

AGE RELATED RESIDENTIAL CARE SERVICE NORTHERN REGION GUIDELINES

- Purpose of the Guidelines**
- This guideline has been developed to clarify criteria for authorisation of entry into aged residential care in the Northern Region. Its aim is to prevent older people entering long term aged care prematurely and to support “ageing in place”.
 - This document does not include detail of NASC procedures such as referral processes, income and asset testing, internasc transfer processes, residential transfers, payment documentation, or other associated residential entry processes.
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- Aims of the Guideline**
- Older people and their families/ carers are provided with comprehensive, current and correct information about their disability support options, through the NASC process, before entry to residential care is considered.
 - Older people and their carers have timely access to comprehensive geriatric specialist multidisciplinary assessment or medical review, which provides
“Early identification and assessment of medical and psychiatric conditions that can be reversed or their progression slowed by treatment or rehabilitation” *Guideline for Specialist Services for Older People.*
 - Older people who require residential care, are offered choices of residential facilities in the appropriate category of care to meet their needs.
 - Older people will have equitable access to long term residential care in the Northern Region.
 - Assist the DHB’s in managing the demand for residential care.
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Age Related Residential Care Services, Continued

Associated documents

The table below identifies associated documents.

Type	Title/Description
	Older People's Health Strategy, 2002
	Guide to Eligibility for Publicly Funded Personal Health & Disability Services in New Zealand – MoH, June 2001.
	Long Term Residential Care in a Rest Home or Private Hospital – What you need to know. MoH 2004, WINZ – Residential Subsidy Information.
	Aged Residential Contracts
	Social Security Act, 1964

Age Related Residential Care Services

These guidelines are in two parts:

Part 1 Entry into aged residential care from an older person's own home.

Part 2 Determining the most appropriate level of residential care.

Part 1 – Entry into aged residential care from the older person's own home-

This includes those clients who may present in an Acute or an Assessment Treatment and Rehabilitation Setting.

- Entry Criteria**
- The person is 65 years or has been assessed on behalf of the DHB as Close In Interest to persons 65 years or more, and is unmarried and without any dependent children.
Note: Close In Interest Criteria is under review by the MoH.
 - The client meets the Publicly Funded Personal Health and Disability Services in New-Zealand –MoH June 2001, eligibility criteria.
 - The client has participated in a support needs assessment with NASC, and a **Support Package Allocation Band** has been determined.
 - The client is in the High or Very High Need SPA Band.
 - NASC have explored and exhausted all the available options for meeting the person's needs in their home, with client/ family, and relevant health professionals (e.g. -GP, Gerontology nurse specialists, geriatrician, hospice).
 - A Specialised Assessment has taken place to ensure that identification and assessment of medical and psychiatric conditions that can be reversed or their progression slowed by treatment or rehabilitation has taken place.
 - Following all the options for support having been explored with the older person, their families and colleagues involved in the care, and there are insufficient supports available for the person to remain at home, NASC may authorise entry into long term residential care. The category of residential care is determined by NASC, based on the identified needs to be met, and clinical input from colleagues.

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Age Related Residential Care Services, Continued

Approval outside the SPA Bands

In the event a service coordinator determines entry to residential care is the most appropriate option for a client, and that client is in a Medium Band - the service coordinator will seek NASC Manager's approval for the client to enter care.

Declining authorisation of residential care

In the event the older person can be supported in their home by a package of health and disability support services, the NASC service may decline authorisation into aged residential care. The NASC will inform the client/ carer, the client's GP and the referrer by formal written communication, and coordinate access to appropriate support services.

Appeal Process

In the event a client/ carer or colleague disagrees with the NASC decision to decline authorisation into aged residential care, the decision can be appealed through the usual NASC appeal process.

Part 2 Determining the most appropriate category of residential care

Categories

Age Related Residential Care is contracted by the DHB's using Disability Support Services Funding , under the following categories

- Rest Home
- Dementia Care
- Hospital (continuing care)
- Specialist Hospital(Psycho geriatric Hospital)

The following criteria have been developed to promote regional consistency when authorising aged residential care.

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Age Related Residential Care Services, Continued

Rest Home

The older person

- Requires regular daytime and intermittent night time supervision, guidance or assistance from one person to attend to their daily activities of living.
 - Requires care from trained caregivers, with registered nursing oversight.
 - May have some cognitive impairment requiring regular supervision, but their behaviour does not disturb other residents, or put themselves or others at risk.
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Private Hospital

The older person

- Requires intensive and frequent daytime care and assistance.
 - Requires frequent night care.
 - Is medically fragile and requires daily Registered Nursing care, oversight and treatments.
 - Has high nursing needs relating to end stage of life.
 - Will require a minimum of one person to assist with activities of daily living.
 - Is at risk of frequent falls-daily or weekly.
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Dementia Unit

The older person

- Requires a secure environment to ensure their safety.
 - Has been diagnosed with dementia by specialist services.
 - Requires skilled management of challenging behaviour.
 - Requires regular daytime and intermittent night time supervision, guidance or assistance from one person to attend to their daily activities of living.
 - Requires care from trained caregivers, with registered nursing management and care planning.
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Age Related Residential Care Services, Continued

**Psycho
geriatric
Hospital Care**

The older person

- Has a diagnosis of dementia with high dependency needs and/ or challenging/ antisocial behaviours (e.g. aggression, potential for self harm, extreme and inappropriate social behaviour).
- Has a combination of age related disability and a mental health condition with high dependency needs and challenging anti social behaviours.
- Requires intensive and frequent daytime care and assistance.
- Requires frequent night care.
- Requires frequent registered nursing management and care planning.