My Aged Care Guidance for Providers

May 2015
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1 Purpose of the document

The purpose of this document is to help service providers understand how they will interact with My Aged Care. This document provides contextual information about new concepts and functions that service providers will need to undertake via the My Aged Care provider portal. This document also outlines activities that service providers will be expected to complete.

This document should be read in conjunction with the ‘My Aged Care Provider Portal User Guide’ (Provider Portal User Guide), which outlines the steps to follow to undertake the new functions within the provider portal. It is recommended that this document is read before the Provider Portal User Guide.

These two documents do not replace existing programme documentation. For information about aged care programmes, you should continue to refer to the relevant guidelines and manuals. For example:

- Guide to Aged Care Law
- Home Care Packages Programme Guidelines – July 2014

1.1 Document key

⚠️ This is used to highlight a point that all service providers need to pay particular attention to.

This is used to highlight a function that a person with a particular role within the provider portal (Administrator, Team Leader, Staff Member) can undertake.

This document will be updated prior to July 2015 to include information about the waitlist and reporting functions. The latest version will be available at dss.gov.au/MyAgedCare.
## 1.2 Key terms

This information is relevant for people performing Administrator, Team Leader or Staff Member roles in the provider portal.

<table>
<thead>
<tr>
<th>Key Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACAT</td>
<td>Aged Care Assessment Teams (ACATs) conduct face-to-face comprehensive assessments to determine a client’s eligibility for care types under the <em>Aged Care Act 1997</em>, with approval subject to a decision by an ACAT Delegate.</td>
</tr>
<tr>
<td>Action Plan</td>
<td>A summary of the outcomes of screening conducted by the My Aged Care contact centre staff. An action plan includes information about activities that will facilitate appropriate assessment or service referral. Assessors, providers and clients will be able to view a client’s action plan via the My Aged Care portals.</td>
</tr>
<tr>
<td>Administrator</td>
<td>The person nominated on the My Aged Care Organisation Administrator Registration Form to be the first person from an organisation to login to the My Aged Care provider portal. A person can also be assigned an Administrator role within the portal for either the organisation or one or more outlets. Administrators are responsible for setting up the organisation, including managing outlets, services and staff accounts for all outlets in the portal. A person can be assigned an Administrator role for one or more outlets in the provider portal. Administrators for particular outlets are responsible for managing services and staff accounts only for the outlets they are assigned.</td>
</tr>
<tr>
<td>AUSkey</td>
<td>AUSkey is a secure login that identifies you when you use participating Government online services on behalf of your business. AUSkeys are obtained from the Australian Business Register, and registration is free.</td>
</tr>
</tbody>
</table>
| CHSP       | From 1 July 2015, the Commonwealth Home Support Programme will bring together:  
  - The Commonwealth Home and Community Care (HACC) Program  
  - Planned respite from the National Respite for Carers Program (NRCP)  
  - The Day Therapy Centres (DTC) Program |
<table>
<thead>
<tr>
<th>Key Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACHA</td>
<td>The Assistance with Care and Housing for the Aged (ACHA) Program.</td>
</tr>
<tr>
<td>Client Record</td>
<td>People seeking access to aged care services will have a client record created by My Aged Care contact centre staff. The client record will include client details (and carer or representative details), details about assessments and support plan, and information about service(s) received. Clients will be asked to provide consent to enable their client record to be shared with assessors and service providers. Assessors and service providers will update information on the client record, and clients and their representatives will be able to view this information on the client portal, via myGov.</td>
</tr>
<tr>
<td>Client service information</td>
<td>Information about services that a provider delivers to a client. The provider is required to enter this information into the client record via the My Aged Care provider portal. Clients and their representatives will be able to view this information on the My Aged Care client portal, via myGov.</td>
</tr>
<tr>
<td>Inbound referral</td>
<td>An online form accessed from the My Aged Care website. The form can be used to recommend a person for aged care services. The form will generally initiate registration, screening, assessment and referral for service.</td>
</tr>
<tr>
<td>NSAF</td>
<td>National Screening and Assessment Form used by My Aged Care contact centre staff and assessors (RAS and ACATs) to ensure a nationally consistent and holistic screening and assessment process.</td>
</tr>
<tr>
<td>Outlet</td>
<td>Represents how providers organise their services in the provider portal. An outlet could represent a physical location, like a residential care facility, or a section of an organisation that delivers services, like home support to a particular area. Electronic referrals will be sent by contact centre staff and assessors for services organised within the outlets. Service provider staff will also be allocated to outlets.</td>
</tr>
<tr>
<td>RAS</td>
<td>The My Aged Care Regional Assessment Service will conduct a face-to-face home support assessment for clients seeking to access Commonwealth Home Support Programme (CHSP) services.</td>
</tr>
<tr>
<td>Reassessment</td>
<td>A reassessment will be undertaken when there is a significant change in a client’s needs or circumstances which affect the objectives of the existing support plan.</td>
</tr>
<tr>
<td>Referral code</td>
<td>A five digit code given to the client by the My Aged Care contact centre, or assessor; to allow them to visit different service providers to discuss their needs prior to choosing their preferred provider.. Referral codes are generated for individual services. Clients can choose to have a referral code given to them rather than choosing an electronic referral method. This code allows clients to consider different service providers prior to</td>
</tr>
<tr>
<td>Key Term</td>
<td>Description</td>
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<td>--------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>choosing their preferred provider.</td>
<td></td>
</tr>
<tr>
<td>Referral for assessment</td>
<td>A referral sent by My Aged Care contact centre staff requesting an assessment (home support or comprehensive) for a client.</td>
</tr>
<tr>
<td>Referral for service</td>
<td>A referral sent by either My Aged Care contact centre staff or assessors requesting services for a client. Referrals can be sent electronically, or a client can be issued a referral code.</td>
</tr>
<tr>
<td>Review</td>
<td>An evaluation of a client’s support plan undertaken by the RAS. A review can be requested by the client, service provider, or scheduled by an assessor. The review may result in a change in services, or a further assessment.</td>
</tr>
<tr>
<td>Staff Member</td>
<td>A person who is assigned a Staff Member role in the provider portal will be responsible for adding and updating client service information on the client record.</td>
</tr>
<tr>
<td>Service delivery area</td>
<td>The area where an organisation delivers services. This can be from a set location (provider location) or to an area where the service are provided to the client in their own home.</td>
</tr>
<tr>
<td>Service finders</td>
<td>A search function available on the My Aged Care website that allows an individual to view service information.</td>
</tr>
<tr>
<td>Support plan</td>
<td>A plan developed by the home support assessor or comprehensive assessor with the client. The support plan identifies the client’s needs, goals and service preferences. Assessors and providers will be able to view a client’s support plan via the My Aged Care portals. Clients and their representatives will be able to view this information on the client portal, via myGov. A copy can also be provided to the client by the assessor.</td>
</tr>
<tr>
<td>Team Leader</td>
<td>A person who is assigned the Team Leader role in the provider portal will have the same functions as a Staff Member role in the portal, and additionally, be responsible for managing referrals.</td>
</tr>
<tr>
<td>Wallet check</td>
<td>An identification check that an assessor or service provider will undertake to ensure duplicate client records are not created. The wallet check involves sighting two documents that identify the client, and noting this on the client’s record.</td>
</tr>
</tbody>
</table>
2 Introduction to My Aged Care

The My Aged Care vision is to ‘make it easier for older people, their families, and carers to access information on ageing and aged care, have their needs assessed and be supported to locate and access services available to them.’

2.1 What does My Aged Care do now?
My Aged Care was introduced on 1 July 2013 and consists of the My Aged Care contact centre (1800 200 422) and website (myagedcare.gov.au). My Aged Care currently provides:

- Information about aged care to consumers, family members and carers
- Information for service providers
- Online service finders that provide information on aged care service providers and assessors
- Online fee estimators for pricing on Home Care Packages and aged care homes.

The Telephone Interpreting Service and the National Relay Service is available to assist people who communicate in language(s) other than English, and people who have a hearing or speech impairment.

2.2 Changes to My Aged Care in 2015
My Aged Care will be expanded in 2015. The table below details what is being introduced, and why it is being introduced.

<table>
<thead>
<tr>
<th>What is being introduced</th>
<th>Why it is being introduced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central client record</td>
<td>To facilitate the collection and sharing of client information.</td>
</tr>
<tr>
<td>My Aged Care Regional Assessment Service (RAS)</td>
<td>To conduct face-to-face assessments for clients seeking to access Commonwealth Home Support Programme (CHSP) services.</td>
</tr>
</tbody>
</table>
### What is being introduced

<table>
<thead>
<tr>
<th>What is being introduced</th>
<th>Why it is being introduced</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Screening and Assessment Form (NSAF)</td>
<td>To ensure a nationally consistent and holistic screening and assessment process. The form will be used by contact centre staff, the RAS and existing ACATs.</td>
</tr>
<tr>
<td>Web-based portals for clients, assessors and service providers.</td>
<td>Client portal - to view their client record and update personal details</td>
</tr>
<tr>
<td></td>
<td>Assessor portal - to manage referrals, use the NSAF and update the client record</td>
</tr>
<tr>
<td></td>
<td>Provider portal - to manage service information, referrals and update the client record.</td>
</tr>
<tr>
<td>Service providers will self-manage information about the services they deliver</td>
<td>This information will be presented on the service finders via My Aged Care, and will support accurate referral of clients to services.</td>
</tr>
<tr>
<td>Enhanced service finders that include information about non-Commonwealth funded services</td>
<td>To enable the provision of information about non-Commonwealth funded aged care services to clients and the public.</td>
</tr>
</tbody>
</table>

These changes will result in:

- A consistent, streamlined and holistic assessment of clients
- Better access to accurate client and service information (for clients, representatives, carers and family members, service providers and assessors)
- Appropriate and timely referrals for assessment and services.

#### 2.2.1 Fees

It is important that consumers understand the potential fees that they may be expected to pay for services early in their interaction with the aged care system. The My Aged Care website, contact centre and assessors will all assist to manage consumer expectations around fees.

The My Aged Care website ([www.myagedcare.gov.au](http://www.myagedcare.gov.au)) provides information about the aged care system, including fees. The Home Care Package fee estimator and Aged Care Home fee estimator allow consumers to estimate their possible fees. The My Aged Care contact centre (1800 200 422) can also provide fee estimates over the phone.
If a person has not considered the payment of fees prior to being contacted by an assessor or service provider, it is expected that the assessor or service provider discusses fees with the client.

providers do not have to enter information about fees in the client record. Providers can include information about fees in the notes section of the client record, if they want to.

2.3 Using My Aged Care

From mid May 2015, service providers who have submitted their My Aged Care Organisation Administrator Registration Form to the Department, and have an AUSkey, will be able to access the provider portal. Information about the first time login process for the provider portal is in the Provider Portal User Guide.

Providers are encouraged to set up their organisation within the provider portal, familiarise themselves with the portal, and ensure the information about the services they provide is accurate before 1 July 2015.

It is important that information about the services you provide is kept up to date as the information is publicly displayed on the service finders via the My Aged Care website (www.myagedcare.gov.au), and be used by contact centre staff and assessors to refer clients to service(s).

From July 2015, people seeking access to aged care services for the first time will need to contact the My Aged Care contact centre to discuss their aged care needs and have a client record created. The interactions people have with My Aged Care are described in Diagram 1 on page 11.

Clients receiving services prior to July 2015 do not need to register with My Aged Care unless their needs and/or circumstances change.
If service providers are directly approached by new clients seeking Commonwealth funded aged care services, service providers should refer clients to My Aged Care. My Aged Care will then facilitate client registration for a record and assessment of client needs.

In cases where it is apparent that urgent care is required, service delivery may be provided before a client has contacted My Aged Care. Ultimately clients need to be registered with My Aged Care, and have their broader needs considered.

Service providers can assist clients with the My Aged Care registration process by:

- Recording client details in an inbound referral form (accessed from myagedcare.gov.au) that is sent to the My Aged Care contact centre.
- Call the My Aged Care contact centre with the person to facilitate registration and screening
- Send an 'Inbound referral' form (accessed from myagedcare.gov.au) requesting that My Aged Care contact centre staff call the person
- Send a fax with information about the person.

From July 2015, CHSP providers will receive electronic referrals for service(s) via the provider portal. Referrals can be sent to CHSP providers by the My Aged Care contact centre and the My Aged Care Regional Assessment Service (RAS).

Most ACATs will commence using the assessor portal to accept/reject referrals from July 2015, which provides access to the client record and screening information prior to undertaking their assessment. However, referrals will not be sent to Home Care Package providers, Residential Care providers (including Transition Care Program and Residential Respite) until ACATs transition to using full functionality of My Aged Care. ACATs will transition to use the full functionality of the assessor portal state-by-state from July 2015. The Department will advise the sector of the date of transition for each state well in advance of their transition. Full functionality will see the ACATs using My Aged Care systems to conduct the comprehensive assessment, to create a client support plan, make delegate decisions and make referrals to services. They will continue to assess people for access to aged care service(s) funded under the Aged Care Act 1997 (the Act): Home Care Package (HCP), Residential Care (including Residential Respite), and Transition Care Program (TCP).

Please note: people do not need to contact My Aged Care to access Multi-Purpose Services and National Aboriginal and Torres Strait Islander Flexible Aged Care programme services.
Due to the continued operation of the jointly government funded Home and Community Care programme in Victoria and Western Australia, the changes to My Aged Care in 2015 will differ in these states. More information is available at dss.gov.au/MyAgedCare.

2.4 Service provider support

The Department has developed a range of materials and supporting mechanisms (including videos, FAQs, User Guides) to help service providers understand how to use the provider portals to support clients. These materials are available from dss.gov.au/MyAgedCare.

The My Aged Care service provider and assessor helpline (1800 836 799) will be available from 30 March 2015 to assist with enquiries relating to the My Aged Care system and provide technical support. The helpline will be available between 8am to 8pm Monday to Friday and 10am to 2pm Saturday, local time across Australia.
My Aged Care Guidance for Providers

Diagram 1: My Aged Care client interactions

Information
My Aged Care provides information about aged care services (including non-Commonwealth funded services) and how they can be accessed. This information is available from the My Aged Care contact centre and website. People can use the website to:
- Search for services in the service finders
- Understand what fees they may be asked to pay using the fee estimators

Website
www.myagedcare.gov.au

Client Registration and Screening
Contact centre staff use the My Aged Care system to:
- Complete registration, which creates a client record
- Conduct screening to understand a client's needs using the National Screening and Assessment Form
- Create an action plan as an outcome of screening
- Refer clients for assessment
- Refer clients for Commonwealth Home Support Programme service(s)
- Manage inbound referrals
- Provide information about non-Commonwealth funded services

Client Record

Assessment
Assessments are conducted by the My Aged Care Regional Assessment Service (RAS) and Aged Care Assessment Teams (ACATs). Assessors use the assessor portal to:
- Accept/reject referrals for assessment
- Access the National Screening and Assessment Form to undertake assessment
- Review the client record before the assessment, and update the client record afterwards (with recommendations and the support plan)
- Issue referrals for Commonwealth funded services
- Provide information about non-Commonwealth funded services

Comprehensive Assessment (ACATs)

Services
Commonwealth funded service providers will use the provider portal to:
- Maintain information about the services they provide (including availability)
- Accept/reject/waitlist referrals for service(s)
- Review the client record before delivering services, and update the client record (with service delivery and care planning information)
- Request a new assessment if the client's needs have changed

Home Support Assessment (RAS)

Home Support Programme Providers

Commonwealth Home Support Programme Providers

Home Care Package, Transition Care and Residential Care Providers

My Aged Care assessor portal

My Aged Care provider portal

My Aged Care contact centre
Phone 1800 290 422
Operates 8am-8pm weekdays and 10am-2pm Saturdays.

My Aged Care contact centre staff
3 Overview of contact centre staff and assessor roles

The nationally consistent screening and assessment process will be undertaken by My Aged Care contact centre staff, the RAS and existing ACATs.

Screening, home support assessment (undertaken by the RAS) and comprehensive assessment (undertaken by ACATs) will all be undertaken using the National Screening and Assessment Form (NSAF). The NSAF has been designed so that assessment will build on the screening information collected by My Aged Care contact centre staff.

The Section below outlines the functions that will be undertaken by contact centre staff and assessors to support a person to access aged care services.

3.1 Registration by My Aged Care contact centre staff

If a person calls the My Aged Care contact centre seeking to access aged care services, contact centre staff will register the caller with My Aged Care and in doing so, establish a client record.

Registration involves the collection of a basic set of client information (i.e. a Medicare number, name and date of birth), which is then verified with information held at the Department of Human Services as a first step in a two step ID verification process. The verification process seeks to ensure duplicate records are not created.

To complete the identity verification process (referred to as a ‘wallet check’ in the portal), assessors/service providers will need to sight two types of client identification documents from the list below, and confirm that they have sighted the original document in the client record via the provider portal.

This process is important to ensure that the client record is unique, and that duplicates are not created.

Identification documents can include the following:

- Medicare Card
- DVA Card
- Driver’s License
- Health Care Card
- Passport
- Birth Certificate
- Birth Card
- Citizenship/Naturalisation Certificate
- Photo Card
- Tertiary Student ID
- Other Identity Document
- Other License/Permit
- Australian Aged Pension Card
- Pensioner Concession Card
- State Government Card
- State Government Disability
- Australian Marriage Certificate.
- Mortgage Documentation
- Lease/Rent Agreement
- Land Title Office Record
- Bank Statement
- Council Rates Notice
- Utility Bill
- Australian Bank Card
- Automobile Membership
- Seniors Card
- Registered Club Membership.

It is expected that whoever has contact with the client in the first instance (i.e. an assessor or service provider) will sight client identification and note this on the client record. The wallet check only needs to occur once.

Case Study: registration and screening

Background

Enid is a 79 year old woman who has been having difficulty with everyday tasks due to her arthritis and recent diagnosis of diabetes. She has particular difficulty with getting out of the house to go grocery shopping and to visit her GP and pharmacy. Enid recognises and believes that eating fresh food, exercising and the ability to visit her doctor and pharmacist for advice on medication management is important for her health and quality of life. She is also not visiting her friends and family as much as she used to, and is beginning to feel lonely and isolated. Enid has heard about other older people receiving aged care services but she assumes that she needs a doctor's referral to get started.

Inbound referral

Enid eventually asks her doctor for some information on how to get help at home. Her doctor sends a referral via an inbound referral form on the My Aged Care website to the My Aged Care contact centre. The inbound referral contains:

- the referrers name and contact details
- the client’s name and contact details
- your relationship to the client (for example, as a General Practitioner or community nurse)
- information about why the client is being referred to My Aged Care
- any additional information that may support your referral, including a discharge or shared health summary.
Registration and screening
After receiving the inbound referral form, a My Aged Care contact centre staff member calls Enid to discuss her circumstances. The contact centre staff member receives Enid’s consent to register Enid’s details with My Aged Care and undertake a brief telephone screening to determine what services could meet her needs.

Referral for assessment
As a result of the information collected during screening, and a discussion with Enid about the best options to meet her needs, the contact centre staff member organises a referral to be sent for a Home Support Assessment, to be completed by the RAS.

3.2 The client record

⚠️ The client needs to consent to having a client record created.

The creation of a client record will reduce the number of times a person has to repeat their story. Clients will be asked to provide consent to enable their client record to be appropriately shared with assessors and service providers.

When service providers receive referrals for service(s) from the My Aged Care contact centre, RAS or ACATs, they will be able to view all information in the client record except the client’s full address and phone number. Service providers will be able to see the client’s suburb prior to accepting the referral.

The client record can include the following information:

- Personal information (date of birth, place of birth, relationship status)
- Address details
- Communication requirements
- Representative or carer details
- Screening outcomes and action plans
- Previous assessment outcomes and support plan
- Payment details (pension status)
- Health insurance details
- Services in place
- Notes and observations
- Sensitive notes.*

*Sensitive notes allow information that the client considers private (but still chooses to disclose) to be collected on the system. It is only viewable at a higher level of access at the contact centre and in the assessor portal. Clients with sensitive notes will have a flag on the system to indicate that there is information that the service provider may wish to discuss with the assessor or the client.

⚠️ Service providers will only be able to view a client’s full address and phone number after accepting a referral. This will allow the service provider to contact the client.
### 3.2.1 Who can update the client record

<table>
<thead>
<tr>
<th>Who</th>
<th>Where can they view the client record?</th>
<th>What can they update?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clients (and their representatives)</td>
<td>My Aged Care client portal via myGov</td>
<td>Contact details</td>
</tr>
<tr>
<td>Contact centre staff</td>
<td>Contact centre system</td>
<td>Contact details, screening outcomes, (including an action plan)</td>
</tr>
<tr>
<td>Assessors</td>
<td>My Aged Care assessor portal</td>
<td>Contact details, assessment outcomes, (including a support plan)</td>
</tr>
<tr>
<td>Service Providers</td>
<td>My Aged Care provider portal</td>
<td>Service delivery information</td>
</tr>
</tbody>
</table>

### 3.3 Screening and creating an action plan

Contact centre staff will conduct screening by asking a series of questions over the phone to understand a client’s needs and determine the appropriate client pathway. The outcomes from screening are documented in an action plan.

Where it is not possible to conduct screening over the phone, or the client expresses a desire not to participate, the client will be referred directly to face-to-face assessment.

The action plan forms part of the client record that can be viewed by clients via the My Aged Care client portal. Assessors and service providers who have received a referral for assessment or service can also view the action plan via the My Aged Care provider or assessor portals. After screening, clients can be:

- Referred to an assessment organisation for a face-to-face assessment of their needs (either home support or comprehensive)
- Referred directly to Commonwealth Home Support Programme services
- Provided with information about other aged care services (such as those provided by Multi-Purpose Services or under the National Aboriginal and Torres Strait Islander Flexible Care Programme), and non-Commonwealth funded aged care services.
3.4 Undertaking assessments and developing a support plan

RAS and ACATs will use the My Aged Care assessor portal to:

- Manage referrals for assessment
- Conduct assessments using the NSAF
- Review and update client records with the support plan and assessment outcomes
- Refer clients to service(s).

During the assessment, the assessor and client work together to develop a support plan that promotes a wellness approach and reflects the client’s needs, goals and service preferences. The support plan forms part of the client record that can be viewed by clients via the My Aged Care client portal. Assessors and service providers who have received a referral for assessment or service can also view the support plan via the My Aged Care provider or assessor portals.

3.4.1 Home support assessment

From July 2015, the RAS will conduct a face-to-face home support assessment for clients seeking to access CHSP services using the NSAF. Following a home support assessment, a client may be:

- Referred for CHSP services
- Referred for a comprehensive assessment (conducted by an ACAT)
- Provided with information only.

3.4.2 Comprehensive assessment

Between July 2015 and December 2015, existing ACATs will transition (state by state) to conducting comprehensive assessments face-to-face using the NSAF. They will continue to determine a client’s eligibility for care types under the Aged Care Act 1997, but after they have transitioned they will undertake this function through the assessor portal. Prior to transition, ACATs will continue to undertake comprehensive assessments as they do now.

The exact dates for ACAT transition will be published on the Department’s website (dss.gov.au/MyAgedCare) and advice provided to the sector once finalised with each state and territory government.

The existing ACATs will conduct a face-to-face comprehensive assessment, that builds on the information provided by a client during screening and home support assessment), where applicable, to determine a client’s eligibility for care types under the Aged Care Act 1997, with approval subject to a decision by an ACAT Delegate.
Following delegate approval, a client may be

- Referred for a Home Care Package, Residential Care (including respite) or Transition Care or
- Referred to CHSP services.

A client can also be referred to other aged care services such as Multi-Purpose Services, or National Aboriginal and Torres Strait Islander Flexible Care Programme, or provided with information.

**Case Study: Assessment**

**Background**
Ioannis and Elizabeth are an older couple who have been caring for each other for quite some time. Elizabeth has a long-term back injury that confines her to a wheelchair and requires multiple medications. Ioannis helps Elizabeth get in and out of her wheelchair, he bathes her and drives her to doctor’s appointments. Their daughter Ros helps with household chores, but she has a full time job and young children to care for. Recently Ioannis has been having some difficulties lifting Elizabeth so she sometimes spends the whole day in bed and is developing pressure areas. The stress of caring for his wife is beginning to affect Ioannis’ mood, and he sometimes has difficulty remembering which medications to give Elizabeth. He knows that he needs help but he does not know where to start.

**Contacting My Aged Care**
Ros notices that her father is beginning to struggle with his caring responsibilities, and spends some time on the My Aged Care website to find out what support may be available for her parents. She reads about the various levels of support and helps her parents call the My Aged Care contact centre.

**Registration and screening**
After registration, Ioannis and Elizabeth undergo screening over the telephone. During screening, some initial information is collected to determine their needs and options for support. In discussing these options, Ioannis and Elizabeth agree that a Comprehensive Assessment would be of benefit to them both.

**Referral for comprehensive assessment**
The contact centre staff member sends referrals for both Ioannis and Elizabeth to the local Aged Care Assessment Team, who accept the referrals and assigns an assessor to undertake the assessments. The assessor contacts Ioannis and Elizabeth and arranges for both assessments to be undertaken together in their home.

**Undertaking the assessment**
When attending the home, the assessor informs Ioannis and Elizabeth about the assessment and Delegation process, gains their consent to proceed and asks them to sign an Application Form. Following this and building on the information provided during screening, the assessor uses the NSAF and supplementary tools to collect and record information from Ioannis, Elizabeth, Ros and their GP. Following the development of individual support plans which identifies their goals and strategies to meet these goals, the
assessor makes a recommendation that they both receive a Home Care Package level 3-4, and that Residential Respite for Elizabeth is appropriate.

The information the assessor collects, including the support plan is then sent to a Delegate who formalises the assessor’s recommendations, and approves Ioannis for a Home Care Package level 3-4, and Elizabeth for a Home Care Package 3-4 and Residential Respite. Ioannis and Elizabeth receive notification of this decision via post and the assessor also contacts them to discuss their options for referral to providers who can provide the services they have been approved for.

3.5 Referral for service methods

My Aged Care contact centre staff, the RAS, and ACATs will work with clients to select preferred service provider(s), choose a referral method and issue referrals for service(s).

The referral process will be supported by the enhanced service finders on the My Aged Care website. This information will also be used by the contact centre and assessors to refer clients for service(s).

⚠️ It is important that service providers ensure that the information about the services they provide is kept up to date within the portal so that referrals are directed to them appropriately.

For Commonwealth funded services, assessors will use the assessor portal to work with clients to send a referral to the client’s selected service providers.

Clients can choose to have an electronic referral sent to service providers in order of preference, or broadcast to all available service providers. Alternatively, a client can be issued with a referral code which allows the client to self-manage their referral by directly approaching preferred providers.

Clients seeking access to residential care services are likely to choose to use a referral code which allows them to visit different facilities to discuss their needs with providers. This code allows clients to visit different facilities to discuss their needs with service providers prior to choosing their preferred provider.

The referral code allows the service provider to access the client record (including the client’s action and support plan) to assist discussions and, if chosen by the client, to accept the referral.

⚠️ Referral codes are generated for services. If a client requires multiple services, they will be given a referral code for each service.
When you ‘retrieve a referral code’ via the provider portal, you do not automatically accept the referral for service(s). Retrieving the referral code moves the client’s referral into the incoming referrals list, so that you can view client details (not their full address and phone number). You need the client’s consent to accept the referral.

Case Study: referral for service methods

Background
Ioannis and Elizabeth have been assessed together and have both been approved for Home Care Package 3-4. Elizabeth has also been approved for Residential Respite. The Assessor has contacted Ioannis and Elizabeth to organise referrals to be sent in line with the support plan.

Referral for service(s)
After their approval, the assessor works with Ioannis and Elizabeth to search for, and refer to, providers in their region. As they need a Home Care Package right away and have expressed no preference of receiving a home care package from a particular provider, the assessor focuses the search on available Home Care Package providers, and sends a broadcast referral to those providers. If they have services available, a provider will accept the referral, and other service providers will no longer be able to view the referral. In this scenario, services will commence straight away.

If there are no packages available, service providers can accept Ioannis or Elizabeth to their waitlist. The assessor, in seeing that Ioannis or Elizabeth will be on a waitlist may wish to organise some interim Commonwealth Home Support Programme services to ensure their needs are being met until the time they are accepted off the waitlist. When a package becomes available, the service provider will draw Ioannis’s or Elizabeth’s referral from the waitlist.

As Elizabeth does not need Residential Respite right away, Ioannis and Elizabeth choose to spend more time researching aged care homes that meet their requirements. As Ioannis is okay with using the internet, the assessor helps familiarise him with the service finder on the My Aged Care website to find aged care homes that provide Residential Respite in their region, as well as narrow the search to focus on service providers that have services for older Greek people. The assessor provides Ioannis with a referral code for Elizabeth that allows the chosen provider to access Elizabeth's records and commence providing services. Alternatively, the assessor could conduct this search via the assessor portal, and provide Ioannis and Elizabeth with a list of services that can meet their needs and that they may wish to visit.

Outcome
Both Ioannis and Elizabeth are provided with a Home Care Package after a period of time on a waitlist. After selecting an aged care home that can provide Residential Respite, Ioannis contacts the service provider and gives them Elizabeth’s referral code.
The service provider enters this code via the ‘Retrieve referral code’ option available on the provider portal which gives them access to Elizabeth’s client record. The provider then accepts the referral from their ‘Incoming referral’ list.

If Ioannis and Elizabeth’s needs change, such as if they require permanent residential care a new assessment may be undertaken. This can be at the request of a client, a service provider or as a result of a review.
4  Provider portal overview

This information is relevant for people performing Administrator, Team Leader or Staff Member roles in the provider portal.

The provider portal is used to:

- Manage information about the services you provide
- Manage referrals for service(s) issued by the My Aged Care contact centre or assessors by accepting, rejecting, or placing on a waitlist
- Update client records with information about services being delivered
- Request that an assessor undertakes a new assessment of the client
- Produce reports.

⚠️ Staff must have an individual AUSkey linked to their organisation to access the provider portal. For more information, visit https://abr.gov.au/AUSkey/.

4.1 Roles and functions in the provider portal

Service provider staff can be allocated a number of roles (performing Administrator, Team Leader or Staff Member) within the provider portal.

The first Administrator to log in to the provider portal may choose to assign more Administrator roles to other staff to help them to set up their organisation in the portal. Administrator roles can be assigned at an organisation level, or for sections of the organisation (known as outlets in the portal).

People assigned an Administrator role at an organisation level, will manage information for the entire organisation in the portal. People assigned an Administrator role for one or more outlets in the organisation, will only be able to manage information for the outlet(s) they have been assigned.

⚠️ The role(s) assigned to staff will apply to them across all outlets to which they have been assigned.
The table below outlines the functions for each role within the provider portal:

<table>
<thead>
<tr>
<th>Key Functions</th>
<th>Roles</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Administrator</td>
</tr>
<tr>
<td>Client Focussed</td>
<td></td>
</tr>
<tr>
<td>Search for a client record</td>
<td>✓</td>
</tr>
<tr>
<td>View client records</td>
<td>✓</td>
</tr>
<tr>
<td>View referrals</td>
<td>✓</td>
</tr>
<tr>
<td>Accept and reject referrals</td>
<td>✓</td>
</tr>
<tr>
<td>View tasks and notifications</td>
<td>✓</td>
</tr>
<tr>
<td>View My Aged Care interactions</td>
<td>✓</td>
</tr>
<tr>
<td>Add client service information</td>
<td>✓</td>
</tr>
<tr>
<td>Organisation Focussed</td>
<td></td>
</tr>
<tr>
<td>Request change to contractual information</td>
<td>✓</td>
</tr>
<tr>
<td>Manage outlets: add, edit, activate, deactivate</td>
<td>✓</td>
</tr>
<tr>
<td>Manage services: add, edit, activate, deactivate</td>
<td>✓</td>
</tr>
<tr>
<td>Manage staff accounts: add, edit, deactivate</td>
<td>✓</td>
</tr>
</tbody>
</table>

4.1.1 Administrator functions

People assigned the Administrator role in the provider portal are responsible for managing outlet(s), managing information about the services the organisation delivers, and managing staff accounts. People assigned the Administrator role will also be responsible for producing reports. For more information about the Administrator role, see Section 5.

4.1.2 Team Leader functions

People assigned the Team Leader role in the provider portal are responsible for managing referrals for service(s), as well as providing aged care services to clients and adding and updating client service information in the client record. For more information about the Team Leader role, see Section 6.

4.1.3 Staff Member functions

People assigned the Staff Member role in the provider portal will provide aged care services to clients and be responsible for adding and updating client service information in the client record. For more information about the Staff Member role, see Section 8.
5 Administrator role

The first person from your organisation to log in to the provider portal will be responsible for assigning roles to other staff. This will be the person who was nominated on the My Aged Care Organisation Administrator Registration Form. This person will have an Administrator role in the portal.

5.1 Setting up outlets in the provider portal

The provider portal has been designed to allow service providers to set up their organisation in a way that suits their business model, particularly their referral management model.

An outlet is a way of grouping information in the provider portal about the services your organisation delivers. Administrators will need to set up ‘Outlets’ in the provider portal before they can add their organisation’s service information (service items and service sub-types).

Information about the services your organisation delivers will be displayed via the service finders on the My Aged Care website. This will allow people to locate individual services based on the service delivery area or the service delivery location that you nominate for each service.

Electronic referrals will be received from contact centre staff and assessors for services within outlet(s). Referrals are managed by people assigned the Team Leader role for the outlet.

You can choose to set up your organisation as one outlet in the provider portal, so all referrals for service(s) will be managed by the people you have assigned the Team Leader role. If you deliver services in multiple locations, or if you deliver services under a number of different programmes, you may choose to set up a number of outlets in the provider portal to segment your workforce. This will segment the referrals for service the people assigned the Team Leader role in the portal will manage (i.e. a Team Leader associated with an outlet for CHSP services will not manage referrals for a separate outlet for HCP or residential services).
5.2 Examples of how to set up outlets in the provider portal

The models below explore some fictional scenarios, which may help Organisation Administrators decide how to set up outlets in the provider portal.

5.2.1 Decentralised referral management model

Case Study: Company AAA Scenario

Company AAA provide personal care, domestic assistance, home maintenance and home modification services in the north Queensland region. They have:

- an office in Cairns where the personal care and OT teams are based; and
- a mobile van-based team who provide cleaning and maintenance services.

The teams have managers who also perform the services. Sally, the company’s nominated Organisation Administrator, has decided that the managers will manage their respective service referrals (accept/reject/waitlist) as well as continuing to deliver services. Sally sets up outlets for each team in the provider portal and assigns the team managers with Team Leader roles for their respective outlets.

Once Sally has set up the service items within the outlets, from 1 July 2015, the service finders on the My Aged Care website display company AAA’s available services, and the My Aged Care contact centre and assessors can refer clients to the organisation.

The service referrals are managed by the appropriate Team Leader who works with their team to deliver the requested services to the clients.

5.2.2 Centralised referral management model

Case Study: Company BBB Scenario

Company BBB provide personal care, domestic assistance, home maintenance and home modification services in three delivery areas in NSW. They have:

- two regional offices where the personal care and OT teams are based; and
- a mobile van-based team who provide cleaning and maintenance services.

As a result of an increase in regional demand and resulting increased workforce, BBB appointed a central intake team who are responsible for accepting all referrals for service(s) and have the required knowledge to assign it to the appropriate delivery teams.

John, BBB’s nominated Organisation Administrator, sets up outlets for each delivery team in the provider portal, and assigns the members of the central intake team with Team Leader roles for their outlets.

Once John has set up the service delivery items within the outlets, from 1 July 2015, the My Aged Care system displays BBB’s available services in the service finders and the My Aged Care contact centre and assessors can refer clients to BBB.
The central intake team members work together to manage all of the service referrals received and ensures that the requested services are delivered to the clients.

5.2.3 Hybrid referral management model

**Case study: Company CCC Scenario**

*Company CCC* runs Rosella House, a residential aged care facility in South Australia. They have:
- staff who provide residential care services; and
- a nursing team on site who also provide mobile personal care services.

The home has a Managing Director who is supported by an assistant, and there is a Head of Nursing who reports to the Managing Director.

Aled, the Managing Director’s assistant and the company’s nominated Organisation Administrator, decides to set up two outlets:
- a Rosella House outlet, that will provide resi-care services; and
- a Nursing outlet, that provides personal care services to the service delivery area.

Aled assigns the Head of Nursing to the Team Leader role for the Nursing Outlet, and assigns himself and the director to the Team Leader roles of the Rosella House outlet.

Once Aled has set up the service delivery items within the outlets, the My Aged Care system displays company CCC’s available services in the service finders and the My Aged Care contact centre and assessors can refer clients to the company.

The Managing Director can manage the residential care referrals. The personal care referrals are managed by the Head of Nursing, and the requested services are delivered to the clients.
5.3 Setting up services

This function is undertaken by staff who have the ‘Administrator’ role in the provider portal.

You will need to create and maintain information about the aged care services that your organisation provides. Referrals will be received from My Aged Care contact centre staff and assessors for services within outlet(s). Referrals are managed by one or more people who are allocated the Team Leader role for the outlet.

You can add both Commonwealth and non-Commonwealth funded services. These services are known as ‘Service Items’ in the provider portal. Services need to be linked to one of your outlets.

You can also add service sub-types under your service items. Service sub-types are automatically populated when service items are added to your outlet.

Information about the areas you deliver Commonwealth-funded services in (referred to as ‘service delivery areas’ in the portal) will be pre-populated, based on your contractual information. All service providers (except residential care) will need to review their service delivery area information and edit if required.

The information you add about the services you deliver will be publicly displayed on the service finders on the My Aged Care website.

Residential care providers will be able to add promotional material, including photos. Promotional material will be sent to the Department for review. It is expected that the review will take three business days. When approved, the photo will be displayed on the service finders on the My Aged Care website.

It is important that information about the services you provide is kept up to date as the information will be publicly displayed on the service finders on the My Aged Care website (myagedcare.gov.au), and be used by contact centre staff and assessors to refer clients to service(s).

When you set up a service item, it will default to ‘inactive’ in the provider portal. You will need to change the status to ‘operational’ before it is displayed on the service finders via the My Aged Care website. You will need to maintain availability information for your services. Availability information will be displayed on the service finders via the My Aged Care website. When you change availability information, it will take approximately an hour to display the updated information on the service finders.
5.4 Setting up staff and assigning roles

This function is undertaken by staff who have the ‘Administrator’ role in the provider portal.

After you have created outlets for your organisation, you will create staff accounts in the provider portal. You will need to assign roles (Administrator, Team Leader, Staff Member) to your staff, and assign your staff to one or more outlets.

Administrators will need to consider the different functions that the roles in the provider portal perform and determine which role(s) to assign to your organisation’s staff.

See the table and descriptions in Section 4.1 for more information about the key functions that people with different roles will perform in the provider portal.

**Case Study: assigning Administrator roles in the portal**

Alice works for a large organisation that delivers Home Care Packages and has three residential care facilities in different regions in New South Wales. Alice was nominated to be the first person in her organisation to log in to the provider portal on the My Aged Care Organisation Administrator Registration Form.

Alice has ensured that she has an Administrator AUSkey. Alice also recognises that all staff who will use the provider portal will need an individual AUSkey, so she submits a list of staff for her organisation requiring an AUSkey to the Australian Business Register (for more information about how to register for AUSkeys, see [https://abr.gov.au/AUSkey/](https://abr.gov.au/AUSkey/)).

Alice and the management team decide that they want to set up each service that the organisation delivers from different regions as a different outlet in the provider portal. They also decide that a different person will be responsible for managing information about the services the organisation delivers in the portal for each outlet.

Alice logs in to the portal and assigns an Administrator role to Ben for one outlet (a residential care facility). This means that Ben will perform the functions of an Administrator in the portal for that outlet. He will be responsible for managing information about services and staff accounts for that outlet.
Ben is an administration officer for the organisation. Alice decides to also assign Ben the Team Leader role. This means that in addition to his Administrator functions in the portal, Ben will be responsible for managing referrals for the outlet he is assigned to.

When Ben logs in to the provider portal using his AUSkey, his homepage will display the icons associated with the Administrator and Team Leader roles.
6 Team Leader role

Team Leaders can accept, reject or waitlist referrals through the provider portal. If staff with the Team Leader role are assigned to more than one outlet, they can manage referrals for each of the outlets they are assigned to.

In addition to managing referrals, a person assigned the Team Leader role in the provider portal will have the same functions as a Staff Member role in the provider portal. See Section 8 for more information about the Staff Member functions.

6.1 Managing referrals for service

This function is undertaken by service providers who have the 'Team Leader' role in the provider portal. Team Leaders need to manage referrals within three calendar days.

Referrals for service will be for individual services. Service providers will either receive referrals electronically or via a referral code, depending on the client’s preferences. The information contained in a client record will vary depending on the interaction the client has with My Aged Care:

- If the client has been referred directly to service from the My Aged Care contact centre, the client record will include information collected at screening, and an action plan (see Section 3.3 for more information about what is included in an action plan).
- If the client has been referred for service by a RAS or ACAT, the client record will generally include an action plan, as well as a support plan and more detailed information collected during the home support or comprehensive assessment (see Section 3.4 for more information about what is included in a support plan).

Team Leaders will be able to view all information in the client record except the client’s full address and phone number (see Section 3.2 for more information about what is included on a client record). Referrals will include a priority status (low, medium, high), as explained in Section 6.2 below.

From 1 July 2015, Team Leaders can choose to have an email notification sent to their work inbox when they receive a referral. This notification will prompt the Team Leader to action the new referral, but will not contain any information about the referral. The Team Leader will need to log in to the provider portal to manage the referral. Further information about how to set up this email notification function will be made available before 1 July 2015.
Once a referral is received, Team Leaders will manage referrals by accepting the referral, rejecting the referral, or waitlisting the referral.

6.1.1 Accepting referrals for service
After the Team Leader accepts a referral for service, the referral will be listed in the ‘Accepted services pending’ tab in the provider portal. The Team Leader will need to work with staff in the organisation to arrange service delivery.

Service providers are expected to continue to comply with programme guidelines regarding service delivery.

6.1.2 Rejecting referrals for service
If a Team Leader rejects the referral, they must select a reason for rejecting the referral. This information will inform future aged care service planning.

⚠️ If a provider needs to reject a referral after they have accepted it, they will need to call the My Aged Care contact centre.

6.1.3 Waitlisting referrals for service
From 1 July 2015, providers will be able to use the waitlist function to manage referrals. This Guidance document will be updated prior to 1 July 2015, and the latest version will be available on dss.gov.au/myagedcare.
7 Understanding priority status for referrals for service

Referrals for service will include a priority status. These priorities indicate required timeframes for:

- Managing the referral
- Commencing services
- Updating service information within the client record.

The priority status does not change existing emergency provisions.

The timeframes for commencing services and updating service information start after acceptance of the referral.

The priority status outlines service expectations to guide prioritisation, and assist with managing client expectations. The priority timeframes (for managing referrals, commencing services, and updating the client record) will be closely monitored, but not enforced (at this stage).

All staff need to be aware of the priority status timeframes and implications for service commencement and client record updates.
7.1 Priority status for referrals for CHSP services
The three priority statuses for completing actions for CHSP service providers are outlined below. The timeframes for commencing services differ depending on the priority status.

<table>
<thead>
<tr>
<th>Priority status</th>
<th>Manage referrals (accept, reject, waitlist)</th>
<th>Commence services</th>
<th>Update service delivery information in client record</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>3 calendar days</td>
<td>2 calendar days after accepted</td>
<td>14 calendar days after accepted</td>
</tr>
<tr>
<td>Medium</td>
<td>3 calendar days</td>
<td>5 calendar days after accepted</td>
<td>14 calendar days after accepted</td>
</tr>
<tr>
<td>Low</td>
<td>3 calendar days</td>
<td>10 calendar days after accepted</td>
<td>14 calendar days after accepted</td>
</tr>
</tbody>
</table>

7.2 Priority status for referrals for HCP, Residential and TCP services
The three priority statuses for completing actions for HCP / Residential / TCP service providers are outlined below. The timeframes for commencing services differ depending on the priority status.

<table>
<thead>
<tr>
<th>Priority status</th>
<th>Manage referrals (accept, reject, waitlist)</th>
<th>Commence services</th>
<th>Update service delivery information in client record</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>3 calendar days</td>
<td>2 calendar days after accepted</td>
<td>14 calendar days after accepted</td>
</tr>
<tr>
<td>Medium</td>
<td>3 calendar days</td>
<td>14 calendar days after accepted</td>
<td>14 calendar days after accepted</td>
</tr>
<tr>
<td>Low</td>
<td>3 calendar days</td>
<td>28 calendar days after accepted</td>
<td>14 calendar days after accepted</td>
</tr>
</tbody>
</table>
8 Staff Member and Team Leader role

A person who is assigned the Staff Member and Team Leader role in the provider portal will provide aged care services to clients and be responsible for adding and updating client service information in the client record.

⚠️ If service providers are directly approached by new clients seeking Commonwealth funded aged care services, service providers should refer clients to My Aged Care.

In cases where urgent care is required, service delivery may be provided before a client has contacted My Aged Care. Ultimately clients need to be registered with My Aged Care, and have their broader needs considered.

Service providers can assist clients with the My Aged Care registration process by:

- Recording client details in an inbound referral form (accessed from myagedcare.gov.au) that is sent to the My Aged Care contact centre.
- Call the My Aged Care contact centre with the person to facilitate registration and screening
- Send an ‘Inbound referral’ form (accessed from myagedcare.gov.au) requesting that My Aged Care contact centre staff call the person
- Send a fax with information about the person.

8.1 Commencing services and updating the client record

This function is undertaken by staff who have the Team Leader or Staff Member role in the provider portal.

After the person with the Team Leader role in the provider portal accepts a referral for service, the Team Leader will work with staff in the organisation to arrange service delivery.

Service providers are required to commence services and update the client record to record service commencement date and frequency within the timeframes outlined in Section 7. If services cease, service providers need to record a service end date.
Service providers are expected to continue to comply with programme guidelines regarding service delivery, and they will still need to undertake existing care planning processes (i.e. developing care plans).

Service providers will be able to add notes and observations about a client via the provider portal. Service providers can choose to use this feature to record notes about a client, but this is not mandatory. There is also an option to upload attachments, including handwritten notes and observations.

8.2 Reviewing services being delivered to a client

This function is undertaken by staff who have the Team Leader or Staff Member role in the provider portal.

When a client’s needs or circumstances have changed significantly, a service provider can request a review or a new assessment of the client’s needs.

8.2.1 Review

A review is an evaluation of a client’s support plan undertaken by the RAS. A review can be requested by the client, service provider, or scheduled by an assessor. The review may result in a change in services, or a further assessment.

To request a review, service providers should contact the RAS organisation (via phone) who undertook the initial assessment. A review by a RAS assessor occurs over the phone. If the review indicates that the client’s aged care needs have not changed significantly, the RAS assessor will adjust the support plan and make referrals for other services (if required).

When a client has been referred directly to CHSP services after screening (by the contact centre), a request for a review should be made to the contact centre.

The outcomes of the review may include:

- Identification of, and referral to, additional services
- Extension of existing services
- Recommended cessation of services
• Referral for a new home support assessment or a comprehensive assessment.

8.2.1.1 Recommended reviews
My Aged Care contact centre staff or RAS assessors may recommend a review date on the client’s action or support plan. The RAS organisation who undertook the initial assessment will conduct the review.

Service providers have an ongoing responsibility to monitor and review the services they provide to their clients to ensure that the client’s needs are being met. Where there is no recommended review date included in the support plan, it is expected that a service provider will undertake a review in line with relevant programme guidelines.

8.3 New assessment
If there is a significant change in the client’s needs and/or circumstances, a new assessment can be requested from a RAS assessor or an ACAT assessor. The new assessment can be requested by a client, service provider, or after a review has been undertaken by the RAS.
9 Privacy requirements

This information is relevant for people performing Staff Member, Team Leader or Administrator roles in the provider portal.

Service provider organisations are required to comply with the legislative requirements under the Privacy Act 1988 (Privacy Act), including the Australian Privacy Principles. The Privacy Act regulates the handling of personal information about individuals, including the collection, use, storage and disclosure of personal information, and access to and correction of that information.

10 Complaints

This information is relevant for people performing Staff Member, Team Leader or Administrator roles in the provider portal.

10.1 Complaints about My Aged Care

A complaint is a formal expression of dissatisfaction or unmet expectation provided orally or in writing about the service, action and/or behaviour of a representative of My Aged Care, which warrants a response.

Complaints can be made about the services of:

- My Aged Care Contact Centre
- My Aged Care website and related website tools
- Portal functions including the provider portal, assessor portal, and client portal
- Regional Assessment Service.

There are several entry points for people or advocates to make complaints about My Aged Care services through. These entry points include the:

- My Aged Care contact centre
- My Aged Care website
- RAS service providers
- Commonwealth Ombudsman.
Complaints will be managed in the first instance by the My Aged Care contact centre or RAS (where the complaint is about the assessment process or assessment outcomes).

The complaint will be escalated to the Department if no mutual resolution of the issue can be reached, or if the complainant wants to pursue the matter further.

The My Aged Care contact centre and RAS, along with other entry points, will provide regular reports to the Department about complaints received.

10.2 Other complaints
The My Aged Care contact centre may receive complaints about other issues that are not complaints about My Aged Care, such as complaints about:

- Quality of care or service(s) being delivered to people receiving Commonwealth funded aged care services.
- Assessment services provided under the Aged Care Assessment Programme (ACAP)
- Services being delivered under state-based Home and Community Care Programs (Victoria and Western Australia)

In these situations, My Aged Care contact centre staff will refer the complainant to the appropriate area to make the complaint. For example, for a complaint against a service provider, the complainant would be encouraged to raise any issues with the organisation/service provider in the first instance, or where necessary, with the Aged Care Complaints Scheme.

Feedback or comments from stakeholders and users about My Aged Care are not categorised as complaints. These will be viewed as service improvement opportunities.