Aged Care Assessment Quality Framework June 2022

Version 4.1

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1 Why have an Aged Care Assessment Quality Framework?

The Australian Government is committed to high quality care for senior Australians and the health, safety and welfare of aged care recipients is a high priority. As part of reforms to the aged care system, the Government is developing an end-to-end, market-based system in consultation with the sector where the consumer drives quality. Assessors and service providers must work in partnership with consumers, giving consumers real control and choice in the services they receive. This Aged Care Assessment Quality Framework (the framework) reflects these principles.

As the 'human face' of the My Aged Care system, the Regional Assessment Service (RAS) and Aged Care Assessment Program (ACAP) assessors bear significant responsibility for client perceptions of My Aged Care quality. The framework therefore focuses on the client's assessment experience in the context of RAS and ACAP assessments.

The framework is built on the premise that a high-quality assessment experience adds value to the client's My Aged Care journey to services; assists with a client's navigation through the My Aged Care system to effective service delivery; and ultimately builds community trust in the My Aged Care system. The framework also describes essential organisational skills required to support assessors to reach and maintain a high-quality assessment experience for every client. The framework also incorporates the good practice of the 3-tiers of quality management. It also includes a focus on assuring quality assessments in relation to younger people[1] in aged care.

The Department of Health and Aged Care (the Department) acknowledges that many assessment organisations already have quality assurance and governance systems in place. This framework is designed to complement existing business processes and internal procedures with a consistent method for driving high quality My Aged Care assessments through standardised self-audits, client surveys, and quality targets.

Self-assessment against the framework will enable identification of strengths and areas that require work to achieve high quality. Self-assessment can also help in developing change management plans to build the right skills and capabilities to deliver high quality, including new policies, procedures and guidelines, systems for data collection and external expertise.

2 A high-quality assessment experience

This framework aligns with the consumer-focused principles of the *single set of aged care quality standards* and identifies a high quality assessment as one that meets the following 3 quality goals:

PERSONAL – the assessment process is conducted as a respectful conversation and is responsive to the person's individual situation, context, goals, and aspirations – it includes

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[1] Those who are younger than 65 years of age or younger than 50 years of age if they are Aboriginal and Torres Strait Islander.

and respects the role of carers and family and ascertains the sustainability of this support.

The support plan accurately reflects the client's personal and unique circumstances (i.e., physical, medical, psychological, cultural, social, and personal) and the client's specific goals and aspirations reflective of their assessed care needs.

EFFECTIVE – the client feels that the assessment process culminates in the client exercising choice and control in accessing the right services (as available and as eligible) to assist them to remain in a setting most appropriate to their needs. There is a reduced need for the client to tell their story more than once.

CONNECTED – the client feels connected to their My Aged Care client pathway to services; understands how and why the assessment process contributes to their journey and what the likely timeframes are for approval decisions and access to services.

3 Achieving a high-quality assessment experience

The effective and efficient provision of client-centred, high quality assessment services requires a solid foundation of rigorous quality governance and organisational systems. As part of the co-design process with assessment organisations, several governance areas key to supporting high quality assessment delivery to clients were identified. These included:

3.1 Partnerships with clients

- Support a partnership approach with clients in the assessment and referral process
- Use client and carer feedback and complaints to identify and respond to client issues, and to improve the assessment process
- Support face-to-face engagement with clients with cultural and linguistic diversity
- Engage with clients with special needs and other complex cohorts to ensure they receive the required support for their needs and goals.

3.2 Planning and leadership

- Set and support the expectation that each assessor will achieve the goals for a high-quality assessment as described in this framework.
- Lead the implementation of the quality framework in their organisation, and ongoing monitoring and improvement of assessments, using the quality framework goals, objectives and targets, and other initiatives agreed with the Department.
- Support a collaborative approach to assessment between the organisation, client and service providers that promotes client independence, wellness, wellbeing and/or reablement.
- Ensure that the assessing organisation is connected to the local community and services, and other assessment workforces, to deliver assessments and outcomes that most appropriately meet clients' needs and aspirations.

3.3 Positive people and practice

- Develop (as appropriate) recruitment, position descriptions, training (including mandatory training) and mentoring to support staff to be effective assessors, as described in this framework.

- Supply staff with guidelines, information and tools required to conduct a high-quality assessment as described in this framework.
- Equip assessors to identify and manage key risks to clients.
- Ensure assessors are supported to manage occupational, health and safety risks and challenging situations, and have access to advice and support for dealing with complex clients.
- Ensure staff receive regular information and feedback on their progress with achieving the assessment quality goals and use this to inform their professional development.

These governance areas along with the 3 quality goals underpin the 3 key elements that must be in place to achieve a high-quality assessment for every client: **PURPOSE**, **PEOPLE** and **PILLARS**. Of these, it is the purpose element the Department focuses on when monitoring contractual performance. The people and pillars elements are designed to assist with planning and resourcing activities. *Diagram 1* provides an overview of the structure and relationship of the 3 major elements of a high-quality assessment.

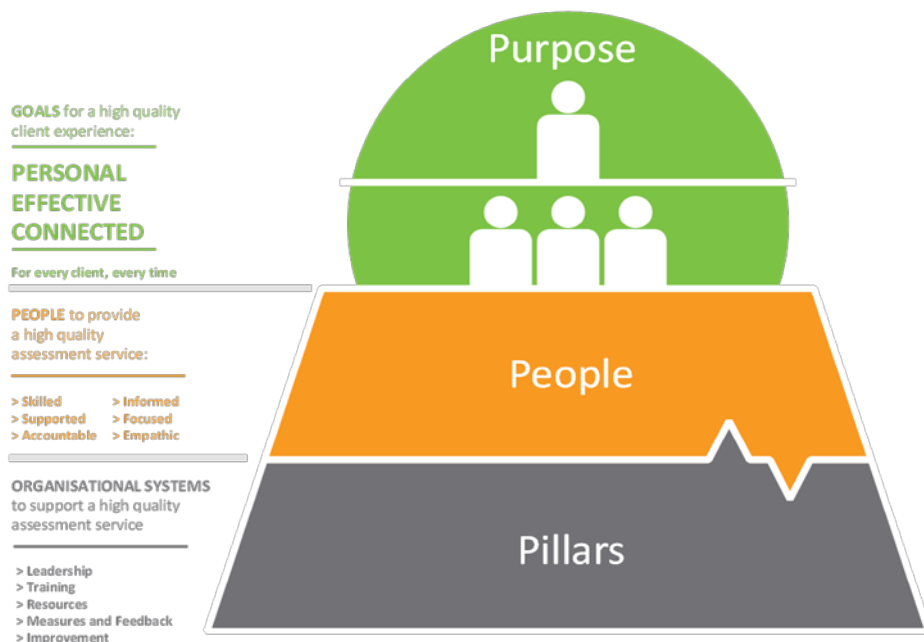## 3.4 Elements of a high-quality assessment

GOALS for a high quality client experience:

PERSONAL
EFFECTIVE
CONNECTED

For every client, every time

PEOPLE to provide a high quality assessment service:

> Skilled	> Informed
> Supported	> Focused
> Accountable	> Empathic

ORGANISATIONAL SYSTEMS to support a high quality assessment service

> Leadership
> Training
> Resources
> Measures and Feedback
> Improvement

Diagram 1: Three major elements of a high-quality assessment

PURPOSE: In its basic form, the purpose of an assessment is to evaluate a client's care needs to, where appropriate, enable access to aged care services. Under the framework this means a high quality, *personal* assessment of a client's care needs and, where appropriate, connect a client to the My Aged Care pathway to services. This should result in access to a range of appropriate services that effectively meets the client's care needs to help them meet their goals.

PEOPLE: To provide clients with a high-quality experience, assessment organisations need specially trained **PEOPLE** who have the skills to achieve and account for delivery of the 3 quality goals. Assessors need to display empathy, be able to communicate confidently and clearly, respect a client's right to make decisions and be skilful in formally recording information.

Assessment organisations must maintain their responsibility to ensure that all staff meet the

National Minimum Training Standards and support other training necessary to improve assessors' 'human' skills in terms of communication and empathy.

Management should recruit appropriately skilled staff with demonstrated capacity to achieve the 3 quality goals. All personnel should be trained in risk identification and management to achieve a safe workplace. Assessors need to be confident they are protected from risks posed by challenging situations and have access to advice and support for dealing with complex clients.

PILLARS: Organisational structures and processes that enable personnel to meet the 3 quality goals, provide high quality experiences for clients and track and improve performance are **PILLARS**. Management should lead implementation of the framework and have strong governance systems in place necessary to achieve the 3 quality goals.

Management should communicate the shared goal of achieving and maintaining a high-quality experience for every client and value the resources and time required. There must be a shared understanding that the delivery of a high-quality assessment experience may require additional time, as assessors enhance current practices in preparing, attending and following up on an assessment. Sufficient resourcing is important for data collection or analysis of client and carer feedback, and to identify and respond to client issues and measure quality.

Both assessors and administrative staff should have appropriate, reliable technology to support effective service delivery and maintain accurate records. Most importantly, organisational structures need to support feedback on progress with achieving high quality and use this to inform their professional development.

Assessors should assess their own performance before, during and after an assessment using a 3-tiered approach to quality management. This should include measuring how client experience can be improved. To achieve the delivery of quality assessment services, assessment organisations are required to comply with the guidance in the *My Aged Care Assessment Manual (the Manual)* and use the Assessment Quality Framework described in Section 4 below.

4 Tiered approach to managing quality

Underpinning the 3 elements of a high-quality assessment is a risk-based approach to quality management that follows a 3-tiered model.

At each tier the approach for ensuring quality, the tools to manage, and the parties' responsibility varies. The level of risk and effort required to manage quality at subsequent tiers is dependent on the rigour applied in the tier before. By using the appropriate management tools, the parties responsible at each tier therefore mitigate the overall risk to quality. *Table 1* gives an overview of the tiered approach to quality management.

Table 1: Three tiers of assessment quality management

Tier	Approach	Management Tool/s	Responsibility
1	Quality and accuracy of data/information captured at the time of assessment	• Adherence to the Assessment Manual, including best practice principles, NSAF and its user-guide, and other relevant guidance by the Department • Quality checks/control by the assessment organisation before the assessment is finalised	Assessors / Delegates / Team Leads
2	After the fact quality audits	• NSAF Self-audit tool • Assessment Service Client Satisfaction survey • KPIs • My Aged Care Data reports • Assessment organisation internal procedures	Assessment Organisations
3	Third party audits e.g., sample checks (by Department or its contracted quality auditors)	• Review of performance reports (including self-audit reporting) or other aspects as appropriate (e.g., based on identified risks) • Quality auditing	Independent Reviewers

Tier 1 involves quality checks at the time of assessment in accordance with the My Aged Care Assessment Manual including best practice principles and other relevant guidance provided by the Department. Assessors are responsible for checking assessments and decisions before they are finalised to ensure that the National Screening and Assessment Form (NSAF) has been completed as a quality record that supports and reflects discussions with the client. For comprehensive assessments, responsibility for quality sits initially with the assessor and then the Delegate approving recommendations. Appropriate quality at the first tier will reduce quality risk for, and reliance on, the second and third tiers.

Tier 2 involves after the fact quality audits by the assessment organisation using a range of quality management tools. These include the:

- Key Performance Indicators (KPIs) as described in the contractual arrangements for the assessment organisation and in accordance with the defined reporting cycle.
- NSAF self-audit tool to assess the quality of completed NSAFs. Refer to the NSAF Self-Audit Tool User Guide for more information.
- Assessment Service Client Satisfaction Survey to assess client satisfaction with regards to the service they received at the time of assessment. Refer to the Assessment Service Client Satisfaction User Guide for more information.
- My Aged Care Data Reports. The Department will provide these to assessment organisations through agreed channels to better support quality assessments. For example, the Department may provide complaints data received through the My Aged Care complaints process.

- An assessment organisation's internal procedures and business processes. These will continue to operate and complement the other quality management tools. Examples of internal processes include team leaders regularly supervising assessments, ongoing coaching and development of staff, and appropriate record keeping and controls for handling sensitive consumer information (see Section 5 for further information).

Tier 3 includes circumstances where the Department has identified quality risks either as part of ongoing internal reviews of performance reports or other identified risks based on evidence, or through external channels such and the Commonwealth Ombudsman, a law enforcement agency or other regulatory body. The Department may invoke an independent review of selected assessments (sample selection will be random or appropriate to the relevant risk/purpose of the audit) to check their quality and evidence-base.

The independent review would be supported by suitably qualified practitioners (e.g., clinically qualified where needed) supported by evidence provided by both the Department and assessment organisation as appropriate. There would be consultation between the Department and the relevant assessment organisation/s to support a common understanding of processes, expectations and intended outcomes before activities start in this tier.

4.1 Measuring quality

As outlined in Section 2, a high-quality assessment is one that meets the 3 quality goals of Personal, Effective and Connected. Detailed measures and performance targets against these 3 goals are described in Tables 1, 2 and 3. The tools used to manage a quality assessment are aligned to those outlined in the 3-tiered approach to managing quality presented at Table 1.

In addition, as part of the obligation to support senior Australians with a quality assessment experience, assessment organisations are required to meet the following KPI as outlined in their agreement with the Department:

- 85% of the NSAFs and support plans meet the agreed quality score *as measured using the "NSAF Self-Audit Tool"*. A minimum of 2% of NSAFs completed in the reporting period are to be sampled for this KPI, and 85% of those must achieve a score of 85% or above. This requires:
  - a minimum 2% sampling of assessments completed **per outlet**, and
  - 85% of the total number of assessments audited for the period must meet a quality score of 85% or above. For example, if 2% of assessments for the reporting period per outlet = 20 assessments, 17 assessments must meet a score of 85% or higher to meet KPI for their outlet.
  - **All outlets** within the assessment organisation **must meet this KPI** for the overall KPI to be reported as met.
- **ACATs only**: Younger People - Each ACAT assessment outlet must include younger people in the 2% of assessments per outlet to be audited using the NSAF self-audit tool (all younger people **up to a maximum of 5** must be included per outlet).
- 85% of Clients are satisfied or very satisfied with the overall quality of service delivery, *as measured independently* using the existing "Assessment Service - Client Satisfaction Survey". A minimum of 2% clients who have had an assessment completed in the reporting period are to be sampled for this KPI and 85% of those must achieve a score of 85% or above. This requires:

- a minimum 2% of assessments completed per outlet. To be able to meet the 2% sample target, where feasible include > 2% clients in sample to accommodate lower than expected response rates.
- 85% of those audited to meet a quality score of 85% or above. For example, if 18 (3%) of 600 clients per outlet with completed assessments in reporting period are issued with the survey and 12 (2%) clients complete and return the survey, 10 surveys (approx. 85% of 12) must meet a score of 85% or higher to meet KPI for their outlet.
- All outlets must meet the KPI for this KPI overall to be considered met

Table 2: Measures and performance targets for a PERSONAL assessment

Objective	Measures	Performance targets	Quality management tool/s
P1. The assessment is conducted as a respectful conversation with the client. The conversation focuses on the client's perspective, strengths, goals, needs and preferences.	P1.1 The client feels at ease with and respected by the assessor, and that their strengths, goals, needs and preferences are understood and acknowledged.	P1.1.1 85% clients are satisfied with assessor's understanding of their circumstances and needs, and degree to which they felt at ease with the assessor.	Client Survey Q3, Q6
		P1.1.2 Number of complaints from clients and carers about the assessment process.	Assessment organisation internal procedures My Aged Care data reports
P2. The assessment and support plan accurately reflect the client's perspective, a holistic view of their circumstances (i.e., health, cultural, social, and personal, and how these may change) and their specific goals and aspirations.	P2.1 The support plan promotes the client's perspective and a holistic view of their circumstances, and these are reflected in the goals.	P2.1.1 85% clients are satisfied that the support plan reflects their situation and goals (where identified).	RAS KPIs 3-4 ACAT KPI 5
	P2.2 Vulnerable and special needs clients are identified, and their specific issues identified and addressed to ensure an accurate and appropriate support plan.	P2.1.2 The NSAF, support plan, referrals, and assessor notes link to client's goals for 100% of assessments.	Self-audit tool Q6, Q10 RAS Q7, Q11 ACAT
		P2.2.1 NSAF and Support Plan review demonstrates 100% of vulnerable and special needs clients are identified and a corresponding plan, linking support or short-term case management put in place.	Self-audit tool Q13 RAS Q16 ACAT

Objective	Measures	Performance targets	Quality management tool/s
P3. The assessor clarifies, acknowledges, and respects the role of the carer, family or representative in the assessment process.	P3.1 The carer, family or representative is acknowledged by the assessor, the assessor discussed their role, and they were engaged in the assessment as the client wished.	P3.1.1 100% clients are satisfied that their carer, family, or representative played an appropriate role in the assessment process and has an appropriate role to play in their care moving forward.	Client Survey Q4
P4. Where the assessed person is a younger person, the delegate clearly demonstrates consideration of all relevant aged care legislation and guidelines.	P4.1 Uploaded on My Aged Care client record completed: • Aged Care Assessment of Younger Person Check Form (evidencing availability and suitability of all age-appropriate options relevant to the client situation) and why they are not suitable, and • the letter of approval or non-approval to the client statement of reasons for the decision and evidence sections clearly articulate that the delegate has turned their mind to the Approval of Care Recipients Principles 2014 and the Principles and the Principles and guidelines for a younger person's access to Commonwealth funded aged care services relevant to the type of care.	P4.1.1 100% of all younger people records that are self-audited have uploaded these well evidenced documents and notes: • Aged Care Assessment of Younger Person Check Form • Letter of approval or Letter of non-approval	Self-Audit tool Q18, 19, and 20 ACAT

Table 3: Measures and performance targets for an EFFECTIVE assessment to support wellness and/or reablement

Objectives	Measures	Performance targets	Quality Management tool/s
E1. The assessor supports the client to make informed decisions about support or care options to meet their needs and achieve their goals by providing clear information including any available formal and informal services and supports in their region, and what the client can do to assist themselves (if appropriate).	E1.1 Client understands the information provided by the assessor (including any available formal and/or informal services and/or any self- assistance options). E1.2 The support plan demonstrates an appropriate mix of formal and informal services, supports and self- supports to promote wellness, wellbeing and reablement for the client.	E1.1.1 85% clients are satisfied with their understanding of the information provided by the assessor (including any available services and supports). E1.2.1 100% support plans show a mix of formal and/or informal services and self supports appropriate to promoting the client's wellness, wellbeing and/or reablement.	Client Survey Q8, Q9 Self-audit tool Q7 RAS Q8 ACAT
E2. Assessments are delivered in a timely manner appropriate to client needs.	E2.1 The assessment is conducted within the timeframe for the client's referral priority.	E2.1.1 90% of referrals received from the Gateway System are actioned by the contractor (either accepted or rejected) within 3 days. E 2.1.2 90% of accepted referrals lead to the completion of an Assessment within expected timeframes.	RAS KPI 1 ACAT KPI 1 RAS KPI 2 ACAT KPI 3
E3. The assessor understands and takes a holistic view of the client's situation (i.e., health, cultural, social, and personal). The assessor acknowledges the client as the decision-maker.	E3.1 Assessor skills and knowledge meet the client's needs. E3.2 An interpreter or appropriate support person is engaged in the assessment when required.	E3.1.1 85% Clients are satisfied with assessor's understanding of their circumstances and needs. E3.2.1 100% Client records and NSAF show interpreter or support person engaged (where appropriate)	Client Survey: Q6 Self-audit tool Q14 RAS Q17 ACAT

Objectives	Measures	Performance targets	Quality Management tool/s
E4. The assessor appropriately time- limits formal home support services so more clients benefit in the community.	E4.1 Referrals to formal home supports are made on a time-limited basis.	E4.1.1 Client records and NSAF show 100% of referrals are made on a time limited basis.	Self-audit tool: Q12 RAS Q13 ACAT

Table 4: Measures and performance targets for a CONNECTED assessment

Objectives	Measures	Performance targets	Quality Management tool/s
C1. Assessors accurately record and make available assessment information, so clients do not have to provide the same information to multiple assessors.	C1.1 Clients only need to tell their story once during the assessment process.	C1.1.1 85% of clients are satisfied with the assessor's explanation of the purpose of the assessment. C1.1.2 90% of all NSAFs sampled have complete and accurate client information. C1.1.3 90% of client records recorded outside the Gateway System are transferred onto the Gateway System within 2 Business Days of an Assessment being undertaken. C1.1.4 0% client records created by assessors are duplicated.	Client Survey Q2 Self-audit tool Q1-5 RAS /ACAT Assessment organisation internal procedures (where My Assessor App has not been used) My Aged Care Data Reports
C2. The client understands the steps in the assessment and referral process (to services and supports) and the likely waiting times for each step.	C2.1 There are no surprises in the client assessment pathway	C2.1.1 Number of client complaints about unexpected issues in the assessment process. C 2.1.2 85% Clients are satisfied that the assessor clearly explained the process that would follow the assessment. C 2.1.3 85% Clients know their assessment time and date.	Assessment organisation internal procedures My Aged Care data reports Client Survey Q9 Client Survey Q1

5 Appropriate Handling of Personal Information

As articulated in the Manual (Privacy and Consent section) assessors must always remain mindful of their obligations for handling personal information. From a quality management perspective, it is essential that personal information is handled as per requirements, and quality checks (before the fact) and audits (after the fact) also consider that the information was handled as per requirements. These requirements stem from the *Aged Care Act 1997* and the *Privacy Act 1988.* Depending on where an assessment organisation operates additional State and/or Territory legislation may apply.

The *Aged Care Act 1997 Instrument of Delegation* sets out that when ACAT assessors make an assessment, they do so as a delegate of the Secretary. This means that that Division 86 of the *Act* applies, which relevantly provides that all information collected in making an assessment is "protected information"; and Division 86 establishes that disclosure of the protected information (except in limited circumstances specified in the *Act*) is an offence, punishable by up to 2 years imprisonment.

Under the *Privacy Act 1988,* Clause 3.3 of the *Australian Privacy Principles* (APPs), an entity must not collect sensitive information unless the person consents to the collection, and the information is reasonably necessary for, or directly related to, one or more of the entity's functions or activities, subject to the exceptions such as "required or authorised by or under an Australian law".

Where an assessor adds a "sensitive client" status marker on a client's file, it is important to note that while this may give comfort to the client about who can see their personal information, it does not restrict the use or disclosure of this information for certain legitimate purposes or activities. From a quality management perspective, it is important that privacy related processes are regularly checked and reviewed.

In this context, the My Aged Care contact centre also has a key role to play in supporting assessment organisations to manage any actual or potential privacy breaches by ensuring that sufficient information (for example, who reported the breach, and the nature of the breach) is clearly recorded and passed on in a timely manner to the assessment organisation and/or the Department for appropriate action.

5.1 Notifiable Data Breaches

The passage of the *Privacy Amendment (Notifiable Data Breaches) Act 2017* established the *Notifiable Data Breaches (NDB)* scheme in Australia. From 22 February 2018 the NDB scheme applies to all agencies and organisations with existing personal information security obligations under the Commonwealth *Privacy Act 1988*. The Department is required to comply with these provisions, which includes assessing and responding to actual and suspected data breaches and formally notifying 'eligible data breaches' including to the Information Commissioner, and subject to certain exceptions, notify affected individuals.

It is essential that assessment organisations inform the Department of any such breaches in a timely manner and receive further advice on next steps.

Attachment A: RAS Self-Audit Tool Questions

Audit details			
Auditor		Date of audit	
Assessor		ACID	
Date of assessment		Assessment Type	

Client record and NSAF	Response
Wallet check completed?	Yes / No / N/A
No slang or jargon?	Yes / No / N/A
Understandable grammar and spelling?	Yes / No / N/A
Language tactful and objective?	Yes / No / N/A
Thorough descriptions of the client's situation, their issues, and strengths?	Yes / No / N/A
Comments	

Goals and Concerns	
NSAF and Support Plan flow together as a narrative?	Yes / No / N/A
Concerns and goals clear, actionable, and realistic?	Yes / No / N/A
Concerns and goals written from the client's perspective?	Yes / No / N/A
Client's strengths and motivations considered in setting goals?	Yes / No / N/A
Comments	

Recommendations and referrals	
Recommendations relate to client's goals and needs?	Yes / No / N/A

Audit details	
Referrals have an end date or review date, or a rationale for ongoing services provided?	Yes / No / N/A
Non funded services and informal supports considered?	Yes / No / N/A
Comments	
Vulnerable and special needs	
If the client is vulnerable or has special needs, was linking support, short term case management or an appropriate plan put in place?	Yes / No / N/A
Interpreter or support person engaged throughout the assessment?	Yes / No / N/A
Comments	

Attachment B: ACAT Self-Audit Tool Questionnaire

Audit details			
Auditor		Date of audit	
Assessor		ACID	
Date of assessment		Assessment Type	

Client record and NSAF	Response
1. Wallet check completed?	Yes / No / N/A
2. No slang or jargon?	Yes / No / N/A
3. Understandable grammar and spelling?	Yes / No / N/A
4. Language tactful and objective?	Yes / No / N/A
5. Thorough descriptions of the client's situation, their issues, and strengths?	Yes / No / N/A
6. If supplementary tools were used, were they appropriate for the situation and were the results included in the support plan?	Yes / No / N/A
Comments	

Goals and Concerns	
7. NSAF and Support Plan flow together as a narrative?	Yes / No / N/A
8. Concerns and goals clear, actionable, and realistic?	Yes / No / N/A
9. Concerns and goals written from the client's perspective?	Yes / No / N/A
10. Client's strengths and motivations considered in setting goals?	Yes / No / N/A
Comments	

Recommendations and referrals	
11. Recommendations relate to client's goals and needs?	Yes / No / N/A
12. CHSP Referrals have an end date or review date, or a rationale for ongoing services provided?	Yes / No / N/A
13. Non funded services and informal supports considered?	Yes / No / N/A
14. Recommendations for Act based services are appropriately evidenced and aligned to a client's immediate care needs?	Yes / No / N/A

Audit details	
15. If a high priority recommendation for a home care package was made, was a thorough justification provided?	Yes / No / N/A
Comments	
Vulnerable and special needs	
16. If the client is vulnerable or has special needs, was linking support, short term case management or an appropriate plan put in place?	Yes / No / N/A
17. Interpreter or support person engaged throughout the assessment?	Yes / No / N/A
Comments	
Aged care assessment of a younger person	**Response**
18. Does the client classify as a younger person?	Yes / No
If 'Yes' the following questions apply.	
I acknowledge that I have reviewed the following, evident by the responses below:	
19. Accurate completion of the Aged Care Assessment of Younger Person Check Form.	Yes / No
Comments	
20. Approval or Non-Approval letter statement of reasons and evidence clearly justifies the decision for the younger person's aged care approval for that type of care.	Yes / No
Comments	

Attachment C: Assessment Service – Client Satisfaction Survey

Who is completing this survey?				
Client	Carer	Immediate Family	Friend/Relative	Other support person
☐	☐	☐	☐	☐

The below questions are about your assessment experience and will assist us with improving our service and the experience of other senior Australians who may require aged care assessment services in the future.

The survey will take between 5 -10 minutes to complete and you have an option at the end to add more comments. All responses are confidential and no information we collect can be used to identify you.

Please indicate your level of satisfaction with each of the below statements	Very Satisfied	Satisfied	Neither Satisfied or Dissatisfied	Dissatisfied	Very Dissatisfied	N/A
1. The assessor arrived within the agreed time for the appointment	☐	☐	☐	☐	☐	☐
2. The assessor explained the purpose of the assessment in a clear way that I could understand	☐	☐	☐	☐	☐	☐
3. I was made to feel at ease during the assessment	☐	☐	☐	☐	☐	☐
4. My family, carer or other support person was able to be involved as much as I wanted them to be	☐	☐	☐	☐	☐	☐

Please indicate your level of satisfaction with each of the below statements	Very Satisfied	Satisfied	Neither Satisfied or Dissatisfied	Dissatisfied	Very Dissatisfied	N/A
5. I was listened to during the assessment	☐	☐	☐	☐	☐	☐
6. The assessor understood my concerns and goals (if any)	☐	☐	☐	☐	☐	☐
7. My values and beliefs were respected during the assessment	☐	☐	☐	☐	☐	☐
8. The information the assessor gave me was easy to understand.	☐	☐	☐	☐	☐	☐
9. The assessor clearly explained what would happen after the assessment	☐	☐	☐	☐	☐	☐
10. Overall, how satisfied were you with your experience on the day?	☐	☐	☐	☐	☐	☐

Please use the following box to include any additional comments about your assessment experience.

Optional

Do you identify as:

Please indicate your level of satisfaction with each of the below statements		Very Satisfied	Satisfied	Neither Satisfied or Dissatisfied	Dissatisfied	Very Dissatisfied	N/A
A Veteran	Aboriginal and/or Torres Strait Islander	Non-English-speaking background	Lesbian, Gay, Bisexual, Transgender and/or Intersex	None of the above			
☐	☐	☐	☐	☐			