

**Senate Community Affairs Committee**

**ANSWERS TO ESTIMATES QUESTIONS ON NOTICE**

**HEALTH PORTFOLIO**

**Additional Estimates 2016 - 2017, 1 March 2017**

**Ref No:** SQ17-000081

**OUTCOME:** 6 - Ageing and Aged Care

**Topic:** ACAT Assessments

**Type of Question:** Hansard Page 124, 1 March 2017

**Senator:** Polley, Helen

**Question:**

Senator POLLEY: I have some questions around the ACAT assessments. The number of ACAT assessments performed annually has actually reduced, with the figures that I have been provided, from 223,649 in 2013 to 192,087 in 2015. Can you explain to what the reason would be behind this? Bear in mind that we have to be very succinct if we can.

Ms Buffinton: I did not actually catch the figures, but I could hear that it was 2013 through to 2015-16. Was that the time frame?

Senator POLLEY: Yes. There has actually been a decline in the number of assessments that have been performed, and I would like you to explain why there has been a reduction.

Ms Buffinton: As you know, we have an agreement with the states. There is certainly no intention of a reduction or hold up in assessments during that period. As you know, they are demand-driven, so that would depend. I would have to take it on notice. Whether there have been reassessments—certainly from 2015-16 we did see that with the introduction of regional assessment services there has been a small flow to regional assessment services rather than to ACATs.

**Answer:**

There are a number of factors contributing to the reduction in ACAT assessment numbers. For example, from 1 July 2014 a legislative change removed the distinction between high and low care in residential aged care. This change led to a reduction in the number of overall assessments an ACAT undertakes, as reassessments for people whose circumstances has changed no longer needed to be conducted to establish if they would have a change to their care level. In addition, the introduction of the Regional Assessment Service and the My Aged Care contact centre resulted in a substantial number of referrals that were previously being forwarded to an ACAT, now being appropriately referred to a RAS for assessment. The Department of Health is engaging the jurisdictions to understand other factors that may be influencing assessment numbers.