey-Patte noted that the current rate of impact for services that specialised in caring for the homeless was in-line with departmental modelling of the rate of impact. He further noted that the impact on other providers had been lessened by the significant number of appraisals brought forward in June 2012 and that homeless providers did not appear to have brought forward their approvals. Mr Tracey-Patte agreed to undertake additional analysis of the appraisal data submitted by homelessness providers to gain a greater understanding of their funding claims.

Action Items

A2. The Department will undertake additional analysis of the appraisal data for remote and very remote providers to determine the factors affecting their growth and provide this analysis for the next meeting.

A3. The Department will undertake additional analysis of the appraisal data for specialised homeless services to determine the factors affecting their growth and discuss it with Ms Horton out-of-session.



Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 5 – 8 February 2013

Agenda Item 5 **Report on the Impact of Measures: ADL; CHC; and Price Reduction**

Members noted the data provided on the impact of the measures on a range of provider groups. Mr Tracey-Patte spoke to this item and noted that the November data showed the number of appraisals submitted in this period was closer to historical rates.

Discussion continued about the impact of these measures on the homeless providers which had experienced a higher level of impact compared to other groups. It was noted that the analysis of the data for homeless providers will provide further insight into the factors driving the data.

Agenda Item 6 **1 July 2013 Changes**

The Chair commenced the discussion by outlining the range of comments received from members. She suggested each of the proposals be considered in turn.

Proposal 1 - Providers will be required to have an appropriate pain assessment for the pain management questions.

The chair noted the intent of this proposal was to bring the evidence requirement for the three pain questions (12.3, 12.4a and b) in line with other similar questions in the ACFI, including question 1-4 which had been revised as part of the changes implemented on 1 February 2013.

Members asked whether this proposal would mandate the use of the tools recommended by the Department. It was noted that that the Department was not mandating the use of any specific tool but would expect providers to use an evidence based tool. It noted the recommended tools were evidence based and has been developed by the aged care sector. Members noted that education of aged care review officers would be an important component of the implementation of this proposal.

Recommendation: Members support the submission of this proposal to Minister Butler for his consideration.



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 5 – 8 February 2013**

Proposal 2 – That additional wording is added to Question 2 and 7 to prevent claiming of a D in ACFI 2 (Mobility) and a D in ACFI 7 (Wandering) except in specific circumstances.

The Chair noted the aim of this proposal was to tighten the ability for providers to claim this combination of scores without reasonable evidence. The Group noted the previous detailed discussion about credible clinical situations where this combination of scores is valid. Legitimate claiming would be accepted by aged care review officers if the resident's record reflected an ongoing pattern of behaviour.

Following discussion of the group, it was agreed that it was not appropriate at this time to create a system block for this claim type as it was felt this would not offer the flexibility of addressing the care requirements of residents with complex needs. It was agreed the data on this claiming pattern would be monitored and if required, a change to the payment system could be considered in the future.

Recommendation: Members support the submission of this proposal to Minister Butler for his consideration.

Proposal 3 – Additional wording will be added to the ACFI User Guide to clarify ACFI 8 Verbal Behaviour – Refusal of Care

Mr Tracey-Patte spoke to this proposal. He noted that this was a difficult issue to address and that the Technical Reference Group had discussed the language used in the proposal in detail.

He noted that the treatment of this issue was complex as it had to address the issue of competence as well as the interaction of state laws regarding consent. He also noted this was an area which required a high level of ongoing workforce training to ensure that staff was aware of the issues.

Members agreed that this proposal required further consideration. It was agreed that the claiming data for this item be monitored to determine whether there was any ongoing growth in claims.

Recommendation: Members did not support the submission of this proposal to Minister Butler at this time.



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 5 – 8 February 2013**

Proposal 4 – That additional wording is added to the ACFI User Guide and Answer Appraisal Pack for ACFI 12.12.

Mr Tracey -Patte opened discussion on this item by noting this proposal addressed complex clinical issues. It was noted that the majority of residents in aged care have frail elderly skin which required treatment. He noted the aim of this proposal was to identify a clinical diagnosis for skin integrity issues which required treatment which was in excess of routine care.

Members were concerned about the need for a diagnosis to support a claim. The difficulty of obtaining a timely diagnosis by a doctor was noted by a number of members. Other members were also concerned about the difference in the evidence requirements between a doctor's diagnosis and the Aged Care Client Record (ACCR).

Given the broad range of comments from members, it was agreed that this proposal required further consideration. Members supported the Chair's suggestion of returning this proposal to the Technical Reference Group for further consideration.

Recommendation: Members support the return of this proposal to the Technical Reference Group for further consideration.

Proposal 5 – Increased frequency of behaviours for a B rating in questions 7, 8, and 9, and a requirement for a diagnosis for a classification about low in the behaviour domain.

Mr Tracey-Patte summarised the aim of this proposal. He noted there had been feedback from aged care review officers that one instance of behaviour requiring intervention per week was not an accurate measure of a pattern of behaviour which required ongoing management.

Professor McDonald commented on this proposal noting that it was difficult to judge the cause of behaviour which required management from a small number of events. She also noted that if the behaviour was frequent then assessment by a health professional to determine a diagnosis was good practice.

Members reiterated their concerns about the availability of health professionals, especially in regional and remote areas. Professor McDonald noted that this issue could be alleviated with the use of nurse practitioners and other relevant allied health practitioners.



Australian Government

Department of Health and Ageing

Aged Care Funding Instrument (ACFI) Monitoring Group Minutes Meeting 5 – 8 February 2013

Ms Horton noted that this change could have a disproportionate effect on people with a history of homelessness as they can often have unpredictable infrequent behaviour, especially if alcohol is a contributing factor.

Members agreed that the first component of this proposal – to increase the frequency of behaviours for a B rating in questions 7, 8, and 9 – was a reasonable change and could be recommended to Minister Butler for consideration.

Members felt that the addition of a diagnosis for a classification above a low in a behaviour domain was a step too far at this time and required further consideration. Members noted the requirement for a diagnosis would be difficult to achieve within the time period (three months).

Recommendation: Members support the submission of the first part of this proposal – to increase the frequency of behaviours for a B rating in questions 7, 8, and 9 - to Minister Butler. Members did not support the submission of the second part of this proposal – a requirement for a diagnosis for a classification above a low in a behaviour domain – at this time. Members noted the inclusion of a diagnosis could be reconsidered if claims within this domain continued to grow.

The Chair noted their recommendations would be provided to the Minister for his consideration of changes to the ACFI on 1 July 2013.

Action Item

A4. The Department will prepare advice to Minister Butler detailing the committee's recommendations for changes proposed for 1 July 2013.

Agenda Item 7 Meeting Outcomes

Members suggested a number of additions to the Meeting Outcomes document to simplify the language and provide clarity about the issues discussed. Members agreed the outcomes document should emphasise that it is still too early to determine the full extent of the impact of the measures.

Action item

A5. The Department will revise the meeting outcomes document and distribute it to members' out-of-session.



**Aged Care Funding Instrument (ACFI) Monitoring Group
Minutes Meeting 5 – 8 February 2013**

Agenda Item 8 Other Business

Members discussed the proposed forward meeting schedule for the committee until June 2013. It was noted the proposed date in May (Friday 17 May 10.30am to 1pm) was not workable for many members as it clashed with the AEAG meeting. The Chair noted that the secretariat would advise members of the confirmed dates and canvas further possibilities for the May meeting.

Professor McDonald asked for advice on when the next Technical Reference Group meeting would be held. The Chair noted that the Technical Reference Group should reconvene once advice had been received from the Minister regarding the 1 July 2013 changes.

Action Items

A6. The Secretariat will circulate proposed meeting dates out of session.