



NAVIGATING THE AGED CARE SYSTEM IN AUSTRALIA

For Elders and their Carers



A Serious Conversation About Aging

When we are young, we can't imagine the difficulties we will face when we're old.

As we age and our health and strength, eyesight and hearing, memory and mental capacity diminish, we become less independent, and our quality of life diminishes. We may feel that we are burdening our family, adding to feelings of depression.

Most people don't give thought to what may happen if they become too old or unwell to care for themselves.



Just as having youth and good health is a test, so is aging. It is another phase of life with new tests, that, if we have the right mindset and follow Islamic guidance, we can make the most of our twilight years and earn a lot of rewards before we return to our Creator, insha Allah.

"It is Allah Who created you in a state of weakness, then gave strength after weakness, then, after strength, gave weakness and grey hair: He creates as He wills, and it is He Who has all knowledge and power." (30:54)

It is obligatory for Muslims to care for their elders until the end of their lives and there is a widely accepted expectation that this must be done no matter what. But this expectation must be looked at realistically, both by the families and elders themselves.

The reality may be that a family is unable to adequately care for their elder, or, sadly, an elder may not have anyone to care for them.

A family, or member of a family who look for help to care for their elders often suffer feelings of guilt. Caring for an elder can become psychologically and emotionally like caring for an unwell child, and it can be extremely distressing to "let go" and let someone else take care of them. But sometimes it is in the best interests of the elder that they are cared for by people with special training and in a setting where they will get the best help.

It is very important that the dignity of our elders be maintained. Elders have the right to make decisions about their own lives. Informing them of their options and involving them in the decision-making process maintains their sense of dignity and is best for their mental and emotional well-being.



Islam honors and respects the elderly.

"Your Lord has decreed that you worship none but Him, and that you be kind to parents. Whether one or both attain old age, say not to them a word of contempt, nor repel them, but address them in terms of honor. And, out of kindness, lower to them the wing of humility, and say: "My Lord! bestow on them thy Mercy even as they cherished me in childhood." (17: 23,24)

Most people don't plan for their old age. When things come to a crisis point is the most difficult time to start searching for help and making decisions. We can't plan everything ahead but having knowledge of available services and having an Advance Care Plan is helpful, insha Allah.

There are services available but navigating the aged care system in Australia can be very difficult if you are a family member who is already under a lot of stress or an elder trying to get help on their own.

The following information outlines services available through My Aged Care and other organisations, along with some tips that will help make things easier, insha Allah.



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WHERE TO GET HELP - QUICK LIST

- **My Aged Care – subsidised care services for senior Australians.** Call 1800 200 422 Monday to Friday 8am to 8pm, Saturday 10am to 2pm or online at <https://www.myagedcare.gov.au/>
- **Carer Gateway** – help for Carers. Call 1800 422 737 or online at; <https://www.carergateway.gov.au/>
- **Carers Australia** - help for Carers <https://www.carersaustralia.com.au/>
- **Translating and interpreting services.** Call 131 450 or 1800 200 422.
- **National Relay Service** - if you have a hearing or speech impairment. Call the NRS Helpdesk on 1800 555 660 or online at; <https://www.dss.gov.au/contact/national-relay-service>.
- **Financial Information Service (FIS)** To find out more about FIS, or to make an appointment, call 132 300 and say “Financial Information Service” when asked why you are calling.
- **Australian Government’s National Aged Care Advocacy Program (NACAP)** – help for elders and carers having problems with care services. Call 02 6289 1555 or Freecall 1800 020 103. Monday to Friday 8:30am to 5:30pm or online at; <https://www.health.gov.au/initiatives-and-programs/national-aged-care-advocacy-program-nacap>
- **Older Persons Advocacy Network (OPAN)** 1800 700 600 (freecall) or visit the <https://opan.org.au> 8am to 8pm Monday to Friday and 10am to 4pm on Saturdays.
- **Advance Care Planning Australia** - <https://www.advancecareplanning.org.au/> or call the National Advance Care Planning Support Service on 1300 208 582. 9am – 5pm, Monday – Friday (AEST).
- **Community Visitors Scheme** - <https://www.health.gov.au/initiatives-and-programs/community-visitors-scheme-cvs>. Contact the CVS network member in your state or territory.

- **Aged Care Quality and Safety Commission** - advocacy help for carers. Call 1800 951 822 or online <https://www.agedcarequality.gov.au/making-complaint/lodge-complaint>
- **Local District Health Services / Primary Health Networks** – clinics, community nursing - specialist wound care.
NSW - <https://www.health.nsw.gov.au/lhd/Pages/default.aspx>
For states other than NSW please search for your Local District Health or Primary Health Network in your state.
- **Hospital Social Workers** – help with information, liaise with doctors and hospital staff on your behalf and connect you with services while hospitalised.
- **Dementia Support Australia**
https://dementia.com.au/referrals?utm_source=ACG&utm_medium=banners&utm_content=tp_acg_hp_ba&utm_campaign=DSAFY22
- **Australasian Delirium Association**- <https://www.delirium.org.au/Community-Information>



TIPS

TIP #1 – Keep a diary - record all your calls, appointments, important names and contact details to help you keep track.

TIP #2 – Appoint a **Regular Representative** to talk to My Aged Care on your behalf in case you ever need help communicating and managing your care services.

TIP #3 – Make an Advanced Care Directive and give family/friends and your doctors a copy. This will make sure everyone knows your wishes concerning your health and well-being management if you become unable to communicate with service providers and be a guide for them to act accordingly. See the **Advance Care Planning Australia** website for information and forms for all states,

<https://www.advancecareplanning.org.au/understand-advance-care-planning/advance-care-planning-explained> **or** call the **National Advance Care Planning Support Service** on 1300 208 582. 9am – 5pm, Monday – Friday (AEST).

TIP #4 – Appoint an **Enduring Guardian** to advocate on your behalf about your health and well-being in accordance with your wishes in your **Advanced Care Directive** in case you become mentally incapacitated.

TIP #5 - Appoint an **Enduring Power of Attorney** to handle all your financial affairs in case you become mentally incapacitated.

TIP #6 – Make or update your **Will**. <https://www.nzf.org.au/program/dignified-ending>, for links to lawyers who specialize in making Islamic Wills.



My Aged Care

OVERVIEW

The Australian government subsidises care for older Australians through **My Aged Care**. The following information is from the My Aged Care website. It is a concise collation of the most important aspects of how My Aged Care works to make it easier and quicker to access the basic information you need. There is more detailed and extra information on the My Aged Care website.

CONTACT MY AGED CARE

ONLINE -The My Aged Care website, <https://www.myagedcare.gov.au/>

CALL – 1800 200 422, Monday to Friday: 8am to 8pm, Saturdays: 10am to 2pm

FACE TO FACE - with an Aged Care Specialist Officer (ACSO) at a Services Australia Centre by booking an appointment, call 1800 227 475 on weekdays from 8am to 5pm.

ASSESSMENT PROCESS

Eligibility Check

- How much help you need
- If you are 65 years or older (50 years or older for Aboriginal or Torres Strait Islander people).
- If you are on a low income, homeless or at risk of being homeless, aged 50 years or older (45 years or older for Aboriginal and Torres Strait Islander people).
- If you are a younger person with a disability, dementia or other care needs not met through other specialist services you may also apply.

If you need help immediately you may be referred to services before your **needs assessment**.

You can appoint someone as your **representative** who can speak and act on your behalf ongoing. If you don't have anyone to help you, the **Older Persons Advocacy Network (OPAN)** can connect you with an organisation in your state who may be able to appoint someone to represent you with My Aged Care. You can contact them on 1800 700 600 (freecall) or visit the <https://opan.org.au>

Register

Register with My Aged Care online or by phone to make a client record. This will be your online account that has information about you, your aged care services, and interactions with My Aged Care. You will be given a client Aged Care ID number. Link your My Aged Care Online Account with the MyGov website. If you don't have a myGov account, you need to create one. You can do this online with the help of the Create a myGov account guide or call the myGov helpdesk on 13 23 07.

NOTE If you are a representative for someone else, a client record is created for you. To manage their account, you will need to sign into your own Online Account first.

Needs Assessment

If eligible, an appointment will be made for an **assessor** to visit you in your home to assess which services you need. You can have a family member, friend, carer or your appointed representative to help you with the assessment.

The assessor may recommend either a

- **HOME SUPPORT ASSESSMENT**

or an

- **AGED CARE ASSESSMENT TEAM (ACAT) COMPREHENSIVE ASSESSMENT**

HOME SUPPORT ASSESSMENT

A Home Support Assessment with a **Regional Assessment Service (RAS)** officer is for people who need low level support to stay independent in their home under the **Commonwealth Home Support Programme.**

THE COMMONWEALTH HOME SUPPORT PROGRAMME (CHSP)

Help To Stay At Home

Types of help available:

- Meals / food preparation
- Nursing
- Aids to help you stay independent
- Bathing
- Hygiene and grooming
- Help with impairments and incontinence
- Podiatry, Physiotherapy and other therapies
- Day/overnight respite care
- make your home safer and easier to move around in.
- Home or garden maintenance
- Cleaning, laundry and other work
- Transport to appointments and community activities
- Social outings, groups and visitors
- Homelessness support is also available for older people who are homeless or at risk of being homeless as they get older.
- Community Respite Care for when a carer needs to take a break from their usual caring duties.

The CHSP can connect you to service providers that will help you to live independently and safely in your home either by referring you to the relevant service provider/s or they can give you a referral code for each service you are eligible for if you would like to find providers yourself.

NOTE: Although there are many service providers to choose from, the reality is that there are staff and placement shortages across the aged care sector which can cause delays in getting certain types of care services when you need them. This can mean that you may need to use multiple service providers to cover the services you need.

The My Aged Care website has a “find a provider” tool or call My Aged Care on 1800 200 422 for help.

The ‘referral code’ given to you by the RAS assessor allows the service provider to view your client record, accept the referral and start organising services for you, if you agree. You can ask the assessor to help you estimate the fees you may have to pay.

Cost Of CHSP

Service providers are paid by the government and charge different amounts for their services. Receiving support will not affect your pension. If you can afford to pay a contribution, how much you pay will depend on your type of income and the services you need. There are no exit fees or other fees. Services cannot go ahead without your agreement.

CHSP service providers must be transparent about their fees. They must also advise you of the contribution you might need to pay, and keep track of these contributions, to make sure you do not experience financial difficulty.



You can use more than one service provider at a time to meet your needs. You may be placed on a waiting list if there are no services available. People with the highest level of needs who are on the waiting list will be offered services first. There are providers who are not funded by the government who you may need or prefer. For example, while you're waiting for government-funded services to be available you can find a non-government funded provider on the My Aged Care website.

TIP – think about your own priorities, needs, budget and location and compare providers. Before you take on a service provider, work out your budget, make sure you know what fees you must pay, if you can afford it, and how much the government contributes. If you can't afford the fees, talk to the service provider, and ask them about their policy regarding financial difficulty.

If Your Needs Change

If your needs change you may need to be reassessed. If you move from Commonwealth Home Support Programme services to a Home Care Package you may need to change service providers.

Depending on the services and needs you have, your current provider may be able to do this for you, or you can call My Aged Care on 1800 200 422 to request a reassessment.

COMPREHENSIVE ASSESSMENT - AGED CARE

ASSESSMENT TEAM (ACAT)

A **comprehensive assessment** is for people whose care needs are greater than what the Commonwealth Home Support Programme can help with. The **Aged Care Assessment Team (ACAT) assessor** will work with you to develop a support plan.

CARE PLANS

The ACAT assessment will work out which of the following care plans you need:

*** Home Care Packages * Short Term Care * Aged Care Homes**

HOME CARE PACKAGES

There are four Home Care Package Levels that all provide the same types of help as the Commonwealth Home Support Programme, but to different degrees.

A Home Care Package cannot be used for, and does not replace, care and services that you can get through other health programs that you might be eligible for. You should continue to use these if and when you need to, through your GP and hospitals.

How long it takes to get a Home Care Package depends on what package level you are eligible for and how urgently you need services, and whether there is the workforce available. People with higher or more urgent needs are prioritised to receive services.

NOTE: Although there are many service providers to choose from, the reality is that there are staff and placement shortages across the aged care sector which can cause delays in getting certain types of care services when you need them. This can mean that you may need to use multiple service providers to cover the services you need.

Costs of Home Care Packages

If you can afford to, you are expected to pay towards the cost of your care services. The cost will depend on the type and level of care and services you get.

The Australian Government contributes a different amount for each level of Home Care Package. The government contribution is paid directly to the home care provider you choose.

The government contribution changes on 1 July every year. The Government subsidy is reduced by the amount of the means tested care fee if you have to pay it.



Financial hardship

If you believe you cannot pay your Home Care Package fees, you can ask for financial hardship assistance. You can apply by completing and lodging the **Aged Care Claim for financial hardship assistance form (SA462)** with Services Australia.

Basic Daily Fee

You may have to pay a Basic Daily Fee for every single day that package funds are made available to you, not just on the days you use services. Some service providers waive this fee, so ask them. You may be asked to pay your home care fees on a fortnightly or monthly basis. **The basic daily fee changes in March and September each year in line with the age pension.**

Means Tested Care Fee

If you're thinking about getting or already get a Home Care Package and you don't get a relevant income support payment from Centrelink or the Department of Veterans' Affairs (DVA), whether you pay an means tested care fee, and how much of it you pay, is determined through a formal income assessment from **Services Australia** by completing the digital "**Calculation of your cost of care form**" (SA486) or by using the paper form "**Home Care Package Calculation of your cost of care form**" (SA456).

Accessibility - If you cannot access the forms because you have a disability or impairment and use assistive technology, you can request someone to deal with My Aged Care on your behalf, or contact them as they can help you access, complete and submit forms.

If you have to pay the means tested care fee, there are yearly and lifetime limits on how much you can be asked to pay. If you have to pay this fee, the government subsidy is reduced by this amount. If you need to pay a means tested care fee (based

on your income assessment), Services Australia will send you a **fee advice letter**. When you choose a service provider, show them this letter so they can include this fee in your Home Care Agreement. If you are already receiving a Home Care Package your provider will be sent the fee advice letter.

TIP: You can use the fee estimator on the My Aged Care website to check how much you might need to pay towards the means tested care fee and / or seek independent financial advice on what's best for you. (See the section on Financial Advice)

TIP: make sure your **personal details are up to date** including your **income and assets** information **on your Centrelink online account**. Report changes (either increases or decreases) of \$2000 or more in your bank account/s.

Care Management and Package Management costs

Care Management and Package Management costs are charged by your service provider to organise and manage your care and package services. You may choose to organise and manage your own care and package services.

Additional fees: are any extra care and services costs that you have agreed to pay that are not covered by your Home Care Package.

TIP: It is worth comparing the services and costs of different providers of Home Care Packages. You can use the "**Find a Provider**" tool on the My Aged Care website to compare provider costs.

Things you should include the cost of:

- **Services** - Read their service descriptions and pricing information. Usually, costs will be higher on weekends and between 6pm and 6am Monday to Friday.
- **Care Management** - makes sure you get the coordinated care you need.
- **Package Management** - administration for delivery and management of your package.

Work with your chosen provider to identify your care needs and decide how best to spend your package funding.

Home care fees are paid for every single day that package funds are assigned to you, not just on the days you receive services.

You may be asked to pay your home care fees on a fortnightly or monthly basis.

The government contribution is paid directly to the home care provider you choose.

SHORT-TERM CARE

There are different types of short-term care to help restore or maintain your independence or help you with daily tasks. Depending on the type of short-term care you get, help can be provided for a few days to a few months at a time.

Types Of Short-Term Care

***Short-Term Restorative Care *Transition Care * Respite Care**

Short-Term Restorative Care

You may be eligible for short-term restorative care if you are an older person and you:

- Are slowing down mentally, physically, or both
- Need help with everyday tasks
- Want to stay independent and out of long-term ongoing care arrangements

You can receive short-term restorative care in your home, out in the community, in an aged care home, or in a mix of all these locations. You can receive short-term restorative care for periods up to eight weeks, twice in any 12-month period.

The program is delivered by a team of health professionals to help you manage or adapt to your changing needs. Your family and friends are encouraged to be involved in your care. The program works best when you have the support of family, friends, and health professionals.

What help is available?

- aids and equipment (including mobility aids)
- audiology
- chiropractic services
- continence management
- cooking assistance
- home maintenance
- nursing
- nutrition, meal preparation and diet advice (dietetics)
- personal care and assistance
- physiotherapy and occupational therapy
- podiatry (foot care)
- psychologist or counsellor support
- social work
- speech therapy
- support services including cleaning or laundry, medication management, emotional support therapy groups
- transport
- accommodation in residential care

Cost of Short-Term Care

If you can afford to do so, you will contribute to the cost of your services and care. You do not have to complete a means assessment. What you pay will depend on the type and level of care and services you will get. These costs are indexed to the age pension in March and September each year.

You can still access the program if you receive support from veteran services or the Commonwealth Home Support Programme.

If you access both short-term restorative care and CHSP services, they must provide different and complementary services.

The maximum amount you may be asked to pay is:

- 17.5% of the single age pension per day if you receive care while at home or in the community
- 85% of the single age pension per day if you receive care while in a residential setting

If you move between settings during your care, where you stay overnight will affect how much you pay.

Transition Care

Transition Care after leaving hospital or rehabilitation helps you recover and regain independence and confidence sooner and avoid longer term care and support services. These services could be in an aged care home, in your own home, out in the community, or a mix of these places, depending on your needs as you recover.

NOTE: You should apply for and organise Transition Care before leaving hospital or rehabilitation.

Transition Care services include;

- Therapy Services
- Clinical Care / Nursing support
- Personal Care

How to apply for Transition Care

You can ask the social worker at the hospital or rehab centre to arrange for an assessor to visit **while you are in hospital or rehab** for an assessment or call My Aged Care on 1800 200 422. If eligible for transition care, your assessor will give you a referral code for your care provider. You can either ask your assessor to refer you to a transition care provider or you can use the “Find a Provider” tool on the My Aged Care website or call My Aged Care on 1800 200 422 for help. When you are connected with a provider that you agree to, the provider will assist you with leaving the hospital/rehab centre, entering and exiting care.

If you are eligible for Transition Care, you can be approved to receive services for up to 12 weeks (84 days). You may be able to extend your transitional care services for up to six extra weeks (42 days), but you will need another assessment. There is no limit on the number of times you can apply.

NOTE: If you leave hospital or rehab and go home before the Transition Care is approved and organised, the application will be cancelled, and the 12 weeks of services lost. In that case you would need to contact My Aged Care and apply for an assessment for care help which can cause delays and less services. You can also contact Carer Gateway 1800 422 737 for emergency care help.

Cost of Transition Care

Providers can request information regarding your ability to make a contribution (within reason) but you won't need to complete a means assessment. If you cannot pay the fees, you can still access transition care.

If you believe you cannot pay your fees, you can ask for financial hardship assistance.

You can apply by completing and lodging the **Aged Care Claim for financial hardship assistance form (SA462)** with Services Australia.

Providers, in consultation with you, can set their own fees but the government sets maximum amounts. These costs are indexed to the age pension and updated twice a year.

If you are receiving a Home Care Package or receiving services under the Commonwealth Home Support Programme or living in an aged care home, you can still access transition care. But if you are receiving either Respite Care or Short -Term Restorative Care you cannot access Transition Care.

Respite Care

Respite Care helps when a carer needs to take a break from their caring duties.

Depending on your needs, eligibility, and what services are available in your area, you can access respite care for a few hours, a few days, or longer. Respite care can be given in the home, or in the community (Community Respite Care), or in an aged care home (Residential Respite Care). You can plan respite care in advance when the carer has an appointment, has a special event or just needs to go on a holiday.

If you need respite care urgently, call Carer Gateway on 1800 422 737.

Depending on your eligibility, it can be provided on its own through the Commonwealth Home Support Programme, or with other services, as part of a Home Care Package.

There are two categories of Respite Care:

*** Community Respite** and ***Residential Respite**



Community Respite includes:

***Centre-based Respite * Cottage Respite * Flexible Respite**

These are provided through the Commonwealth Home Support Programme.

Centre-based Respite

Centre-based respite care **usually between 10am and 3pm** at a day centre, club or residential aged care home gives you the time to talk and interact with other people. It may include transport to and from the centre.

Cottage Respite

Cottage Respite is available overnight or over a weekend. It takes place in the community or in the home of a host family. It can be taken for two to three days at a time.

Flexible Respite

Flexible Respite usually involves a paid carer coming to your home in the **day or overnight** so that your usual carer can take a short break. It can also be provided in the community.

Residential Respite Care

Residential Respite Care is assessed by the Aged Care Assessment Team (ACAT). You can access Residential Respite in addition to receiving support from the Commonwealth Home Support Programme or a Home Care Package.

Residential Respite Care is provided in an aged care home to support you if you need ongoing, continuous carer support for most tasks—from a few days to a few weeks at a time depending on your needs.



You will be entitled to the same care and support services as permanent residents at the home.

Costs of Residential Respite Care

Eligible people can access up to 63 days of subsidised Residential Respite Care in a financial year. This includes both planned and Emergency Residential Respite Care. It is possible to extend this by 21 days at a time, if assessed as eligible by your aged care assessor.

You do not have to complete a means assessment to access respite care. How much you pay will depend on the type of respite care you receive.

You will only be asked to pay a basic daily fee. You may also be charged a booking fee and any additional service fees.

The basic daily fee for a respite resident is set by the government at 85% of the single basic age pension. The government updates this fee on 20 March and 20 September each year.

Booking Fee

Some providers may ask for a booking fee. The booking fee cannot be more than either a full week's fee, or 25% of the fee for the entire stay—whichever is the lowest. Ask providers if they charge booking fees, if they do, it must be clearly outlined in your resident agreement.

Your provider must refund your booking fee if you cancel your booking more than 7 days before your entry date. If you cancel within 7 days before your entry date, your provider may keep all or part of your booking fee.

Additional Service Fees

Additional hotel-type services like a preferred brand of toiletries, access to paid TV services, or arranging a hairdresser etc have extra fees that you must pay for.

Some homes allow you to pick and choose what additional service you would like, so you only pay for what you use. Others may have a package of additional services they provide, and some of them must be agreed to as a condition of living in the home. You and your provider must agree on a fee for additional services before you start receiving them. However, you can only be charged for additional services that you can make use of or benefit from.

Extra service fees

Some aged care homes have “extra service” status. This means they can provide higher standard hotel-type services for a set fee. If you agree to this extra service fee in your contract you will have to pay the extra service fee for the services whether you use them all or not.

Financial hardship

If you believe you cannot pay your Residential Respite Care fees, ask for financial hardship assistance. You can apply by completing and lodging the **Aged Care Claim for financial hardship assistance form (SA462)** with Services Australia.

Community Visitors Scheme (CVS)

The Community Visitors Scheme is a free service that provides volunteers who love to spend time with people who don't have regular contact with family or friends and are feeling lonely. The volunteers are trained and qualified. They visit you in your home.

This service is available for people who have been approved for government subsidised residential aged care or a Home Care Package. The CVS can match you with a suitable regular visitor.

Contact the CVS network member in your state or territory.

ACT, NSW, VIC - Southern Migrant and Refugee Centre (SMRC). Call 03 9767 1900



NT - Dept. of Health and Aged Care. Anglicare NT. Call 08 8928 0620

QLD - Queensland Community Care Network Inc. Call 07 3379 7200

SA - Southern Volunteering (SA) Inc. Call 08 8326 0020

TAS - Lifeline Tasmania. Call 03 6424 6547

WA - Melville Cares Inc. Call 08 9319 0916

AGED CARE HOMES

Sometimes elders are no longer able to cope with every-day tasks or their own health and personal care while living at home. Sometimes the family or carer is unable to meet their elder's needs to give them quality of life, safety, and well-being. This is a time to look seriously at the alternative of moving into an Aged Care Home.

Although it is a very difficult change to cope with at this time of life, it does come with many benefits. Health care, social interaction and activities, and specialized personal and medical care can be provided in an Aged Care Home. This does not release the family from their responsibilities to regularly visit and contribute to the care of their elders as much as they can.

Aged care homes provide a homely environment with hotel-type services designed to meet elder's day-to-day needs. This includes supporting their health, wellbeing, social life, safety, everyday tasks, living arrangements, and personal care.

They provide:

Accommodation

Rooms will have furniture, bedding, and toiletries. Some also have televisions or let you bring your own. You will be able bring your own small items like photos and keepsakes

and special things to make you feel at home. Some homes allow you to bring along small pieces of furniture like your favourite chair or desktop computer.

Hotel-Type Services

Hotel type services to meet your day-to-day needs such as laundry and social activities. Meals three times a day plus morning and afternoon tea. It also includes the maintenance services like cleaning, heating and cooling, and maintenance of the grounds and buildings.

Care Services

Personal care help such as bathing, eating, help with taking medications, and carrying out health treatments.

Clinical Care Services

These can include emotional support, special bedding, mobility devices, toilet and incontinence management, health management, nursing, and therapy services such as speech therapy, podiatry, and physiotherapy according to your needs.

Social activities

Various social activities, both at the home and out in the community, like group shopping trips, bingo games, and arts and crafts all tailored to meet your needs, abilities and wishes.

After your assessment

If you haven't had your means assessment, you should do so now as the process takes time.

After your assessment (see Assessment Process page 8), there are two things you should do next:

- Get an understanding of aged care home costs and fees and work out how much you can afford to pay and how to finance it .
- Find and connect with an aged care home that is right for you.

COSTS AND FEES

About the “means assessment”

Not everyone has to complete a means assessment. To find out if you do, use the means assessment tool on the My Aged Care website to find out.

<https://www.myagedcare.gov.au/income-and-means-assessments/>

If you have not used up your 63 days of subsidised Residential Respite Care allowance in the last 12 months, you can use this to cover the basic daily fee for the number of days you have not used while you are waiting for your financial arrangements to be sorted out. Your assessor will provide you with a code for this.

You may be able to apply for an extension of time with the aged care home and if your assessor approves it.

How much you will have to pay for residential aged care depends on the aged care home you choose and your means assessment outcome if you need to do one.

There are three types of costs associated with all aged care homes:

- **Basic Daily Fee** – everyone pays for the hotel services they receive. This fee is set by the government at 85% of the single basic age pension. The government updates this fee on 20 March and 20 September each year. The basic daily fee is indexed in line with increases to the age pension. If the pension amount increases, your aged care fees can also change.

- **Accommodation costs** -you may have to pay for your room based on a means assessment. Each Aged Care Home sets their own accommodation fee according to the standard of the home.
- **Means-tested Care Fee** is for the care services you receive based on a means assessment. A means assessment calculates if you need to pay the means-tested care fee and if the Australian Government will contribute to your accommodation costs. It is worked out by Services Australia based on an assessment of your income and assets. There are annual and lifetime caps that apply to the means-tested care fee. Once you reach a cap, you cannot be asked to pay any more in means-tested care fees. Yearly and lifetime caps are indexed on 20 March and 20 September each year. For example, the maximum an aged care home could charge for care fees as of 20 March 2022 was: \$29,399.40 per year, or \$70,558.66 in a lifetime.

Note: Any means-tested care fee you pay for receiving home care will also be counted towards the annual and lifetime caps if you move into an aged care home.

Other Costs

There are additional services you may be charged for if you choose them:

- **Additional service fees:** Fees for services other than the minimum care and service needs.
- **Extra service fees:** for upgraded service rooms.

Your aged care provider must record all these fees in your resident agreement, your accommodation agreement and, if needed, your extra services agreement.

Understanding Accommodation Costs

You can negotiate a room price before moving into an aged care home. If you are eligible for government assistance, the government will pay some or all your accommodation costs.

Whether you're eligible for government assistance or not, there are different options available for how to pay your accommodation costs in an aged care home.

It is recommended that you seek independent financial advice to decide which payment option works best for you. (see pages 32 - Financial Advice)

Payment Options

There are three ways to pay:

1. A refundable lump sum

This is a refundable accommodation amount. There are two types of lump sum, **depending on the outcome of your means assessment:**

- **Refundable accommodation contribution (RAC):** This is when the government helps with the costs.
- **Refundable accommodation deposit (RAD):** This is when you pay the full amount yourself.

2. Rental-style daily payments

This is a daily accommodation charge. There are two types of rental-style daily payments, depending on the outcome of your means assessment:



- **Daily accommodation contribution (DAC):** This is when the government helps with the costs.
- **Daily accommodation payment (DAP):** This is when you pay the full amount yourself.

3. A combination of refundable lump sum and rental-style payments

This is when you combine the two types of payments to meet your costs.

For example, for an agreed room price of \$350,000, you could choose to pay \$100,000 as a refundable lump sum, and also pay a reduced non-refundable daily payment.

Lump sum refunds

If you choose to pay an amount as a lump sum, the balance is refunded when you leave the aged care home.

Read more about aged care home accommodation refunds in the My Aged Care website. <https://www.myagedcare.gov.au/aged-care-home-accommodation-refunds>

When you need to pay by

You have 28 days from the day you move in to decide how you would like to structure your payments. You can ask for an extension of time as sometimes it can take longer to get your finances sorted out. Until you decide how to pay for your accommodation, you will need to pay by rental-style daily payments (basic daily fee capped at 85% of aged pension).

If you choose to pay by lump sum, your provider must give you **at least** six months from your date of entry to pay the lump sum.



Family can pay for accommodation, but;

If your family pays for your lump sum it will be considered as an asset and will affect your means-tested care fee or accommodation fee.

It is recommended that you seek independent financial advice to understand if this option works best for you.

Your provider is not obliged to refund lump sums while you are in care. This means that if you have a loan agreement with your family and they would like it repaid while you are in care, you will need to ask your provider if they will refund this amount to you.

It is also recommended that you seek independent legal advice before you enter into a loan agreement. It is important to understand what this could mean for you and your family if you leave the aged care home.

If you choose to pay a lump sum

Drawing down on lump sums to pay aged care fees

If you have decided to pay by lump sum for part or all of your accommodation, you may be able to draw down on your lump sum to meet some of your other aged care costs.

It is recommended that you seek independent financial advice to decide if this option will be right for you financially.

Paying a lump sum can affect other aged care fees

The balance of an accommodation lump sum is counted as an asset in the aged care means assessment. This means it is counted when working out your **means tested care fee and/or accommodation contribution**. It does not affect the age pension.

How paying by lump sum affects your partner

If you are a member of a couple, regardless of who earns the income or whose name the asset is held in, half the combined income and assets of both you and your partner are included in the means assessment.

This means that if your partner is in aged care or planning to move into aged care, your paid lump sum may affect your partner's means tested care fee or accommodation costs.

Calculating costs for rental-style daily payments

Daily Accommodation Payment (DAP)

If you choose to pay for your accommodation by DAP, the amount is worked out by applying the **maximum permissible interest rate (MPIR)** set by the government, to your agreed room price and dividing the amount by 365.

The MPIR that applies when working out your DAP is fixed at the date you agree to a room price with your provider. Increases or decreases to the MPIR that occur after this time will not affect the rate that applies to you.

If you have paid a part RAD, you can tell your provider to draw your reduced DAP amount from your paid RAD. Over time, this will make your lump sum smaller and your daily payment larger.

Daily Accommodation Contribution (DAC)

if you choose to pay for your accommodation entirely by daily payments and are eligible for government assistance with your accommodation costs, Services Australia will write to your provider and let them know the DAC you have to pay.



If you wish to pay part of your accommodation contribution as a lump sum (RAC), your provider will need to calculate a reduced DAC amount for you.

You can tell your provider to draw your reduced DAC amount from your paid RAC. Over time, this will make your lump sum smaller and your DAC payment larger.

The Maximum Permissible Interest Rate (MPIR)

The MPIR is a government-set interest rate used to calculate a daily accommodation payment based on your agreed room price. It is used to determine equivalence between a daily payment and a refundable lump sum deposit, giving you a choice in how to pay.

FINANCIAL ADVICE

It is recommended that you seek independent financial advice when planning your finances for aged care as there are many things to consider. For example: If both you and your partner need to access aged care, each of your payment methods may affect the other's aged care fees.

The **Financial Information Service (FIS)** offers free independent financial advice to help you make an informed decision on how to pay for your aged care, especially for Residential Aged Care Home fees that are affected when you have a level of assets and income which require payment of an Accommodation Fee.

They can help you understand how different payment methods for residential care may affect your pension and aged care costs if you ever need to move into an aged care home.

To find out more about FIS, or to make an appointment, call 132 300 and say "Financial Information Service" when asked why you are calling.

Free Fee Estimator - The My Aged Care website has an online fee estimator tool that can provide a good guide on how best to finance your aged care.

Financial Hardship

If you cannot pay your Aged Care Home fees you can ask for financial hardship assistance. You can apply by completing and lodging the **Aged Care Claim for financial hardship assistance form (SA462)** with Services Australia.

FINDING THE RIGHT AGED CARE HOME

Each aged care home is different, so it's important to choose the right one for you.

There are four main areas you should consider when looking: **quality, services, costs, and availability.**

There are a few ways to find an aged care home:

1. **Ask your assessor** to refer you to a local provider.
2. **Use the “Find a Provider”** tool on the My Aged Care website for lists of providers in your area. If you choose this way, your assessor will give you a referral code. You can give this referral code to your chosen provider, and they will take it forward from there.
3. **Call My Aged Care** on 1800 200 422 for guidance.

Create A Shortlist

When looking for an aged care home yourself, compare what is available to find the best match for you.

Creating a shortlist by using the **“Find a Provider”** tool on the My Aged Care website can be helpful.

When comparing providers, there are a few things to consider:

- Location
- Accommodation and cost
- Your cultural or diverse needs

- Availability
- Quality

Visiting the Aged Care Homes

Visit the homes on your short list to see for yourself the facilities, accommodation, meet other residents and staff and what care services and activities they offer.

Take a copy of your approval letter and support plan from the assessor to show what care and services you need. Take your fee notification letter (if you have it) as well.

Prepare some questions you may have. There is a link to a pdf called “Questions to ask aged care homes” available on the My Aged Care website:

<https://www.myagedcare.gov.au/connect-aged-care-homes#visit-your-shortlisted-aged-care-homes> in the “what to take with you” section.

Also take a notepad with you to take notes on your observations.

Taking someone with you can be very helpful in asking questions and recalling the answers. You can later discuss the visit with them to help compare the homes you have visited.

Keep the following in mind:

Quality

- Does the aged care home have a dedicated Quality Manager? Dedicated “Quality Managers” make high-performing nursing homes, where both residents and employees are at the centre of concern. This is essential for quality development and maintenance. The most effective managers lead by example and promote quality-focused working conditions. This motivates employees to provide person-centred care for the residents resulting in high quality care.

- If they don't have a dedicated Quality Manager, what checks are in place to ensure quality services.
- Does the aged care home have a dedicated Care Manager? A care manager is a healthcare professional who works one-on-one with patients to help create and manage their care plans and spend much of their work time with their clients, providing direct support to them.
- If they don't have a dedicated Care Manager, what are they doing to improve the quality of the care they provide?
- Does the place look organised and well-run?
- How do staff and residents interact with each other?

Atmosphere

- How does the place feel to you?
- What's the environment like?
- Is it noisy, too quiet?

Rooms and facilities

- How are the rooms decorated and furnished?
- How big are the bedrooms and where are they located?
- What facilities do they have? Are they modern and well maintained?
- What are the common areas like? Are there gardens to enjoy?

Residents and staff

- What are the other residents like? Do they look happy, active, and engaged?
- What are the staff like? What is the staff to resident ratio?

Lifestyle

- Are there any social activities going on?
- Do residents go on outings?
- What's on the menu? Do they cater for special diets, vegetarian or halal food?

Applying For A Place

Once you have decided on the aged care home you prefer the next step is to apply. Applying usually means completing a form, providing a copy of your assessment, and your fee advice letter from Services Australia.

If you have found more than one aged care home you like, apply to them all for the best chance of securing a spot. If you don't get your first choice, you may get another. You are not obligated to accept an offer if you don't want to.

If you are receiving other aged care supports like a Home Care Package, don't forget to let your Home Care provider know you are moving into an aged care home.

If you haven't received your means assessment outcome letter, the provider may ask you for some financial information. It's up to you whether you provide this information.

Once you've accepted a place there will be two or three contracts to sign. These might be given to you as separate documents or combined into one.

- Resident agreement - sets out the care and services the aged care home will provide and how much you will be asked to help pay for them.
- Accommodation agreement - sets out what room you are taking and how much you have agreed to pay, as well as other accommodation conditions, if relevant.
- Extra services agreement - only applies if the aged care home has extra service status, and you are entering an extra service room.

References: My Aged Care - <https://www.myagedcare.gov.au/>

This publication was produced to provide a concise, coherent guide on how to navigate the aged care system in Australia. While every effort has been made to provide accurate information, we ask you to forgive any errors. For more detailed information, see the My Aged Care website <https://www.myagedcare.gov.au/>

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