



Australian Government  
Department of Health and Aged Care



# Residents' Experience Survey Report

What we heard in 2022 and 2023

---

[www.health.gov.au/our-work/residents-experience-survey](http://www.health.gov.au/our-work/residents-experience-survey)



# Contents

<b>Acknowledgements</b>	<b>4</b>
<b>Executive Summary</b>	<b>5</b>
Aged care home size	8
Residents with high support requirements	9
Residents from diverse backgrounds	9
<b>Section 1: Introduction</b>	<b>10</b>
Why we introduced the Residents' Experience Survey	11
The survey approach	12
How the survey responses were analysed	14
<b>Section 2: The findings</b>	<b>16</b>
Resident satisfaction	17
Comparing the 2022 and 2023 survey responses	19
Residents' Experience Survey 2023 overview	21
Food-related experiences and improvements	23
- What residents said	25
Staffing-related experiences and improvements	27
- What residents said	27
Experiences of different resident groups across all themes	29
- Residents with high daily living support requirements	29
- Residents with high behavioural support requirements	30
- Service size	31
<b>Section 3: Findings by theme</b>	<b>33</b>
Care environment	34
- Residents' experiences	35
- What residents said	36
- Key observations	36
- CALD residents	37
- First Nations Australians	37
- Cognitive impairment	38
Organisational aspects of care provision	39
- Residents' experiences	40
- Key observations	41
- Nursing Requirements	41
- CALD and First Nations Australian residents	41

Autonomy	42
- Residents' experiences	42
- What residents said	43
- Key observations	44
- Proxies	44
- CALD residents	45
<b>Section 4: Conclusion</b>	<b>46</b>
Key improvement areas	47
Resident group observations	47
Final remarks	48
<b>Glossary</b>	<b>49</b>
<b>Appendix</b>	<b>50</b>
Appendix 1 – Survey methodology	50
- Sampling	50
- Randomisation approach	52
- AN-ACC	52
- <i>Cognitive impairment</i>	53
- <i>Nursing requirements</i>	53
- <i>Behavioural support</i>	53
- <i>Activities of daily living support</i>	54
- First Nations group survey	54
- Cognitive impairment	54
- Exemptions	55
- Limitations of the survey	55
- Privacy protection	55
Appendix 2 – Survey sample representation for the RES 2023	56
Appendix 3 – Multivariate analysis methodology	60
- Service size grouping	60
- Statistical significance	60
- Machine learning driver models	60
- Topic modelling	64
- Sentiment analysis	65
Appendix 4 – RES 2023 and RES 2022 overall scores for each question	66
Appendix 5 – Summary of the RES 2022 findings	67
- Sample size	67
- Summary	67
- Key findings by theme	67
<b>References</b>	<b>68</b>

# Acknowledgements

The Department of Health and Aged Care would like to thank everyone who supported both rounds of the Residents' Experience Survey.

First and foremost, thank you to the older people across Australia's residential aged care homes who participated in the survey. Thank you also to your families and carers for supporting this important initiative. The survey is a valuable opportunity to share your experiences, thoughts, and opinions about the care you receive. With your help we will continue to improve aged care services.

Thank you to all residential aged care homes for your participation and ongoing support of the survey.

IQVIA in consortium with Access Care Network Australia (ACNA) and HealthConsult were engaged by the Department of Health and Aged Care (the department) to deliver both rounds of the Residents' Experience Survey, including the development of this report.

Queries relating to copyright or comments on this publication should be directed to: [acres@health.gov.au](mailto:acres@health.gov.au)

# Executive Summary



## 2023 survey overview:

**37,382**

residents surveyed  
(20 per cent of aged  
care residents)

**2,625**

aged care homes participated  
(99 per cent of all Australian  
Government funded aged care homes)

**14**

survey questions  
spanning 3 themes



## What residents liked about their aged care home:

- Residents responded the same or more positively to all questions in 2023 compared to 2022.
- 85 per cent of residents would recommend their aged care home to someone.
- Autonomy was the most improved area of the survey from 2022 to 2023.
- Residents were the happiest with the safety, respect, and kindness experienced in their aged care homes.



## Key improvement areas for aged care homes:

- While 70% of residents were satisfied with the food, this was the lowest ranked question for 2022 and 2023. Residents asked for improvements to food quality and variety.
- Staff communication (explaining things) and following up were the next lowest ranked questions, with residents asking for 'more staff'.
- Residents with high care needs were less satisfied. For residents with high care needs due to limited mobility or behavioural challenges, all questions were scored lower. Those with high nursing support needs expressed lower satisfaction with the organisational aspects of care.
- Culturally and linguistically diverse (CALD) residents were less satisfied than non-CALD residents, and First Nations residents generally reported lower satisfaction.
- Residents in larger aged care homes responded less positively to all questions in the survey compared to those in smaller aged care homes.

## 3 key themes of analysis:



### 1. Care environment:

The safety, well-being and comfort of residents

**96%**

felt safe in their aged care home

**95%**

felt that staff treated them with respect

**95%**

felt that staff were kind and caring

**91%**

felt that they got the care they needed in their aged care home

- Increased staffing was the most requested staffing-related improvement.
- Residents requiring high levels of behavioural support or daily living support were less satisfied with their care environment.
- CALD residents and First Nations Australians were less satisfied with their care environment.



### 2. Organisational aspects of care provision:

The service-focused aspects of the residential experience

**87%**

thought their aged care home was well run

**86%**

thought staff in their aged care home knew what they were doing

**82%**

were satisfied with how well staff follow up when something was raised by them

**77%**

were satisfied with how well staff explained things to them

**70%**

liked the food in their aged care home

- Residents in larger homes and residents with higher nursing requirements were much less satisfied with food (11 per cent and 9 per cent lower, respectively). Residents with significant cognitive impairment were more satisfied with the food (8 per cent higher).
- Residents asked for more staff in their aged care homes.
- Residents requiring high levels of behavioural support or daily living support, were less satisfied with the organisation aspects of care provision.
- CALD residents and First Nations Australians were less satisfied with their organisational aspects of care provision.





### 3. Autonomy: The extent to which residents live independently

**87%**

of residents felt that they had a say in their daily activities

**85%**

of residents felt they were encouraged to do as much as possible for themselves

- Autonomy responses were most improved compared to the 2022 survey.
- Residents requiring high levels of behavioural support or daily living support, were much less satisfied with autonomy.
- Proxies (representatives nominated to answer the survey on behalf of residents) were the least satisfied with autonomy.
- While CALD residents remained less satisfied with their autonomy, the gap in positive responses reduced compared to the 2022 survey.



The Residents' Experience Survey is an annual 14 question survey completed by 20 per cent of residents across 99 per cent of Australian Government funded aged care homes.

The survey is a Department of Health and Aged Care (the department) initiative. It is delivered by an independent third party on behalf of the department. It responds to a key finding of the Royal Commission into Aged Care Quality and Safety about the lack of data on the quality of aged care services. The Residents' Experience Survey (RES) was first undertaken in 2022 (then known as the Consumer Experience Interview), and the most recent survey was completed in 2023. This report summarises key findings across two years of RES data and identifies changes in the residents' experience from 2022 to 2023.

The RES covers three main themes, the care environment, organisational aspects of care provision, and autonomy. These relate to the different aspects of aged care provision that together influence the experiences of aged care residents. Of the three themes covered by the survey, residents were most satisfied with their care environment – the safety of their home and the kindness and care provided by staff. The autonomy theme questions showed the greatest increase in positive responses compared to the 2022 RES. Organisational aspects of care provision – spanning food, staff knowledge, staff communication and general management – received the least positive responses of the three themes. The food satisfaction question was the lowest ranked question in the survey. Residents most frequently asked for improvements to food quality and variety, and to staffing levels in their homes. Despite improvements in positive responses in the 2023 survey compared to the 2022 survey, these key trends were unchanged.

While residents differ in their support needs and personal characteristics, it is important all residents receive person-centric care and feel their needs are met. Therefore, the survey responses were analysed to identify response trends and identify resident groups with poorer experiences of aged care. Opportunities for improvement have been identified in this report and are intended to help aged care homes provide a better experience for their residents.

The following three attributes had an impact on residents' experiences in their aged care homes.

## **Aged care home size**

Residents of aged care homes with fewer residents consistently responded more positively than residents in larger homes. Smaller homes (forty or fewer residents) were more likely to be in rural locations, but even so the size of the home had the biggest impact on resident satisfaction. When looking at responses from homes of different sizes, the largest changes were in food, staff explaining things, knowledge, and following up.



## Residents with high support requirements

Residents who required higher levels of support with daily living activities and residents who required high behavioural monitoring were less satisfied with their aged care experience. In addition, residents who required higher levels of nursing support were more dissatisfied with the organisational aspects of care – especially food and whether staff know what they are doing. Residents with cognitive impairment also reported feeling less safe. These findings highlight that residents with high care needs are more likely to feel underserved by their aged care homes or more significantly impacted by staffing limitations. Addressing these care gaps should be prioritised.

## Residents from diverse backgrounds

CALD residents reported lower levels of satisfaction with respect to all themes, with small differences in responses compared to non-CALD residents. For most questions, the gap in positive responses between CALD and non-CALD residents was smaller in the RES 2023 compared to 2022. Similarly, First Nations Australians reported lower satisfaction with their care environment, and greater dissatisfaction with respect to staff communication and their home being well run. While smaller than the differences observed for residents with higher care requirements, these findings demonstrate an opportunity for aged care homes to improve the aged care experience of these two resident groups.



Section 1

---

# Introduction

## Why we introduced the Residents' Experience Survey

In 2021, the Royal Commission into Aged Care Quality and Safety delivered 148 recommendations.

The Royal Commission into Aged Care Quality and Safety (Final Report) examined the extent to which aged care homes meet the needs of residents and highlighted the extent of substandard care and a lack of data measuring the quality of services. The Royal Commission used these findings to provide detailed recommendations on the future of government funded aged care homes in Australia. Recommendation 94 called for “greater weight to be attached to the experience of people receiving aged care”. This included the periodic publication of a report on the experiences of people receiving aged care services based on interviews<sup>1</sup>.

In response, the department engaged with a consortium including IQVIA, Access Care Network Australia, and HealthConsult to undertake independent surveys on behalf of the department. The resulting Residents' Experience Survey (RES) measures the experiences of older people living in residential aged care throughout Australia and provides vital insights into the quality of the services they receive<sup>2</sup>. The first RES was conducted in 2022 (RES 2022), and the second in 2023 (RES 2023). In addition to this report, the survey data is shared in Residents' Experience Reports for each participating aged care home, as well as informing the Star Ratings system introduced in December 2022. The Residents' Experience sub-category contributes towards 33 per cent of the overall Star Rating. Star Ratings for participating aged care homes are accessible at [www.myagedcare.gov.au](http://www.myagedcare.gov.au).

This report summarises the key findings across two years of RES data and identifies changes in the residents' experience from 2022 to 2023 for the purpose of supporting aged care homes to improve the experiences of their residents. Analysis of the surveys identified:

- The most significant areas where residents request improvements to their aged care experience.
- Differences in the aged care experience amongst diverse groups, residents with differing care needs, and aged care home size.
- Differences in survey responses between the years.



## The survey approach

The Residents' Experience Survey is an opportunity for older people to share feedback on the care they receive at their aged care home.

Each year 20 per cent of all residents nationally participate in the survey. They are all asked the same set of questions.

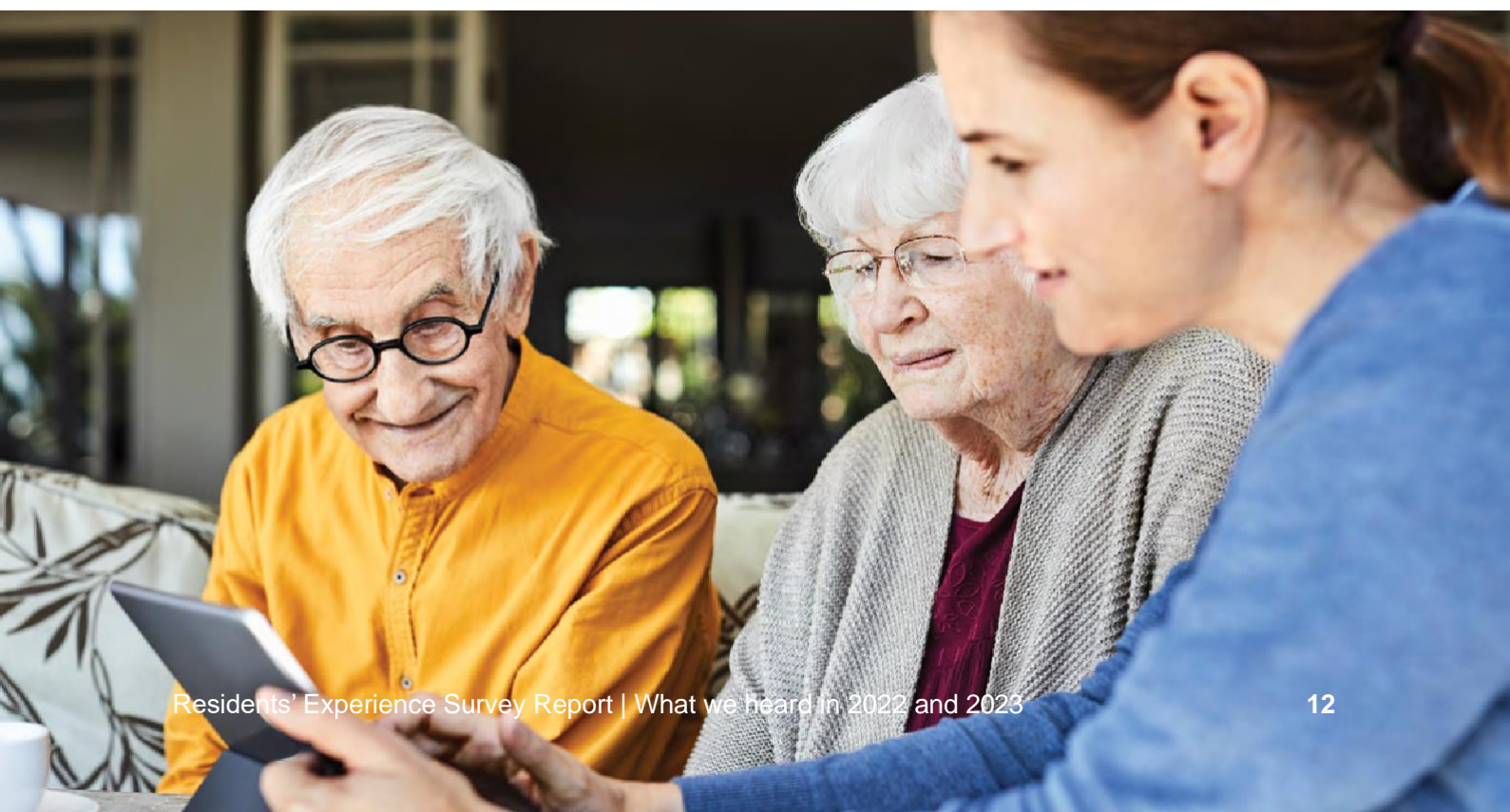
This approach means we gain a representative sample. In 2023, a total of 37,382 surveys were completed by residents of 2,625 participating aged care homes while in 2022, a total of 37,443 surveys were completed by residents of 2,645 participating aged care homes. Refer to Appendix 1 and 2 for more detail.

The survey has 14 questions – 12 answered with a four-point scale and two with free text. All questions and responses for both years of the survey can be found in Appendix 4. Of the 12 questions, the question 'How likely are you to recommend this residential aged care home to someone?' evaluated residents' overall satisfaction. This question was included in the survey for the first time in 2023, replacing the question 'Do you feel at home here?' from the RES 2022. The remaining 11 questions offer a broad perspective on residents' aged care experiences<sup>3</sup>.

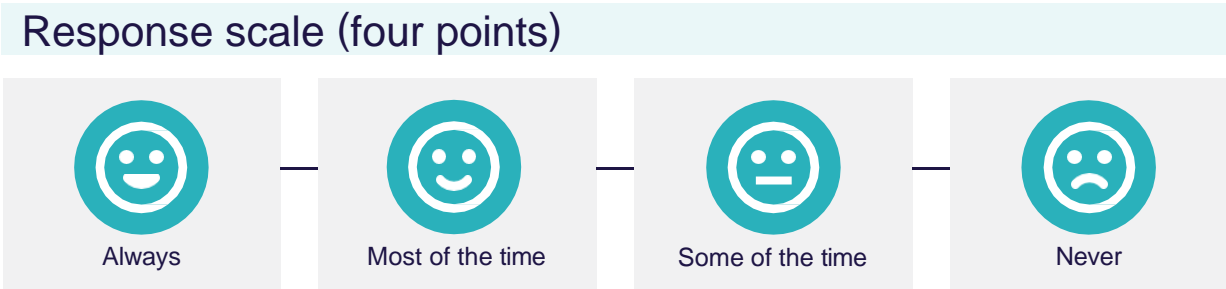
---

**The Residents' Experience Survey had fourteen questions – twelve answered with a four-point scale and two with free text.**

---



For the 12 questions that were answered using a four-point scale, residents were asked to respond with one of the following: 'always', 'most of the time', 'some of the time', and 'never'. 'Always' and 'most of the time' were considered positive responses, and 'some of the time' and 'never' were considered negative responses. Residents were presented with the response options as both words and as visual representations (Figure 1).



**Figure 1: Survey question response scale**

In addition, two open-ended questions were asked: 'What would you say is the best thing about this service?', and 'What is one thing you would suggest as an improvement to this service?'. Responses to these questions were analysed to understand how residents felt about their residential aged care home and how their experience of aged care could be improved.





## How the survey responses were analysed

Survey results were analysed to identify the resident and aged care home characteristics which related most strongly with both positive and negative experiences.

The questions that offered a broad perspective on the residential aged care experience, were categorised into three themes to support analysis (Figure 2):

- The 'care environment' theme encompasses the social, physical, and functional aspects of the aged care experience including physical and mental well-being as well as the safety and comfort of residents.
- The 'organisational aspects of care provision' theme encompasses the service focused aspects of the resident experience, such as staff coverage, staff training, service management and operations.
- The 'autonomy' theme encompasses the extent to which residents continue to live independently while living in a residential aged care home and is strongly linked to residents' sense of dignity<sup>4</sup>.

### How likely are you to recommend this residential aged care home to someone? (Resident satisfaction)



Figure 2: Survey themes and questions

Trends linked to resident and aged care home characteristics were identified across questions and themes. Following this analysis, (Appendix 3) the most significant factors linked to residents' aged care satisfaction and experiences were chosen to be discussed in this report, with a specific focus on the 2023 RES results throughout this report.

For a deeper understanding of the challenges experienced by some aged care residents, analysis of the responses to the question 'What is one thing you would suggest as an improvement at this service?' was performed.

The insights from the analysis of the topics identified have been included into this report to highlight the key areas of improvement requested by residents.

Note, responses in this report are displayed rounded to the nearest whole number. When total positive responses are presented, the total is rounded from the sum of the two non-rounded responses. Therefore, in some instances the total positive response may not equal the sum of the rounded 'always' and rounded 'most of the time' responses. In this report, we describe percentage differences in survey responses in absolute terms.



# The findings

Analysis of the RES findings are presented under the following 6 headings:

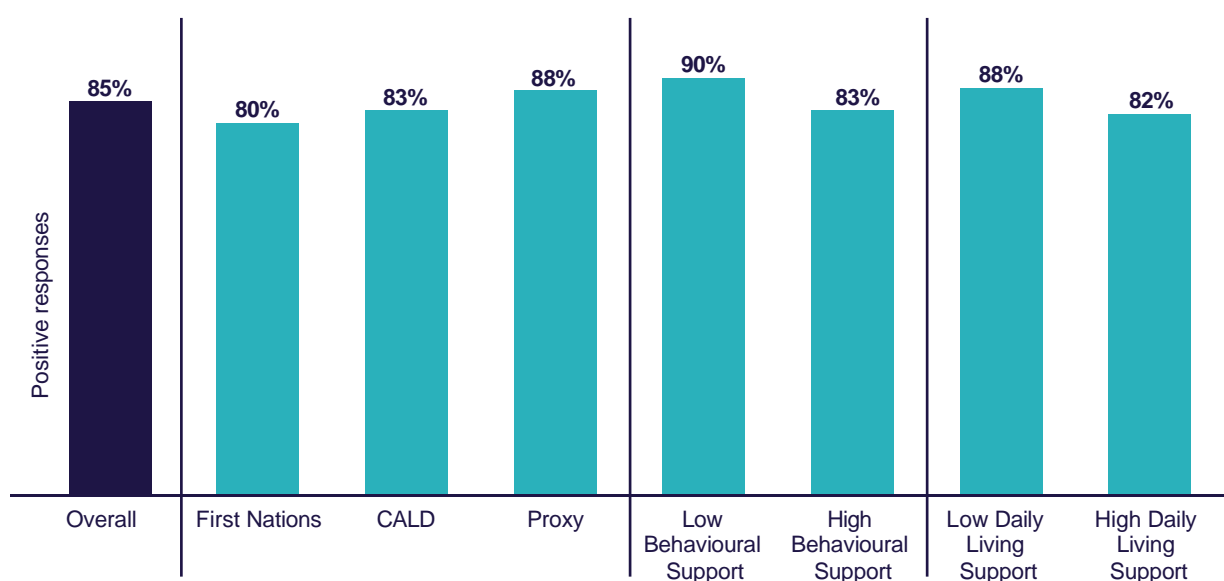
- Resident satisfaction.
- Comparing the 2022 and 2023 survey responses.
- Residents' Experience Survey 2023 overview.
- Food-related experiences and improvements.
- Staffing-related experiences and improvements.
- Experiences of different resident groups across all themes.

An analysis of the findings by theme is presented in Section 3.

## Resident satisfaction

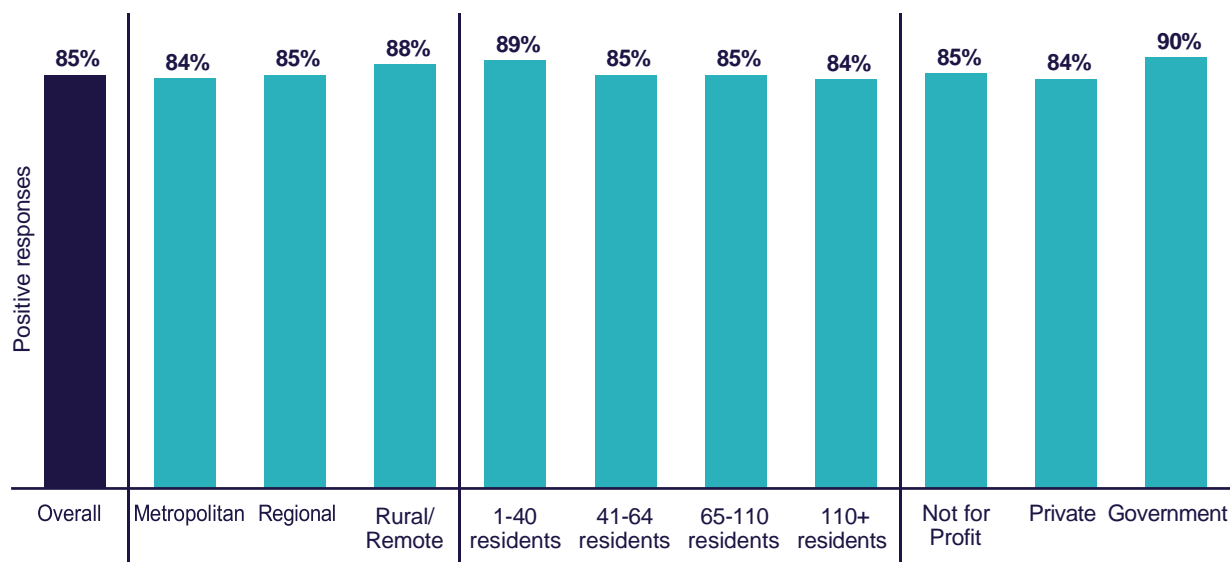
A total of 85 per cent of the surveyed residents were likely to recommend their aged care home to someone, showing a high level of satisfaction among aged care residents.

In RES 2023, this was measured by the question of “How likely are you to recommend this residential aged care home to someone?”. The survey results show residents that required either high levels of behavioural support or support with activities of daily living, both responded less positively to this question (82 per cent and 83 per cent, respectively) (Figure 3). These residents generally responded less positively, on average, to questions across each of the three survey themes.



**Figure 3: Overall satisfaction by resident factors**

In addition, residents that lived in aged care homes that had fewer than forty-one residents, were in a rural/remote location, or were government operated responded more positively to the resident satisfaction question (Figure 4).



**Figure 4: Overall satisfaction by aged care home attributes**

Residents were also asked ‘What would you say is the best thing about this service?’, allowing residents to identify the most positive aspects of their aged care experience. Many residents identified the care they received, staff friendliness and positive relationships that they had with staff and other residents as their favourite aspects of the aged care experience. Residents also liked the freedom and independence that they experienced in their aged care homes.

### What residents said:

Examples of positive resident experiences related to care and relationships:

- *‘There are a lot of good things. I’m comfortable, like my room and the friends I’ve made.’*
- *‘I like everything! It’s the company, the friendship, the care & mostly the peace of mind.’*
- *‘The staff are very helpful and the residents are lovely.’*
- *‘You can communicate freely & openly with every single one of the staff - they are wonderful & it’s a very homely feeling here.’*
- *‘I’m comfortable and feel looked after.’*
- *‘I feel at home here, and if it is anything medical I can call my bell.’*
- *‘The staff are kind and all the time speak to me with respect.’*

Examples of positive resident experiences related to freedom and autonomy:

- *‘Freedom, I can keep my independence and be looked after.’*
- *‘You have freedom to do what you want to do.’*



## Comparing the 2022 and 2023 survey responses

For all questions in the Residents' Experience Survey for 2023, residents were as positive or more positive than the 2022 survey.

For most questions, the increase was 3 per cent or less, which is important given most questions had positive responses of 80 per cent or more in 2022 (Figure 5). An overview of the RES 2022 findings can be found in Appendix 5. The largest improvements were observed for the two questions related to autonomy, 'Do you have a say in your daily activities?', which increased by 6 per cent, and 'Are you encouraged to do as much for yourself as possible?', which increased by 4 per cent. These increases in residents' perceptions of self-determination and autonomy represent a consistent positive change in the resident experience.

The question 'Do you like the food here?' remained the lowest scoring question in the RES 2023, with 70 per cent positive responses (as in RES 2022). For the next two lowest scoring questions in the RES 2022, 'Do staff explain things to you?' and 'Is this place well run?', both related to the organisational aspects of care provision, the questions increased by at least 2 per cent in the RES 2023. Within the same theme, an increase of 3 per cent in positive responses was observed for 'Do staff follow up when you raise things?' highlighting an overall increase in resident perception of staff responsiveness. However, despite other areas in organisational aspects of care provision receiving more favourable responses in the most recent survey, improvements in food remain a high priority for residents and measurable improvements have not yet been observed.



## Survey questions

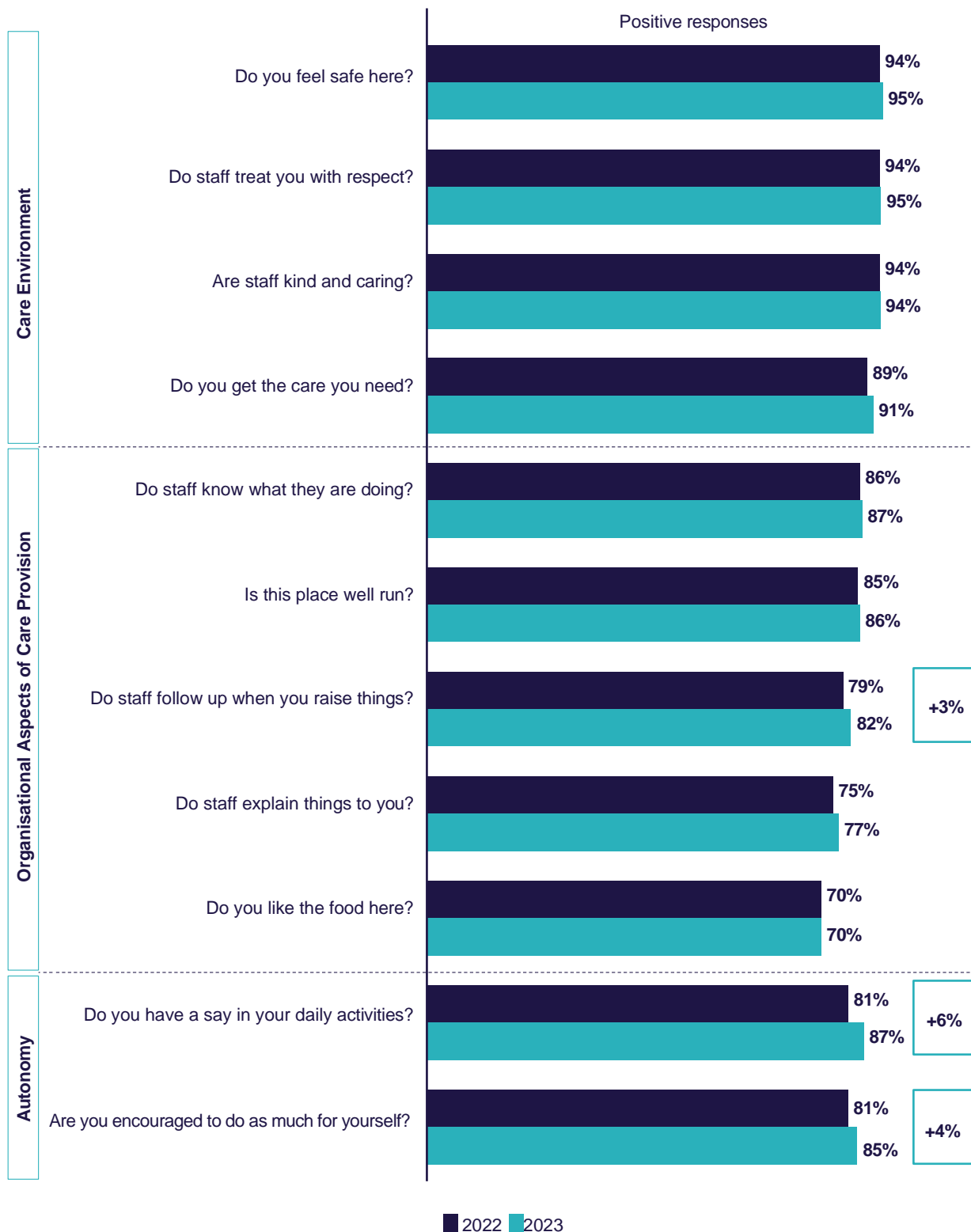


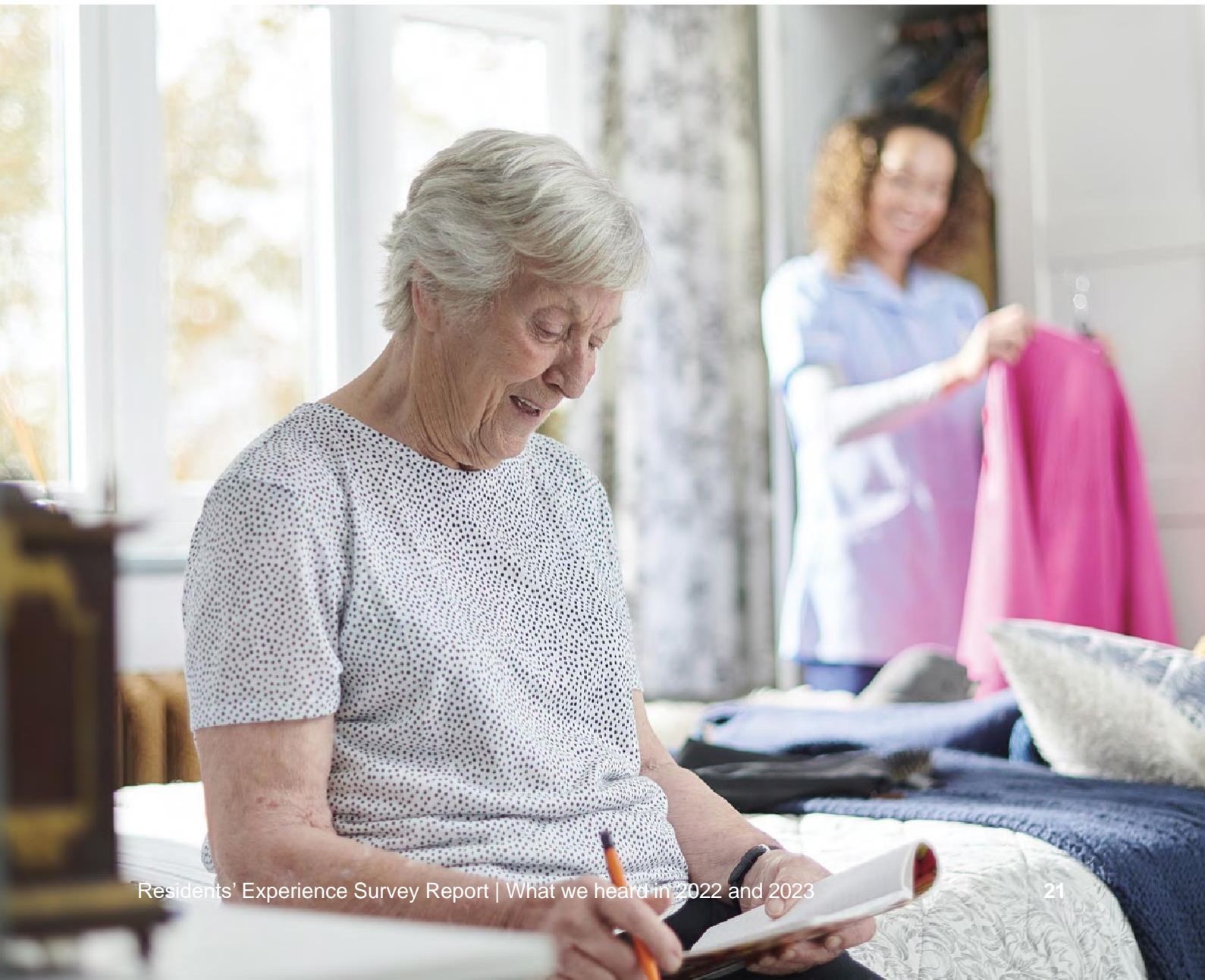
Figure 5: Overall positive responses to survey questions by theme, 2022 vs 2023



## Residents' Experience Survey 2023 overview

Residents were most positive when reporting on their experience of the care environment, with over 90 per cent of residents responding positively to questions related to safety, respect, kind and caring staff and receiving care.

This reflects the sector's commitment to meet the most fundamental needs of residents. The largest opportunities for improving the experience of residents in aged care relate to the organisational aspects of care provision, with this theme receiving the lowest percentage of 'always' responses (Figure 6). Residents expressed their lowest levels of satisfaction with respect to food. Similarly, staff communication and responsiveness also received a lower number of positive responses and represent opportunities for improvement. Scores for all questions in the survey can be found in Appendix 4.



## Survey questions

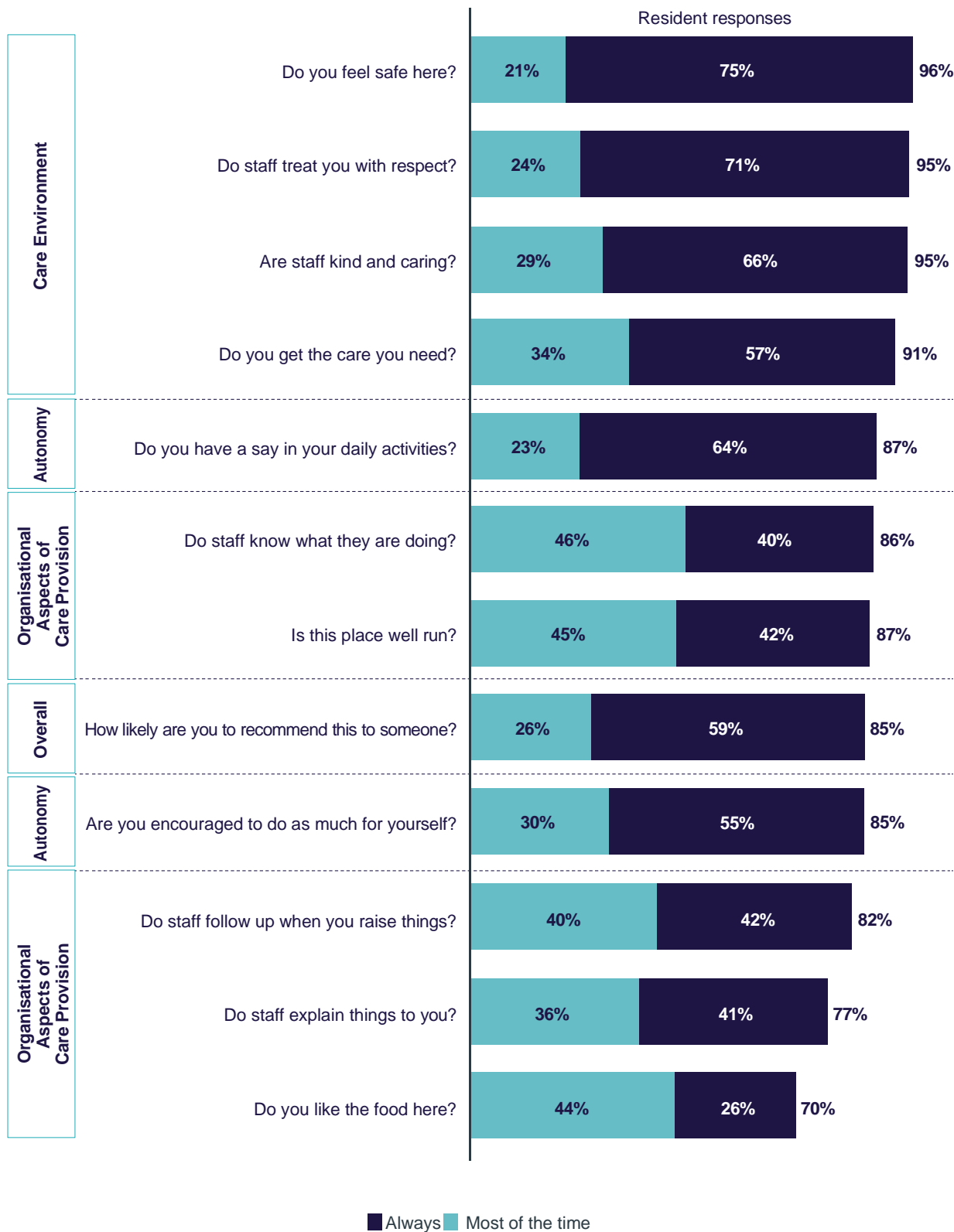


Figure 6: Positive responses to the survey questions in 2023

Responses to the 2023 survey questions varied by resident and service characteristics. Analysis was undertaken and identified three factors most strongly linked to differences in residents' experiences across the themes. They were:

- Daily living support requirements of residents.
- Behavioural support requirements of residents.
- Number of residents in their aged care homes.

Responses from residents in special needs groups were analysed, and a general trend of fewer positive responses was observed for CALD residents across all themes. Differences in the responses of First Nations Australians were identified within specific themes, and these are outlined in subsequent sub-sections of this report. Resident answers to the open response question 'What would you suggest as an improvement to this service?' identified two major areas of improvement for residential aged care homes to consider. These were improvements in food and staffing. These two areas are explored in more detail in the following sub-sections of the report.

## **Food-related experiences and improvements**

Food was identified by residents in both 2022 and 2023 as the least positive aspect of the aged care experience, with 30 per cent responding that they 'never' or 'some of the time' like the food. This aspect of aged care was one of four areas identified for immediate action by the Royal Commission<sup>1</sup>.

In the RES 2023, the following resident groups responded the least positively to liking the food provided in their aged care home:

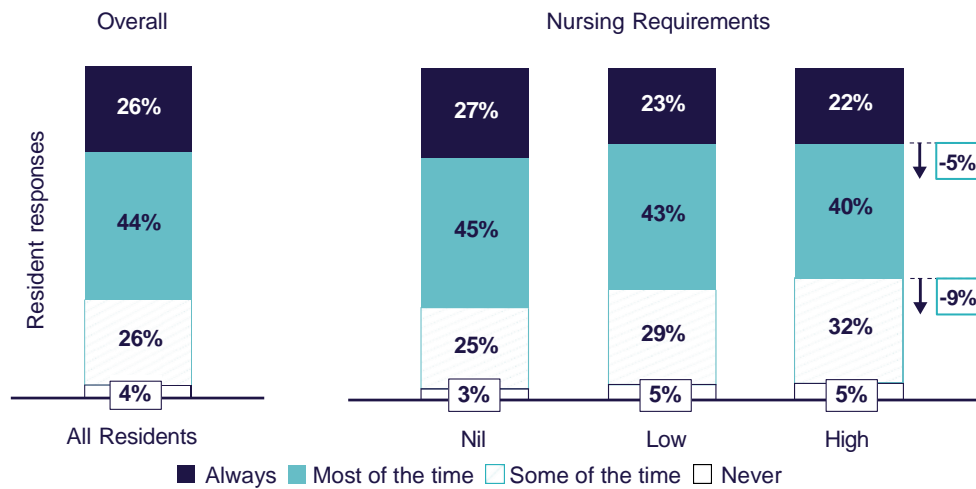
- Residents with high nursing requirements (62 per cent positive).
- Residents in the largest aged care homes (65 per cent positive).

The following groups responded more positively to liking the food provided in their aged care home:

- Residents in rural/remote aged care homes (75 per cent positive).
- Residents with significant cognitive impairment (75 per cent positive).
- Proxies who completed the survey on behalf of a resident (73 per cent positive).

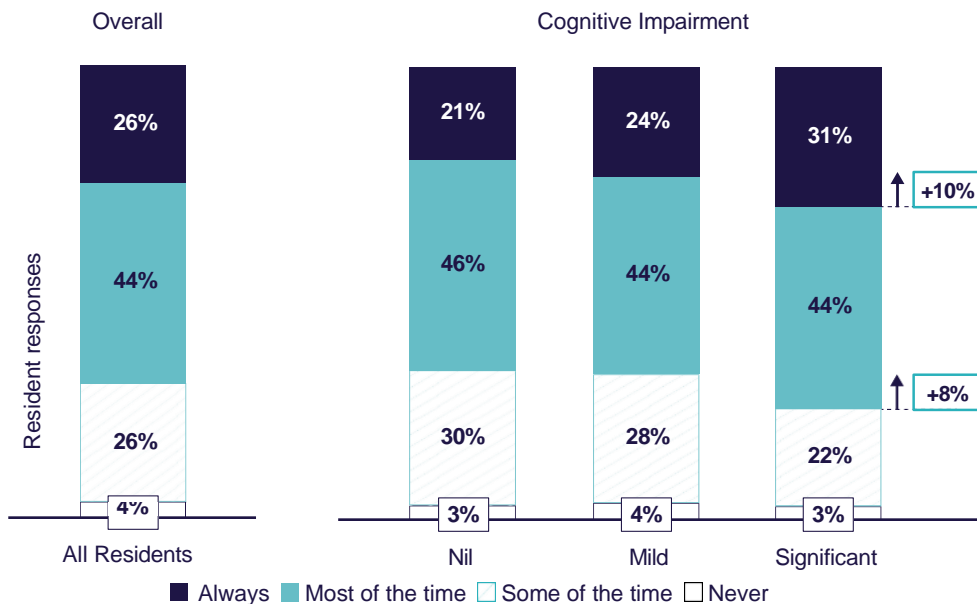
Residents with high nursing requirements reported the lowest satisfaction with food. Residents were assigned to three categories based on their nursing requirements (Appendix 1). Food satisfaction was lower by 9 per cent for residents who required nursing support, compared to residents that did not (Figure 7). The extent to which this trend reflects the need for modified diets amongst residents with greater burdens of illness is unclear, but highlights opportunities for aged care homes to explore options to improve the food experience for these residents.





**Figure 7: Food satisfaction, by residents' nursing requirements**

On average, residents with cognitive impairment did not respond differently to residents without cognitive impairment. However, as in the RES 2022, positive responses to the food question were higher by 8 per cent for residents with significant cognitive impairment compared to residents without cognitive impairment (Figure 8). Residents with significant cognitive impairment also responded 'always' 10 per cent more than residents without cognitive impairment.



**Figure 8: Food satisfaction, by residents' cognitive impairment classification**

For the residents that recommended improvements to their aged care experience through the open response questions, food was the most frequently raised topic. Requests for food-related improvements were greater for residents in larger homes than smaller homes (Figure 9A). There was a progressive increase in resident requests for improvements to food across home size, from 21 per cent in small homes to 27 per cent in large homes. This was similar to the 11 per cent difference in positive responses to the food question by resident home size and emphasises the lower satisfaction with food in larger homes.

Of the food related improvement areas identified by residents (Figure 9B), 'more variety and improved portion size' and 'better quality' accounted for most requests (26 per cent and 25 per cent of responses, respectively).

### **What residents said:**

Examples of resident requests for improvement that reflected a need for better quality food included:

- *'Need better quality meat'*.
- *'The meals need to have more fresh vegetables and fruit, not frozen, less carbs and stodgy stuff'*.

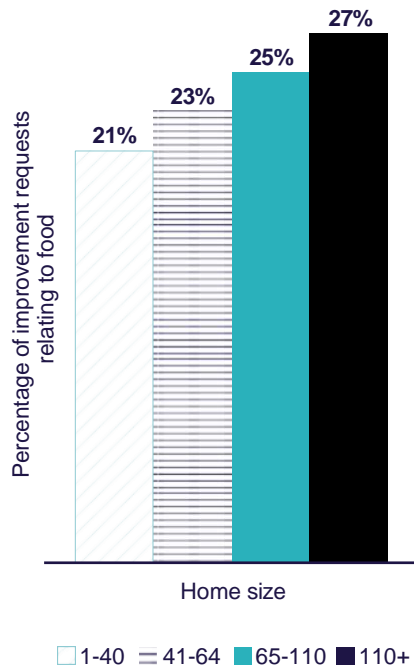
Other responses highlighted a need for more appropriate and tailored food options:

- *'I'm vegetarian and get meat'*.
- *'Food should be more multicultural'*.
- *'There isn't always enough food'*.
- *'The menu should change more often'*.

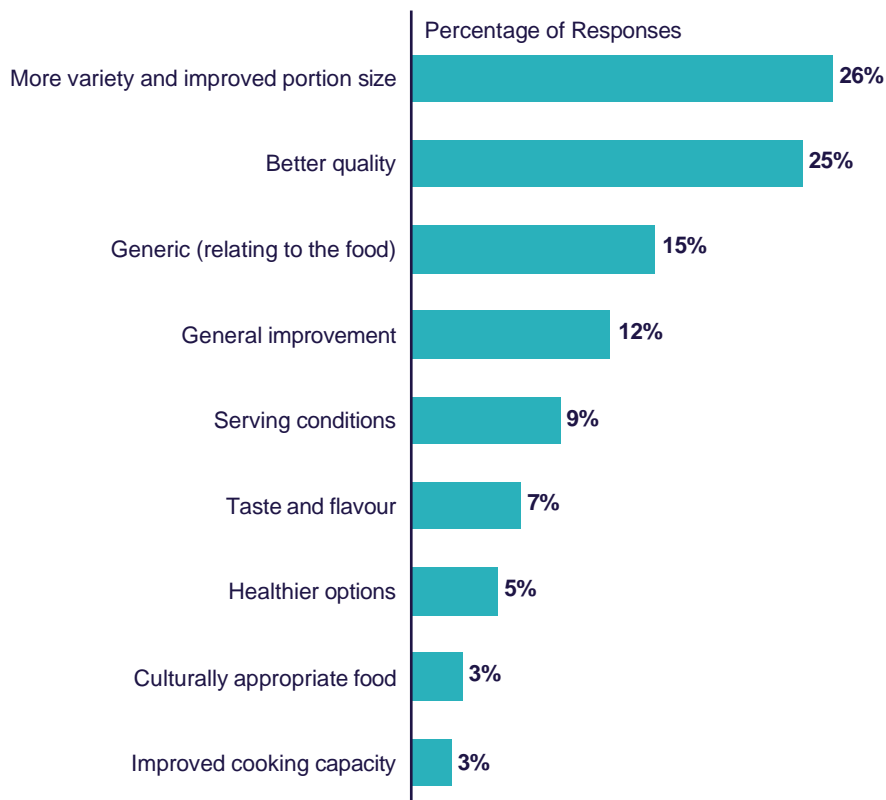
In addition to concerns related to the quality and variety of the food, aspects of food service, such as serving conditions, were noted by residents as areas for improvement:

- *'Food is never hot if it's served in my room'*.
- *'Service at mealtimes is poor and staff need more training on how to serve food'*.
- *'Food service is quite inconsistent, sometimes I get offered morning tea and sometimes they forget me'*.

This highlights the need to address shortcomings in both the quality and variety of the food, as well as the quantity and service of food.



**Figure 9A: Food-related improvements as a percentage of all improvement requests, by home size**



**Figure 9B: Responses to the question 'What would you suggest as an improvement to this service?' as a percentage of all food-related improvement requests, by topic**

## Staffing-related experiences and improvements

After food, the staffing related questions were among the questions that residents were least happy with. Staffing also followed food as the second-highest improvement area.

Residents with high daily living support needs (Appendix 1) asked for more staff improvements than residents requiring no support or low support, with a difference of 9 per cent. In addition to residents with high daily living support needs, residents in large homes asked for more staff-related improvements. There was a difference of 7 per cent between residents of large homes and smaller homes (Figure 10A), and an increase in resident requests for improvements to staffing across home sizes.

For all residents surveyed, requests for more staff accounted for 54 per cent of all staffing-related improvement requests (Figure 10B), the same per cent observed in the RES 2022. Improvements to staff training, less demands on staff time, better care and better communication from staff were the next-most requested improvements, and many were also high priorities for residents in the RES 2022.

### What residents said:

Responses from residents included:

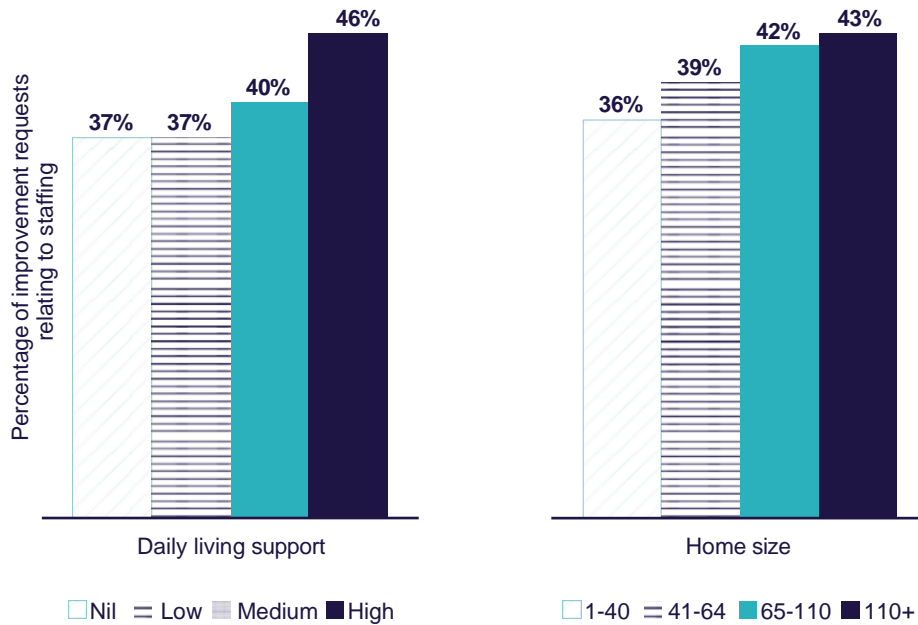
- *'I feel sorry for the staff because they are so short staffed and busy'*
- *'There are staff shortages, less staff results in less care'*
- *'There needs to be more staff, it takes too long for them to respond when the bell is rung'*

Communication challenges raised by residents included both language barriers, such as:

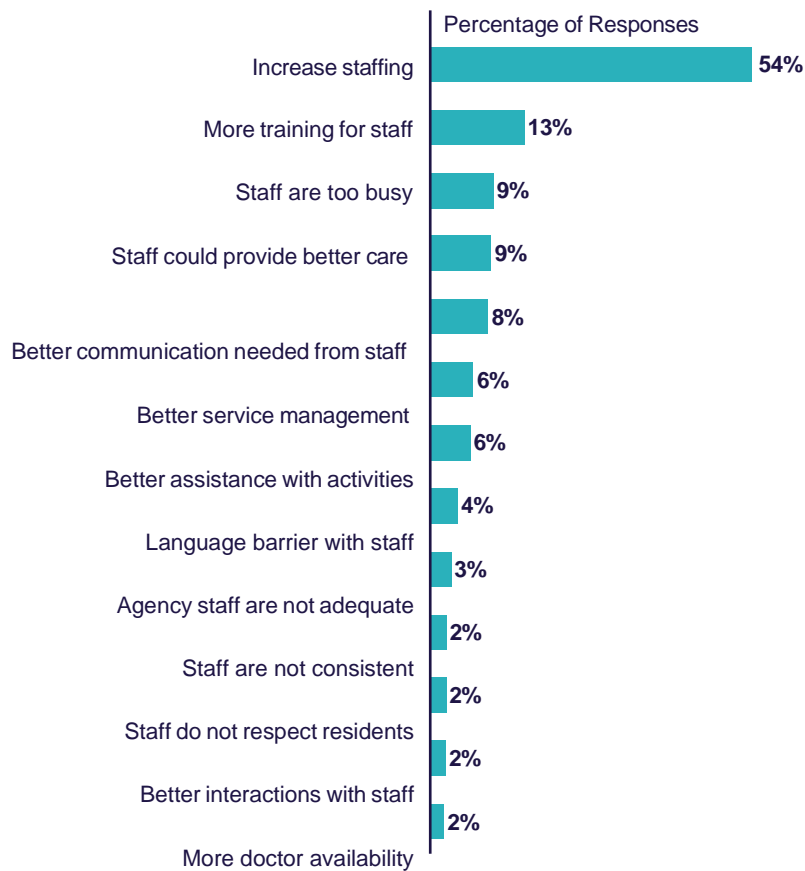
- *'They get in a lot of new Australians who don't have great English so it can be hard to communicate with them'*
- *'Staff speak and assume I've heard them, they assume I'm cognitively impaired but it's just that I'm deaf'*

Residents also highlighted negative experiences with agency staff, including:

- *'The weekend staffing is mostly casuals and agency staff who don't really know the residents or their individualised routines'*
- *'There are too many agency staff who don't read the notes on resident instructions and wishes'*



**Figure 10A: Staff-related improvements as a percentage of all improvement requests, by daily living support requirements and home size**



**Figure 10B: Responses to the question ‘What would you suggest as an improvement to this service?’ as a percentage of all staffing-related improvement requests, by topic**



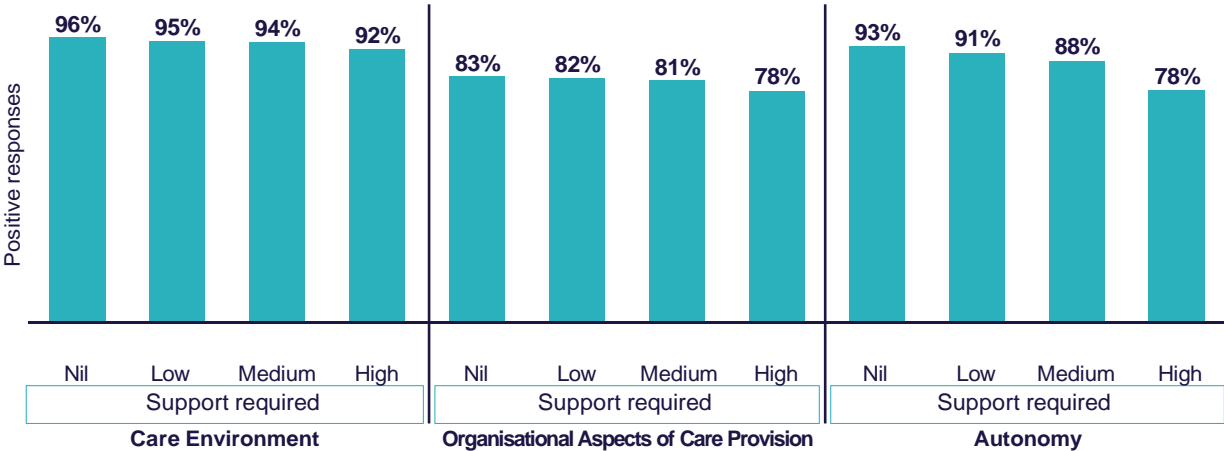
# Experiences of different resident groups across all themes

## Residents with high daily living support requirements

Activities of daily living were measured using the AN-ACC (Australian National Aged Care Classification) assessment tool Resource Utilisation Groups – Activities of Daily Living (RUG-ADL) (Appendix 1). Using the measures from this assessment tool, residents were assigned to one of four categories based on the amount of support required.

Across all themes, the average number of positive responses decreased in relation to the increasing support requirements of residents (Figure 11). The largest difference in positive responses between residents with ‘nil’ and ‘high’ daily living support requirements was for the autonomy theme (15 per cent). This highlights that residents with limited abilities to complete daily tasks reported having less say in their daily activities and less encouragement to do things for themselves. The observation that positive responses to the organisational aspects of care provision are also lower (5 per cent) for these residents may indicate instances where staffing levels are not sufficient to ensure all residents the highest level of independence.

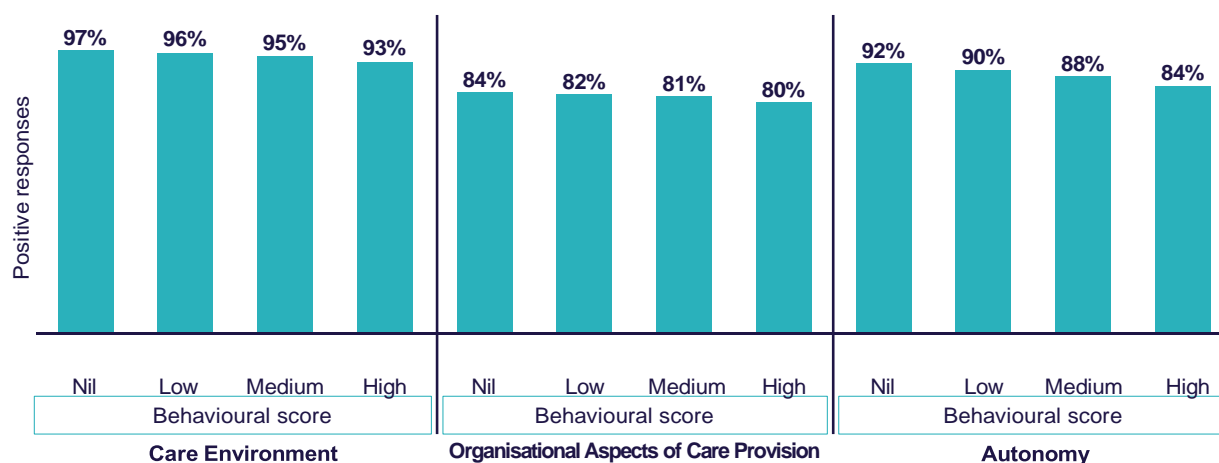
For the care environment theme, the difference in positive responses between residents requiring ‘nil’ and ‘high’ daily living support were lower than other themes. Residents requiring high support with daily living activities also were more positive in their responses to the questions in this theme (92 per cent compared to 78 per cent). This highlights that even among residents who require high levels of support for daily activities, most report satisfaction with the care they receive.



**Figure 11: Survey responses (average across themes), by residents’ daily living support requirements**

## Residents with high behavioural support requirements

The Behavioural Resource Utilisation Assessment (BRUA), a component of the AN-ACC assessment, measures the extent of behavioural monitoring required for residents (Appendix 1). Residents who require monitoring and supervision due to behavioural challenges reported fewer positive experiences across all themes (Figure 12). As with residents who required support for daily living activities, the largest difference in responses was for the autonomy theme. This likely reflects the impact of staff supervision on self-determination and autonomy and highlights a need for aged care homes to develop approaches to promote a sense of autonomy amongst these residents. For the other themes, a trend in declining positive responses with increasing behavioural support requirements was also observed. However, the differences in positive responses were lower at 5 per cent for the care environment and 3 per cent for organisational aspects of care provision between residents with high and nil behavioural support requirements.



**Figure 12: Survey responses (average across themes), by residents' behavioural support requirements**

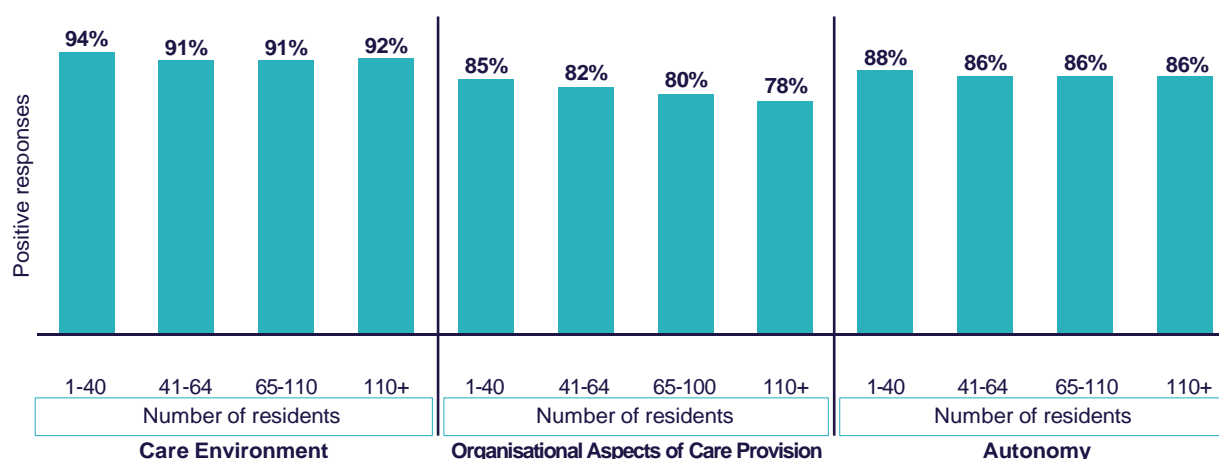


## Service size

As observed in the 2022 survey, a consistent factor linked to responses across questions in the 2023 survey was the number of residents in an aged care home.

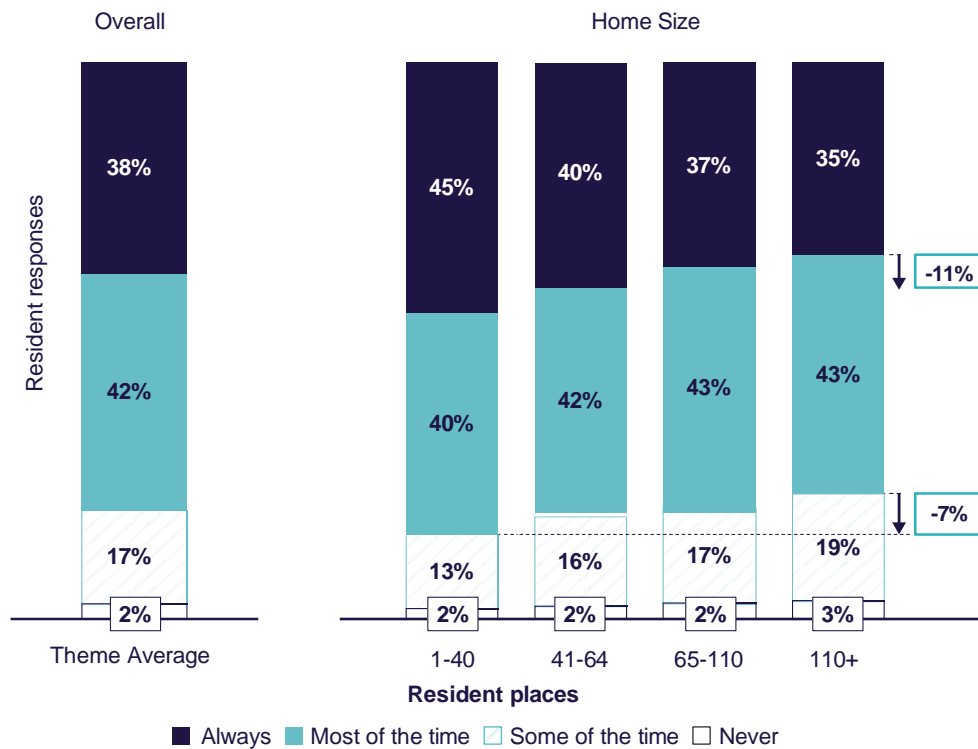
In general, residents in smaller aged care homes (forty or fewer residents) responded more positively than residents in aged care homes with more than forty residents in both 2022 and 2023 (Figure 13). When controlling for the regionality of the service (metropolitan, regional, rural, remote), and organisation type (government owned, not-for-profit, privately owned) the number of residents in an aged care home had the biggest impact on differences in responses.

In 2023, positive responses to the care environment theme were higher by 2 per cent for residents of the smallest homes compared to residents in the largest homes. This is comparable to the 3 per cent difference observed in the RES 2022. For the autonomy theme, the difference in positive responses between residents of the smallest and largest homes was 2 per cent.



**Figure 13: Survey responses (average across themes), by service size**

The greatest difference in positive responses by service size in RES 2023 was observed for the organisational aspects of care provision theme encompassing food, staff attentiveness and staff communication (Figure 14). Overall, there was a difference of 7 per cent in positive responses between residents in smaller sized homes (1-40 residents) and in larger homes (110 residents or more). This trend was similar to the RES 2022, with a difference in positive responses between small and large aged care homes of 6 per cent. In both surveys, a difference in ‘always’ responses of 11 per cent was observed.



**Figure 14: Responses to organisational aspects of care provision theme questions, by service size**

The decrease in resident satisfaction with organisational aspects of care is a similar pattern to the decrease in satisfaction in residents who require higher levels of support in their aged care home. It is likely that this decrease reflects fewer staff per resident, or less staff time available for residents with greater care needs in larger homes compared to smaller homes. This is supported by residents in larger homes making more requests for staffing improvements than residents in smaller homes.





# Findings by theme



# Care Environment

The safety, well-being and comfort of residents



Questions with the most positive responses in this theme:

Do you feel safe here?

**96%**

Do staff treat you with respect?

**95%**

Are staff kind and caring?

**95%**



Questions with the least positive responses in this theme:

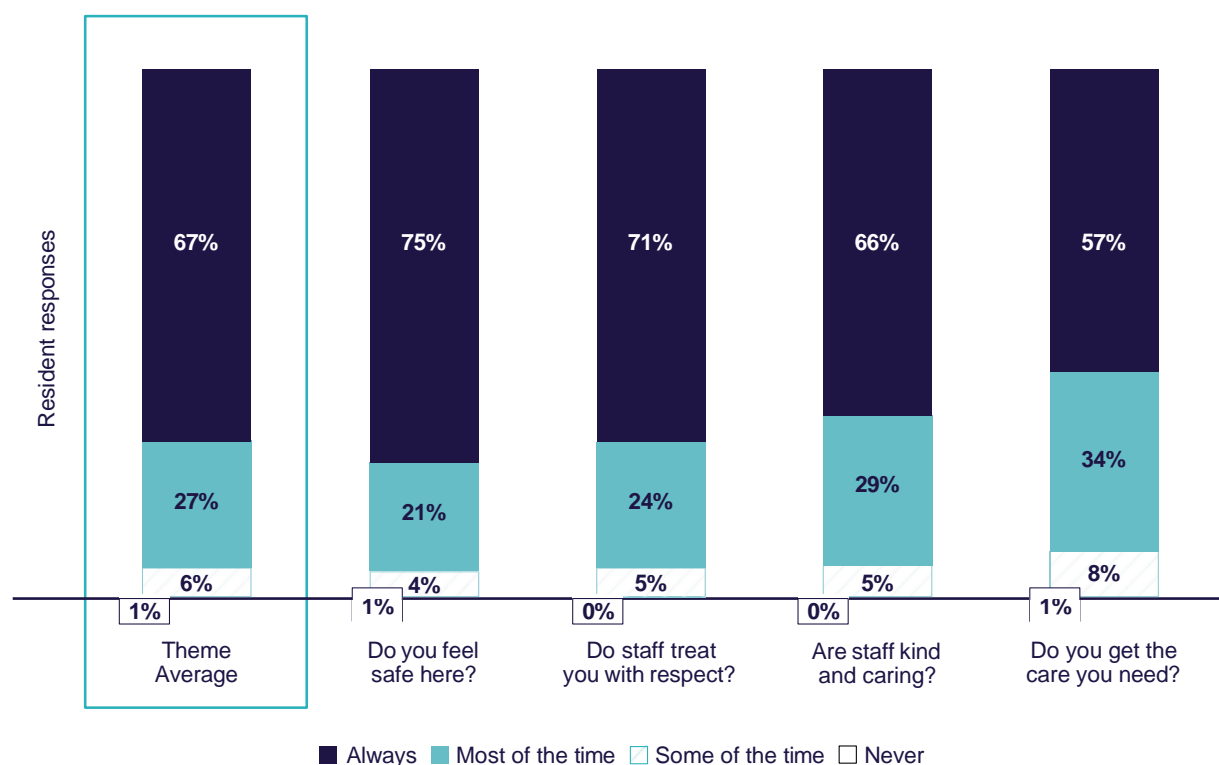
Do you get the care you need?

**91%**

- RES 2023 responses were more positive, or the same, as in the 2022 survey.
- Increased staffing was the most common staff-related improvement requested by residents.
- Residents requiring high levels of behavioural support or daily living support were less satisfied with their care environment.
- CALD residents and First Nations Australians were less satisfied with their care environment.

## Residents' experiences

The care environment theme encompasses questions related to the safety, respect, care and kindness experienced by residents in aged care homes. As highlighted by the Royal Commission's Final Report, high quality care is the foundational duty for aged care providers<sup>1</sup>. This includes both personal care and access to clinical care, as well as providing a safe and caring environment that is respectful and responsive to residents' needs and preferences.



**Figure 15: Resident responses to questions in the care environment theme**

Like the RES 2022, the questions in this theme received the most positive responses, ranging from 95 per cent to 94 per cent. This shows that residents are happy with these fundamental elements of care (Figure 15).

In addition to the improvements related to food and staffing covered earlier in the report, healthcare (9 per cent of responses) and quality of care (8 per cent of responses) were two of the top four improvement areas related to resident needs.

## What residents said:

For healthcare, resident responses highlighted gaps in access to primary care:

- *'We should be able to see a doctor when we need them, not three weeks later'*.
- *'The medications need to be given on time'*.
- *'They take too long to give you the medication and not always to the doctor's advice'*.

As with the RES 2022, access to allied health professionals remains a desired area of improvement:

- *'More physiotherapy sessions'*.
- *'Access to dental check-ups'*.

Additionally, some residents linked related improvements to staffing:

- *'Staff shortages mean you must wait for support... up to 30 mins sometimes'*.
- *'They need more staff as it takes too long for staff to respond to the call button'*.
- *'The weekend staffing is mostly casuals and agency staff... there is a noticeable decline in services on the weekend'*.

## Key observations

Across all of the themes, daily living support, behavioural support, and service size were found to have an impact on residents' experiences in their aged care homes. In addition to these, CALD residents and First Nations Australians were found to have less positive experiences related to their care environment in aged care homes. Residents with higher levels of cognitive impairment also felt less safe in their aged care homes.

Of these resident groups, First Nations Australians and CALD residents also responded less positively to questions in this theme in the RES 2022. Residents with higher complex healthcare needs responded less positively to all questions in this theme in the RES 2022. In the RES 2023, this trend is only observed for residents requiring a high level of behavioural support or support with activities of daily living. It is important to note that the measures of these three resident characteristics have changed, and this may influence the observed relationships between resident characteristics and survey responses (refer to Appendix 1 for further detail).

In addition, residents with cognitive impairment responded less positively by 4 per cent compared to residents without cognitive impairment for the question 'Do you feel safe here?'. This question had the most positive response of the survey, so it is significant that residents with cognitive impairment feel less safe than residents without cognitive impairment. This highlights an opportunity for aged care homes to improve the sense of safety for residents with cognitive impairment.



## CALD residents

CALD residents were generally less happy with the care environment. Across all questions in this theme, they responded less positively (by 1 per cent or 2 per cent) than residents from non-CALD backgrounds. This is a smaller difference in positive response than was observed in the previous survey (3 per cent). Compared to the RES 2022, the difference in 'always' responses to all questions decreased from 5 per cent lower to 3 per cent lower for CALD residents. While there is a consistent gap in the care environment satisfaction of CALD residents, the RES 2023 survey indicates a smaller gap than that observed in the RES 2022. Therefore, while aged care services should continue to improve the care experience for CALD residents, these findings may be an indicator of recent positive changes across the sector.

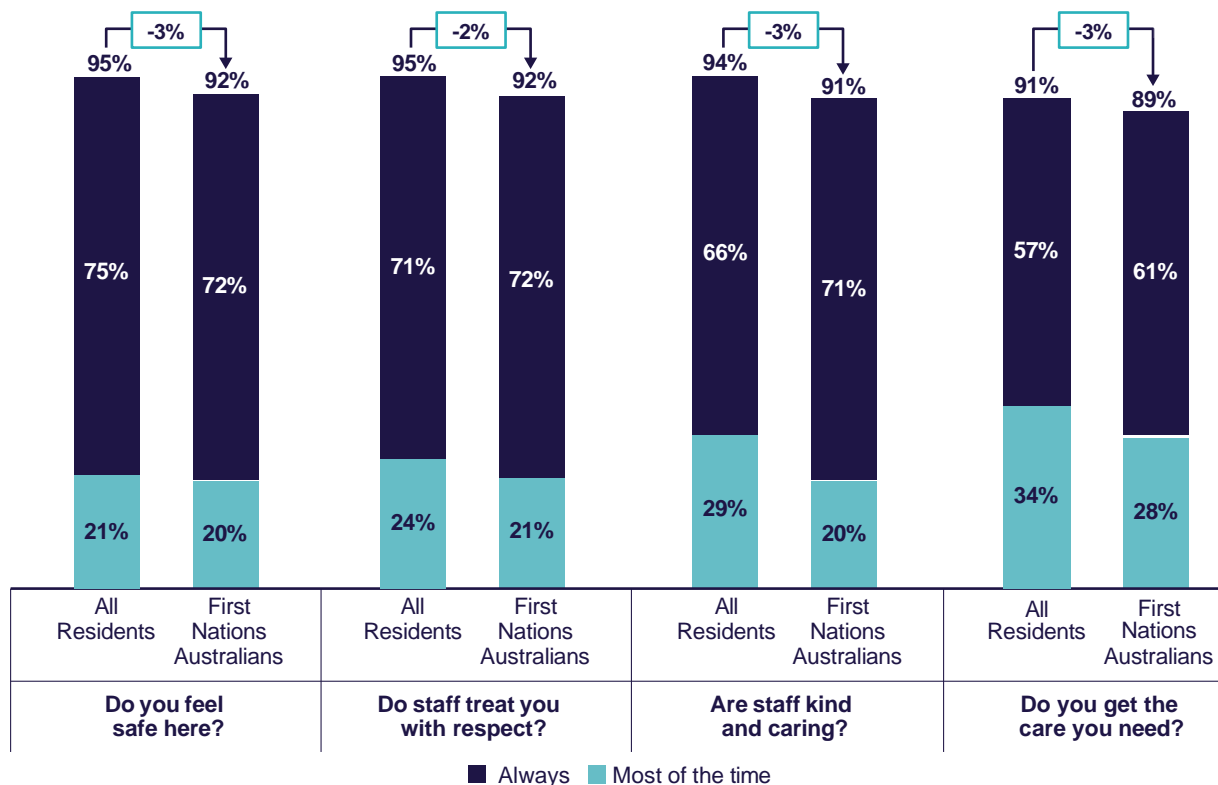
## First Nations Australians

For each question in the care environment theme, First Nations Australians consistently reported lower positive responses (Figure 16). However, for these same questions, First Nations Australians responded with 'always' more frequently than the total resident population, ranging from a 6 per cent difference for 'Are staff kind and caring?' to a 1 per cent difference for 'Do staff treat you with respect?'. In the RES 2023, the gap in satisfaction for First Nations Australians was similar to the 3 per cent difference observed in the RES 2022, though positive responses increased for both First Nations Australians and all residents for all questions.

---

**Despite the improvement in positive responses from First Nations Australians it remains important for aged care services to engage with First Nations Australians to implement the Royal Commission's recommendation that cultural safety is embedded into the aged care experience<sup>1</sup>.**

---



**Figure 16: Positive responses to questions in the care environment theme, by First Nations Australians and all residents**

## Cognitive impairment

Residents with cognitive impairment only responded less positively to the question ‘Do you feel safe here?’. Five components of the AN-ACC assessment tool Australian Function Measurement (AFM) were considered as indicators of cognitive impairment: social interaction, problem solving, memory, comprehension, and expression.

Less positive responses to the question ‘Do you feel safe here?’ were observed to align with increased cognitive impairment. The largest difference in positive responses for this question, 4 per cent, was observed between residents with significant and no cognitive impairment. Moreover, residents with significant cognitive impairment responded ‘always’ 12 per cent less than residents without cognitive impairment. This highlights an opportunity to address the impact of cognitive impairment on the comfort and safety of residents in aged care.



## Organisational aspects of care provision

The service-focused aspects of the residential experience



Questions with the most positive responses in this theme:

Is this place well run?

**87%**

Do staff know what they are doing?

**86%**

Do staff follow up when you raise things?

**82%**



Questions with the least positive responses in this theme:

Do you like the food here?

**70%**

Do staff explain things to you?

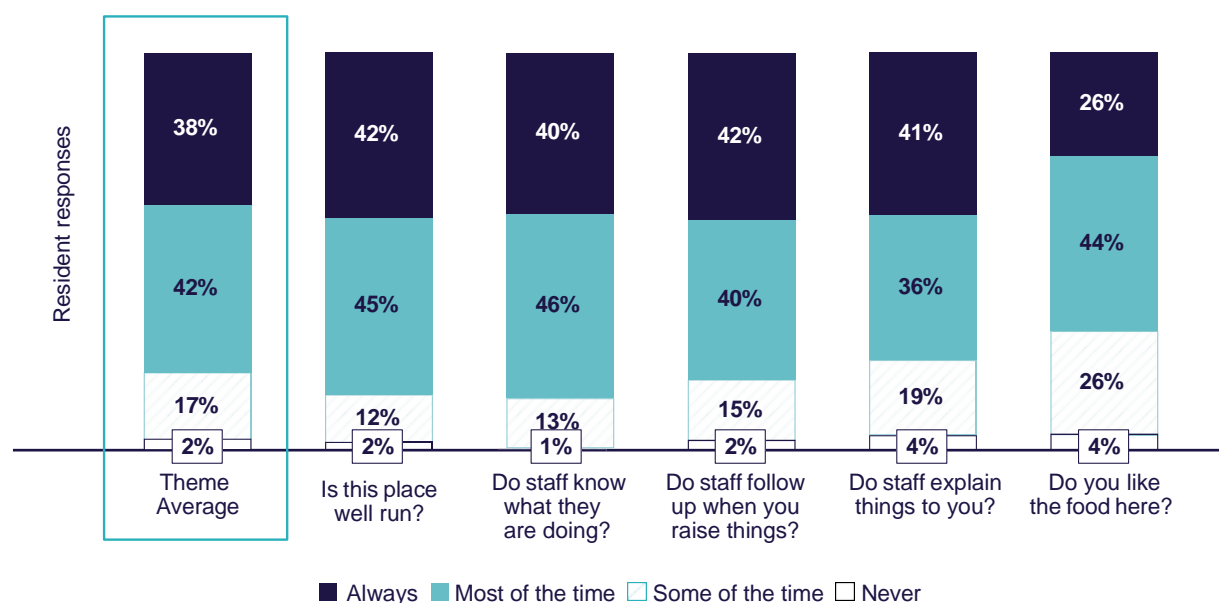
**77%**

- Responses were more positive, or the same, as in the RES 2022.
- Resident satisfaction was lowest for this theme, compared to RES 2022, with food and staffing the largest improvement opportunities.
- Residents asked for more variety and better quality of food in their aged care homes.
- Residents with higher nursing requirements were much less satisfied with food (9 per cent lower), however residents with higher scores for cognitive impairment were more satisfied with food (8 per cent higher).
- Residents asked for more staff in their aged care homes.
- Residents requiring high levels of daily living support or behavioural support were less satisfied with the organisation aspects of care provision.
- CALD residents and First Nations Australians were less satisfied with their organisational aspects of care provision.

## Residents' experiences

The organisational aspects of the care provision theme contains questions that relate to food, the general management of residential aged care homes, and staff responsiveness, communication, and knowledge<sup>5</sup>.

These factors contribute to the delivery of person-centric care and are important aspects of the resident experience. Responses to the questions in this theme were the lowest out of the three themes (80 per cent), and three questions received the lowest positive responses (Figure 17). These questions related to food, explanations by staff and staff following up when matters are raised and received the least positive responses in the RES 2023. This has been covered in-depth in earlier sub-sections of the report. While increases in positive responses were seen for the questions related to staff explanations (2 per cent) and staff follow-up (3 per cent) compared with the RES 2022, no change was observed for the lowest-scoring question on food. Therefore, while these three areas represent the greatest opportunities to improve the experience of residents in aged care homes, food remains the primary area of desired improvement for residents.



**Figure 17: Resident responses to questions in the organisational aspects of care provision theme**



## Key observations

Across all of the themes, daily living support, behavioural support, and service size were found to have an impact on residents' experiences in their aged care homes. In addition to these, residents with nursing requirements, CALD residents, and First Nations Australians were found to have less positive experiences related to organisational aspects of care provision in aged care homes.

Of these resident groups, the largest differences in positive responses were observed between residents with different support requirements for daily living and nursing.

### Nursing requirements

Residents with high requirements responded less positively on average to questions in this theme. A 5 per cent difference in average positive responses was observed between residents with high nursing support requirements and those without the need for nursing support (76 per cent compared to 81 per cent). In addition to less positive responses to the question on food, residents with high requirements responded less positively to the questions 'Do staff know what they are doing here?' and 'Is this place well run?' (6 and 5 per cent, respectively) less than those without nursing requirements.

### CALD and First Nations Australian residents

In response to the organisational aspect of care provision questions, residents from CALD backgrounds responded less positively, by 2 per cent overall, than non-CALD residents (79 per cent vs. 81 per cent). In comparison to the RES 2022, both CALD and non-CALD residents had more positive responses in the RES 2023. CALD resident positive responses increased 1 per cent, and non-CALD resident positive responses increased 2 per cent.

Only two questions had lower responses by First Nations Australians. These questions were 'Is this place well run?' and 'Do staff explain things to you?'. In both cases First Nations Australians responded less positively by 4 per cent. In the RES 2022, there was no difference in response for the question 'Do staff explain things to you?', and a 2 per cent difference for the question 'Is this place well run?'. In the RES 2023, positive responses by First Nations Australians decreased compared to the RES 2022, while the positive responses from all residents increased.



# Autonomy

The extent to which residents live independently



Questions with the most positive responses in this theme:

Do you have a say in your daily activities?

**87%**

Are you encouraged to do as much as possible for yourself?

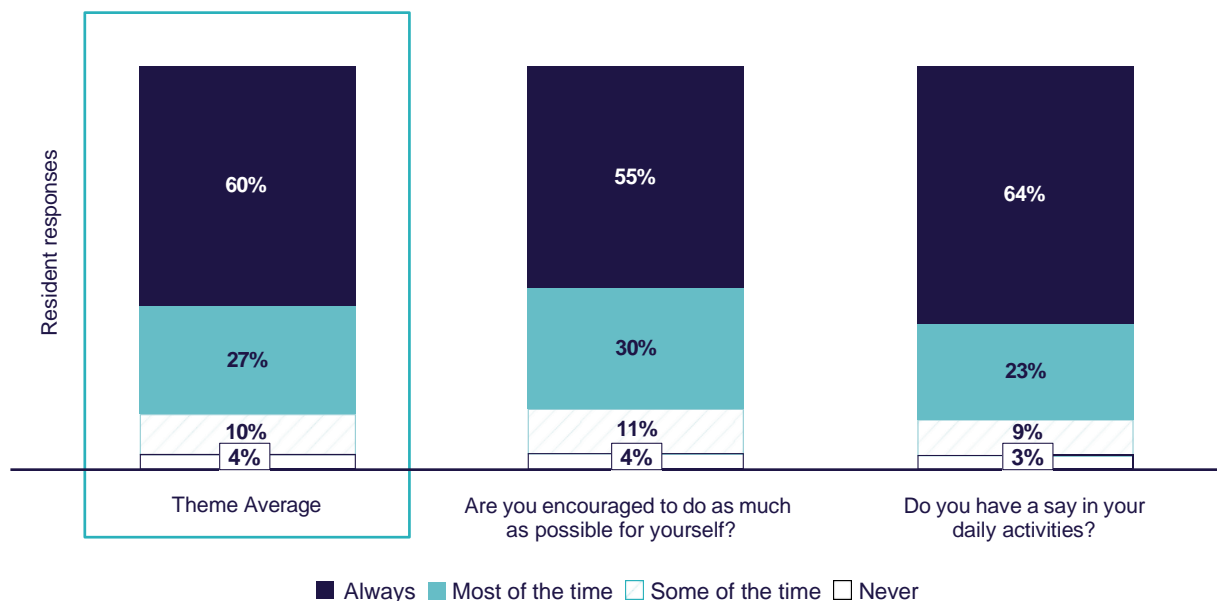
**85%**

- Both questions had the most improved responses compared to the RES 2022.
- Residents asked for more daily activities and improved access to healthcare.
- Proxies (representatives nominated to answer the survey on behalf of residents) were the least satisfied with autonomy.
- Residents requiring high levels of daily living support or behavioural support were less satisfied with their autonomy.
- While CALD residents remained less satisfied with their autonomy, the gap in positive responses has reduced in the most recent survey.

## Residents' experiences

The autonomy theme has two questions related to the independence and autonomy of residents and reflects the recommendation from the Royal Commission that autonomy and self-determination should be promoted within aged care services<sup>1</sup>.

Autonomy has also been linked to the quality of life reported by residents in aged care. Individual decision-making and personalised care are important elements of quality person-centred aged care<sup>6</sup>. Responses to the autonomy questions were the most improved compared to the RES 2022, with increases in both 'always' (at least 8 per cent) and positive responses. In the RES 2023, 85 per cent of residents responded positively to the question 'Are you encouraged to do as much as possible for yourself?' (compared to 81 per cent) and a 87 per cent responded positively to the question 'Do you have a say in your daily activities?' (compared to 80 per cent). For both questions, a majority of residents responded with 'always', indicating high satisfaction (Figure 18).



**Figure 18: Resident responses to questions in the autonomy theme**

Despite the more positive responses to the questions in this theme, among resident responses to the question ‘What is one thing you would suggest as an improvement at this service?’, more daily activities was the most frequent request (Figure 19). While the response rate almost halved to 16 per cent (from 31 per cent) compared to the RES 2022, this remains a key area of opportunity for improving the aged care experience.

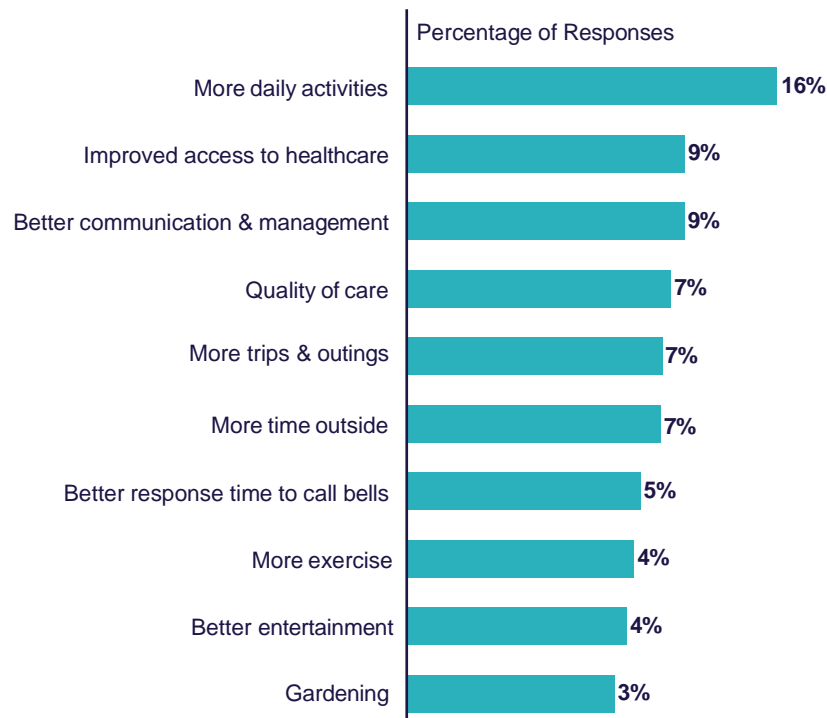
### What residents said:

Residents highlighted that the quality of activities they were offered could be improved, with responses including:

- *‘More intellectually stimulating activities, I’m bored too much of the time’.*
- *‘More activities that are mixing, socialising, games’.*
- *‘We need more activities... nothing for us to do here but sit in front of the TV’.*
- *‘Entertainment is needed on the weekends’.*

Further, highlighting that autonomy remains a concern for some aged care home residents, residents also asked for better communication and management. Some of these improvements related to self-determination, including:

- *‘They say residents have a choice here, but the reality is we don’t that often’.*
- *‘They should include us in the decision making, some of us have good ideas for improving our experience’.*



**Figure 19: Responses to the question ‘What would you suggest as an improvement to this service?’ as a percentage of all resident needs-related improvement requests, by topic**

## Key observations

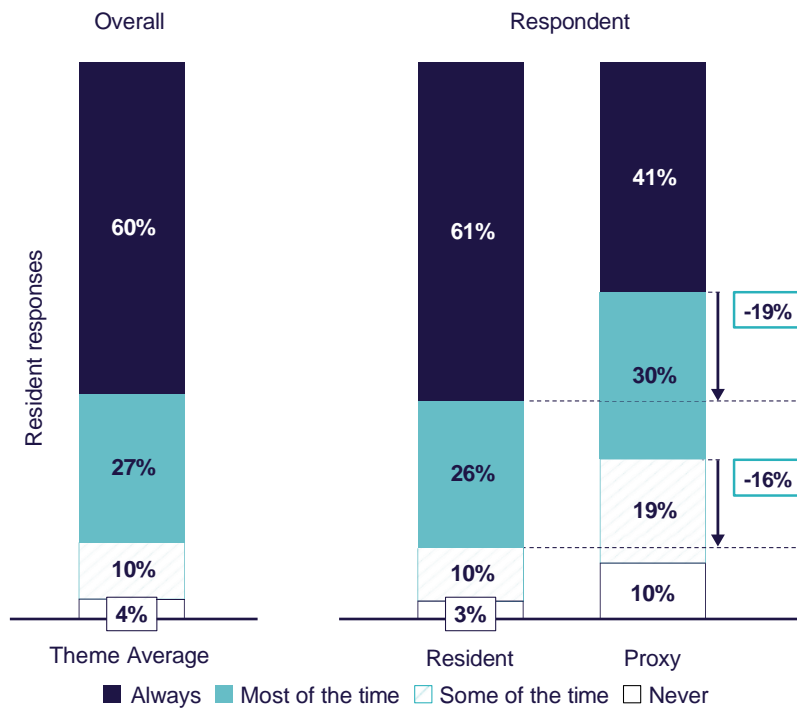
Across all of the themes, daily living support, behavioural support, and service size were found to have an impact on residents’ experiences in their aged care homes.

For this theme, proxies responded 16 per cent less positively overall than residents, similar to the RES 2022. This is similar to the difference observed between residents with ‘nil’ and ‘high’ support requirements for the activities of daily living, and likely reflects a significant overlap between these two resident groups. In addition, CALD residents responded less positively than non-CALD residents (3 per cent). This indicates that the overall increase in positive responses to questions in this theme has been reflected in responses from this resident group.

## Proxies

When a resident was unable to answer the survey on their own, they had the opportunity to nominate a representative (proxy) to answer on their behalf. Proxies responded to the autonomy theme questions less positively than residents, with a 16 per cent difference (Figure 20), and similar to the difference observed in the RES 2022 (14 per cent). This highlights an opportunity for aged care homes to evaluate the extent to which they promote self-determination and individualised care amongst residents with higher care needs.





**Figure 20: Proxy and resident responses to autonomy theme questions (theme average)**

### CALD residents

For the autonomy theme questions, CALD residents responded less positively than non-CALD residents by 3 per cent overall. The CALD resident experience for the autonomy theme has increased compared to the RES 2022, with a 5 per cent difference in positive responses. Despite this improvement, further efforts are required to identify and address the factors that contribute to less favourable aged care experience for CALD residents.



# Conclusion

The Residents' Experience Survey 2023 responses were more positive across most questions compared to 2022. Improvements in the responses from CALD and First Nations Australians were observed. Of all themes, autonomy was most improved, with residents' experiences more positive with respect to both their say in daily activities and encouragement to do things for themselves.

## **Key improvement areas**

Food satisfaction received 70 per cent positive responses in the RES 2023, unchanged from the RES 2022, with 'better quality' and 'more variety' the most requested improvements. This remains the aspect of the resident experience with the greatest demand for improvement.

Healthcare remains a key focus for residents, particularly better access to clinical and allied health services. This should remain a priority for aged care services. Other aspects of the care environment were experienced most positively by residents, with high scores for safety (96 per cent positive), being treated with respect (95 per cent positive) and staff kindness (95 per cent positive).

The staff communication question was the second-lowest scoring of the survey, and a second key area for improvement. With respect to the impact of staffing on resident satisfaction, 'more staff' ranked as the most requested staffing-related improvement. Negative care experiences are likely to be influenced by gaps in resident access to both health professionals and aged care staff.

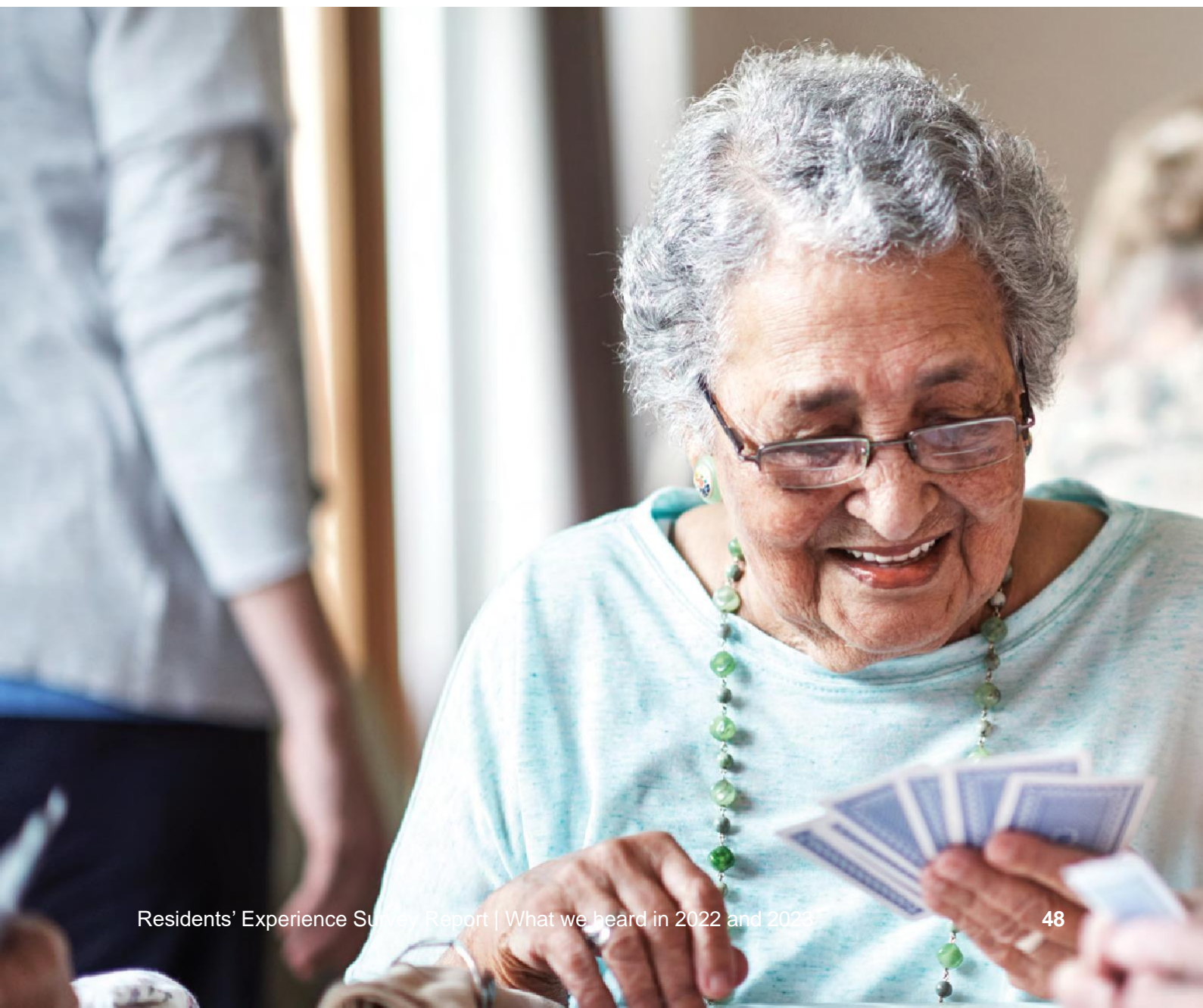
## **Resident group observations**

Reinforcing the resident feedback that staffing levels are a common concern, it was evident across the survey that residents with high care requirements responded less positively. For residents requiring high levels of support with daily living activities this was evident across all questions, while for residents with high nursing requirements the trend was confined to the organisational questions related to whether staff know what they are doing and whether the home was well run. Collectively, residents with greater needs for nursing, personal care or behavioural support are more likely to experience lower satisfaction with their aged care home, and it is probable that these negative experiences may be more common in homes with lower levels of staffing or a greater dependence on agency staff. Differences in staffing levels are also a likely explanation for the observation that resident responses are consistently more positive in the smallest homes compared to the largest.

This survey also revealed that CALD and First Nations Australians reported less positive care experiences related to some themes. Despite the improvements in the experiences of these residents compared to the previous survey, there remains a need to identify and address the causes of less favourable aged care experiences amongst these residents.

## Final remarks

More than 85 per cent of residents would recommend their aged care home, and the majority feel they are treated with kindness and respect. The RES 2023 demonstrated improvement across a broad range of resident experiences compared to RES 2022. This highlights the commitment of the sector to improve the standard of care they offer to residents. Food and staffing improvements remain the biggest opportunities to further elevate the experience of residents in aged care.





# Glossary

**Aged Care Funding Instrument (ACFI):** former aged care funding model (used prior to 1 October 2022) under which the amount of subsidy paid was based on a resident's ongoing care needs.

**Australian Functional Measure (AFM):** measures the level of cognitive impairment for residents<sup>7</sup>.

**Australian National Aged Care Classification (AN-ACC):** an assessment tool to measure characteristics of residents that drive costs in aged care<sup>8</sup>.

**Behavioural Resource Utilisation Assessment (BRUA):** Measure to determine how much behavioural support a resident needs.

**CALD:** culturally and linguistically diverse (as defined by both country of birth and first language spoken).

**Non-CALD:** residents not identifying as culturally and linguistically diverse.

**Government (Organisation Type):** an organisation type where residential aged care services are managed by state, territory, or local governments.

**LGBTIQ:** lesbian, gay, bisexual, transgender, intersex or queer.

**Not-for-profit (Organisation Type):** an organisation type where residential aged care services are managed by charities, community or religious organisations.

**Private (Organisation Type):** an organisation type where residential aged care services are managed by publicly listed companies or private companies.

**Monash Modified Model (MMM):** measures remoteness and population size on a scale from MM1 (major city) to MM7 (very remote). <https://www.health.gov.au/topics/rural-health-workforce/classifications/mmm>

**Metropolitan:** Monash Modified Model MM1 locations.

**RES:** Residents' Experience Survey.

**RES 2022:** Residents' Experience Survey completed in 2022.

**RES 2023:** Residents' Experience Survey completed in 2023.

**Regional:** Monash Modified Model MM2 locations.

**Resource Utilisation Groups - Activities of Daily Living (RUG-ADL):** Measures how much daily living support a resident needs.

**Rural and Remote:** Monash Modified Model MM3 – MM7 locations.

**Service size:** the number of residents at the time of survey. Inclusive of permanent or respite (short stay) residents and includes unoccupied approved places.

**Technical Nursing Requirements (TNR):** measures the nursing requirements a resident needs.



# Appendix

## Appendix 1 – Survey methodology

### Sampling

The sampling methodology for the RES 2023 remained unchanged from the RES 2022. This methodology was developed in collaboration with Professor Adrian Esterman, Chair of Biostatistics and Epidemiology at the University of South Australia. The aim was to survey 20 per cent of residents across Australia with a minimum of 10 per cent of eligible residents in each residential aged care home. Where there were less than twelve residents in a home, all residents were invited to participate.

A stratified random sampling approach was used for the survey, with two groups: one for residents from the special needs groups, and one for all other residents. The 10 special needs groups are defined by the *Aged Care Act 1997*, and includes First Nations Australians, care leavers, CALD people, people with disabilities, financially or socially disadvantaged people, homeless people, LGBTIQ people, parents of forced adoption or removed children, people living regionally or remotely, and veterans.

This approach was taken to ensure that residents from diverse backgrounds were adequately surveyed. As such, 40 per cent of the residents in each residential aged care home were sampled at random from those from diverse backgrounds, and 60 per cent from the rest of the population. Figure 21 summarises the sampling methodology.

An important advantage of conducting a minimum number of surveys with residents at each residential aged care home is that it reduces the risk of re-identification. In residential aged care homes with smaller numbers of residents it is recognised that even when there are more than twelve residents, a target of twelve residents may not be met. In such cases, the participation of a minimum of five residents and at least 50 per cent of eligible residents is considered representative whilst preserving anonymity.



~ 2,700 aged care homes



Residents living in the aged care home:

**0-11**  
residents

**12-39**  
residents

**40-59**  
residents

**60-79**  
residents

**80-149**  
residents

**150-350**  
residents



Aged care homes (% of total)

32 aged care homes  
**1%**

369 aged care homes  
**14%**

426 aged care homes  
**16%**

508 aged care homes  
**19%**

1112 aged care homes  
**42%**

178 aged care homes  
**7%**



Minimum responses to each RES Q1-12

All residents  
in aged care  
homes

**12**  
RES

**13**  
RES

**14**  
RES

**15**  
RES

**16**  
(or up to 10%)  
RES



Target: 37,000 RES

Figure 21: Overview of the sampling methodology used in both 2022 and 2023

## Randomisation approach

The randomisation approach for the RES 2023 was modified from the RES 2022 to reduce the burden on service providers and improve the efficiency of resident identification during visits. The approach was changed from a simple sampling approach to a systematic sampling approach. This systematic sampling approach meant that residents were pre-loaded into the survey tool and identified as belonging to a special needs group or not. The tool then randomly selected residents in order, to invite them to participate in the survey. This revised sampling approach reduced the reliance on service providers providing data to the surveyors and decreased the amount of time spent locating and identifying residents in the residential aged care home.

Survey responses were directly recorded on a tablet computer and not shared with anyone at the residential aged care home. To ensure residents felt comfortable to answer freely, aged care home staff were not present during the survey. In addition, the de-identified responses were kept strictly confidential and securely stored. Residents' identities were not revealed in any reviews and reports which may be published, and any information collected remained confidential as required by law.

## AN-ACC

The AN-ACC (Australian National Aged Care Classification) commenced in October 2022. It was developed in consultation with clinical experts in health and aged care for the Australian Government to evaluate characteristics of residents that increase their cost of care. To determine whether differing requirements for care were linked to the RES responses in RES 2023, four aspects assessed by AN-ACC were evaluated:

- Cognitive impairment.
- Nursing requirements.
- Behavioural support.
- Activities of daily living support.

These four categories are similar to those previously analysed in the RES 2022 using elements of the Aged Care Funding Instrument (ACFI) (previous funding model). Due to differences in the AN-ACC and ACFI assessment tools, comparisons of survey results correlating with these factors between the two years will not be indicative of actual changes in the resident experience. AN-ACC assessment data was available for 86 per cent for surveyed residents (32,037 residents). The AN-ACC scoring measures were interpreted in the context of the staffing support required for the resident. Measures for these four aspects were grouped into 3 or 4 categories representing increasing levels of support required.

## **Cognitive impairment**

Five components of the Australian Functional Measure (AFM) assessment tool for care burden were applied to measure cognitive impairment: social interaction, problem solving, memory, comprehension, and expression. Residents were classified into three groups based on the highest level of dependence measured across the five categories. 'Nil' included residents with complete or modified independence for each category (score of 7 or 6; 12 per cent of residents), 'Low' included residents that score in the modified dependence range for one or more categories (score of 5 or 4 or 3; 52 per cent of residents) and 'High' included residents that score in the complete dependence range for one or more categories (score of 1 or 2; 36 per cent of residents).

## **Nursing requirements**

The Technical Nursing Requirements (TNR) assessment measures eight medical conditions that usually require nursing staff to manage. For each of the requirements, need for oxygen, enteral feeding, tracheostomy care, catheter care, stoma care, peritoneal dialysis, daily injections, and complex wound management residents were scored with a 'Yes' or 'No'.

To determine whether residents' nursing requirements impacted their responses to the survey, responses were compared for residents across three categories of nursing requirements. The categories were defined as follows: 'Nil Nursing Requirements' for residents assessed as 'No' for all conditions (76 per cent of residents), 'Low Nursing Requirements' for residents assessed as 'Yes' for one condition (17 per cent of residents), and 'High Nursing Requirements' for residents assessed as 'Yes' for two or more conditions (7 per cent of residents).

## **Behavioural support**

To report behavioural support the Behavioural Resource Utilisation Assessment (BRUA) system was used, to determine how a residents behavioural support impacted their survey responses. The BRUA system is comprised of five components, including problem wandering or intrusive behaviour, verbally disruptive or noisy, physically aggressive or inappropriate, emotional dependence, and danger to self or others. Each of these components is scored 1-4, with lower scores representing extensive monitoring and higher scores representing less monitoring. From this, residents were placed into four groups from 1 to 4, representing the lowest score they recorded across the categories. These categories are Extensive Monitoring (53 per cent of residents), Intermittent Monitoring (19 per cent of residents), Occasional Monitoring (17 per cent of residents), and No Monitoring (11 per cent of residents).

## **Activities of daily living support**

Resource Utilisation Groups – Activities of Daily Living (RUG-ADL) measures motor function activities for daily living: bed mobility, toileting, transfer and eating, with the scoring system reflecting the extent of assistance required for each activity. This allowed for a comparison between the residents, need for daily living support and their responses to the survey. Residents were classified into four groups based on the greatest level of assistance required across the four activities. The ‘Nil support’ category included residents that score as independent (1) for all activities (24 per cent of residents); the ‘Low support’ category included residents that required no more than limited physical assistance (3; 1 or 2 for eating) for at least one of the activities (19 per cent of residents); the ‘Medium support’ category included residents that required assistance from one person (4; 1 or 2 for eating) for at least one of the activities (27 per cent of residents); and the ‘High support’ category included residents that required assistance from two or more people for at least one of the activities or required extensive assistance for feeding (5; 1, 2 or 3 for eating) for all activities (30 per cent of residents).

## **First Nations group survey**

In 2023, there were 2,060 residents in Australian Government funded residential aged care homes that identify as First Nations Australians. The department supported a culturally appropriate group survey environment in 2023 to encourage the participation of First Nations Australians in the survey.

Where there were three or more First Nations Australians being surveyed within an aged care home, they were given the option of completing a group survey. This new process was put in place to help residents feel comfortable participating and provide honest feedback. In addition, where possible, individual and group surveys were supported by an Elder or local support person to create a culturally appropriate environment. In total 669 First Nations Australian residents participated with 24 participating in a group survey and 645 completing the survey individually.

## **Cognitive impairment**

The survey team was trained to work with people with cognitive impairment and were able to determine if a person could engage appropriately with the survey. In addition, the survey was designed to support participation, including the use of visual aids. If a respondent was unable to participate at any stage of the survey, the process was not continued and any answers captured were deleted.

It was also important that residents were able to participate in the survey using a nominated proxy. As a part of this process the proxy was asked if they believed themselves to be the best representative for the resident, and if not then a different representative listed in My Aged Care was contacted to act as the proxy. This was to ensure that the opinion of the proxy closely reflected the experience of the resident.



## Exemptions

Exemptions from participation for aged care homes are assessed by the department on a case-by-case basis. Reasons for exemption included the aged care home recently opening and unforeseen circumstances affecting the home, for example a natural disaster or communicable disease outbreak.

## Limitations of the survey

A key limitation of the survey is that there were too few residents identified as belonging to certain special needs groups to enable robust statistical analyses of the responses from these resident groups. Independent investigation into how to improve sampling from less represented diversity groups is being undertaken in 2024.

## Privacy protection

Survey responses and AN-ACC data were de-identified prior to analysis. The analysis was conducted in compliance with the relevant ethics approvals.



## Appendix 2 – Survey sample representation for the RES 2023

Survey responses collected were representative of the larger Australian population overall. Both the number of responses and the represented services aligned with the share of the Australian population across states (Table 1 and 2).

Additionally, the number of CALD residents, as well as the First Nations residents, were consistent with the share of their respective populations within Australia (Table 3 and 4). The gender of the residents was also comparable to the Australian population over the age of 65 (Table 5) showing alignment in the genders surveyed. The spread of residents by location was similar to the spread of the Australian population (Table 6). Overall, the representation to known population statistics align with the representation in the survey sample.

In addition, there were additional resident characteristics checked for representation. Without reliable or comparable data to confirm representation, each group was represented by a significant sample size for analysis. These groups include residents with cognitive impairment (Table 7), residents that required a proxy to respond to the survey on their behalf (Table 8), residents with nursing requirements (Table 9), residents with varying levels of mobility (Table 10), and residents with different behavioural support requirements (Table 11). Resident numbers by aged care service ownership type were also compared (Table 12).

**Table 1: Sample representation of the services surveyed in the 2023 Residents’ Experience Survey, by state**

State	Service sample size (n)	Proportion of services	Proportion of the national population <sup>9</sup>
NSW	829	32%	31%
VIC	743	28%	26%
QLD	468	18%	21%
WA	246	9%	11%
SA	230	9%	7%
TAS	70	3%	2%
ACT	27	1%	2%
NT	12	<1%	1%

**Table 2: Sample representation of the residents surveyed in the 2023 Residents' Experience Survey, by state**

State	Respondent sample size (n)	Proportion of responses	Proportion of the national population <sup>9</sup>
NSW	12,045	32%	31%
VIC	10,213	27%	26%
QLD	6,925	19%	21%
WA	3,413	9%	11%
SA	3,284	9%	7%
TAS	969	3%	2%
ACT	410	1%	2%
NT	123	<1%	1%

**Table 3: Sample representation of the culturally and linguistically diverse (CALD) residents surveyed in the 2023 Residents' Experience Survey**

CALD Status	Respondent sample size (n)	Proportion of responses	Proportion of population <sup>10</sup>
CALD	11,339	30%	30%
Not CALD	26,043	70%	70%

**Table 4: Sample representation of the residents identifying as First Nations Australians surveyed in the 2023 Residents' Experience Survey**

Status	Respondent sample size (n)	Proportion of responses	Proportion of population <sup>11</sup>
Yes	669	2%	4%
No	36,713	98%	96%

**Table 5: Sample representation of the gender of residents surveyed in the 2023 Residents' Experience Survey**

Gender	Respondent sample size (n)	Proportion of responses	Proportion of the population (65 years and older) <sup>9</sup>
Female	24,035	64%	53%
Male	13,261	36%	47%
Unknown	16	<1%	n/a

**Table 6: Sample representation of the geographic distribution of residents surveyed in the 2023 Residents' Experience Survey**

Regionality	Respondent sample size (n)	Proportion of responses	Proportion of the population <sup>12</sup>
Metropolitan (MMM 1)	24,194	65%	66%
Regional (MMM 2)	3,050	8%	6%
Rural/Remote (MMM 3-7)	10,138	27%	28%

**Table 7: Sample representation of cognitive impairment for residents surveyed in the 2023 Residents' Experience Survey**

Cognitive impairment	Respondent sample size (n)	Proportion of responses
Significant	11,456	36%
Mild	16,590	52%
Nil	3,993	12%

**Table 8: Sample representation of the use of a proxy for the 2023 Residents' Experience Survey**

Use of proxy to answer questions	Respondent sample size (n)	Proportion of responses
Yes	2,277	94%
No	35,105	6%

**Table 9: Sample representation of the nursing requirements for residents surveyed in the 2023 Residents' Experience Survey**

Nursing requirements	Respondent sample size (n)	Proportion of responses
High	2,271	7%
Low	5,574	17%
Nil	24,194	76%

**Table 10: Sample representation of the motor function (activities of daily living support) for residents surveyed in the 2023 Residents' Experience Survey**

Motor Function	Respondent sample size (n)	Proportion of responses
High	9,600	30%
Medium	8,762	27%
Low	5,990	19%
Nil	7,687	24%

**Table 11: Sample representation of the behavioural support requirements for residents surveyed in the 2023 Residents' Experience Survey**

Behavioural support requirements	Respondent sample size (n)	Proportion of responses
High	16,999	53%
Medium	6,149	19%
Low	5,406	17%
Nil	3,385	11%

**Table 12: Sample representation of the ownership of services surveyed in the 2023 Residents' Experience Survey**

Organisation type	Respondent sample size (n)	Proportion of responses
Government operated	2,414	6%
Not-for-profit (NFP)	21,407	57%
Private	13,303	36%
Unknown	258	1%



## Appendix 3 – Multivariate analysis methodology

### Service size grouping

The cumulative distribution of positive responses was examined across all 12 questions to classify service sizes into distinct groups. For these purposes the service size is defined as the total number of residents residing within each aged care home at the time of the survey. The responses from the questions were coded and a median value was used to generate an overall score for each respondent. These respondents were subsequently linked to their respective services and service sizes. Initially, the service sizes were divided into intervals of five, and the cumulative proportion of positive responses were computed for each interval. The intervals were set at the point where positive responses were similar.

### Statistical significance

A chi-square test for independence was used to investigate the association between the resident and service characteristics with responses to the 12 survey questions. This chi-square test assessed the relationship between two variables within a given sample and determined if a significant association existed between them thus identifying characteristics that exhibited strong correlation with responses. This in turn aided the prioritisation of variables analysed further under bi-variate and multi-variate analysis. Additionally, for variables with binary categories, a Z-test for difference in proportion was performed to validate if the proportion of positive responses were statistically significantly different by categories within these characteristics. By employing the statistical tests, the identified differences in this study were confirmed to be statistically significant where appropriate.

### Machine learning driver models

Several frameworks were identified in this report, utilising traditional machine learning algorithms for supervised learning to examine the relationship between positive responses to the questions and resident and service characteristics. Each question's responses were coded as a binary outcome variable, categorised as positive (Always and Most of the Time) or negative (Some of the Time and Never), and subsequently modelled using classification algorithms. This classification was performed using three methodological groups: regression-based models (e.g., Logistic Regression), tree-based models (e.g., Decision Tree, Bagging, and Random Forest), and boosting models (e.g., Adaptive Boost, Gradient Boost, and XGBoost).

The traditional machine learning models, including Logistic Regression, Decision Tree, Bagging, Random Forest, Adaptive Boost, Gradient Boost, and XGBoost, were implemented using scikit-learn in Python. The dataset was split into 70 per cent for model training and 30 per cent for benchmarking the model's performance. Grid search and three-fold cross-validation were employed to determine the optimal parameters for each model. Accuracy and F1 Score were utilised as evaluation metrics, with the best hyperparameters selected based on the highest Accuracy score

across the cross-validation folds. The chosen best model parameters were then applied to the entire training set and tested on the independent test set.

The Logistic Regression, Random Forest, Gradient Boost, and XGBoost models demonstrated similar performance, with a median Accuracy of 86 per cent and F1 score of 92 per cent across all trained and tested models. Therefore, further evaluation focused on comparing one regression-based model (Logistic Regression) and one non-regression-based model (XGBoost). The Logistic Regression model's output was analysed using predictor coefficients and the significance of individual predictors, while the XGBoost model's output was examined using SHAP (SHapley Additive exPlanations), an algorithm for model explanation. Considering both model performance and interpretability, Logistic Regression was selected to support the descriptive analysis and identify the most important and statistically significant drivers (Tables 13-16).

**Table 13: 'How likely are you to recommend this aged care home to someone?' drivers**

Factor	Coefficient from Grouped Question	p Value	Significant
Per cent of non-CALD residents in service	0.458	0.00004	significant
Proxy	0.370	0.00001	significant
Government service	0.262	0.00381	significant
CALD	0.164	0.00003	significant
Rural/remote service	0.056	0.45010	not significant
Cognitive impairment score	0.001	0.97181	not significant
First Nations Australians	0.000	1.00000	not significant
Per cent of First Nations Australians in service	0.000	1.00000	not significant
Private service	-0.019	0.61666	not significant
Nursing requirements score	-0.036	0.09507	not significant
Metro/regional service	-0.064	0.34538	not significant
Per cent of male residents in service	-0.093	0.08729	not significant
Motor function score	-0.107	0.00000	significant
Resident gender	-0.132	0.00055	significant
Behavioural score	-0.144	0.00000	significant
Service size	-0.191	0.00000	significant

**Table 14: Care environment theme drivers**

<b>Factor</b>	<b>Coefficient from Grouped Question</b>	<b>p Value</b>	<b>Significant</b>
<b>Per cent of non-CALD residents in service</b>	0.783	0.00000	significant
<b>Proxy</b>	0.462	0.00036	significant
<b>CALD</b>	0.247	0.00006	significant
<b>Government service</b>	0.236	0.10161	not significant
<b>Rural/remote service</b>	0.185	0.11016	not significant
<b>Metro/regional service</b>	0.023	0.82806	not significant
<b>Private service</b>	0.011	0.85502	not significant
<b>Per cent of First Nations Australians in service</b>	0.000	1.00000	not significant
<b>Resident gender</b>	-0.019	0.75440	not significant
<b>Per cent of male residents in service</b>	-0.035	0.66691	not significant
<b>First Nations Australians</b>	-0.040	0.84085	not significant
<b>Nursing requirements score</b>	-0.087	0.00641	significant
<b>Cognitive impairment score</b>	-0.117	0.06163	not significant
<b>Motor function score</b>	-0.200	0.00000	significant
<b>Service size</b>	-0.220	0.00027	significant
<b>Behavioural score</b>	-0.254	0.00000	significant

**Table 15: Organisational aspects of care provision theme drivers**

<b>Factor</b>	<b>Coefficient from Grouped Question</b>	<b>p Value</b>	<b>Significant</b>
Government service	0.341	0.00057	significant
Cognitive impairment score	0.236	0.00000	significant
Rural/Remote service	0.230	0.00187	significant
Proxy	0.194	0.02297	significant
Per cent of non-CALD residents in service	0.122	0.31135	not significant
CALD	0.037	0.36315	not significant
Metro/regional service	0.033	0.61907	not significant
Per cent of First Nations Australians in service	0.000	1.00000	not significant
Private service	-0.060	0.12769	not significant
Resident gender	-0.066	0.09048	not significant
Per cent of male residents in service	-0.076	0.19359	not significant
Behavioural score	-0.120	0.00000	significant
Nursing requirements score	-0.132	0.00000	significant
First Nations Australians	-0.132	0.33750	not significant
Motor function score	-0.157	0.00000	significant
Service size	-0.294	0.00000	significant

**Table 16: Autonomy theme drivers**

Factor	Coefficient from Grouped Question	p Value	Significant
Behavioural score	-0.116	0.00000	significant
Motor function score	-0.423	0.00000	significant
Per cent of non-CALD residents in service	0.780	0.00000	significant
CALD	0.146	0.00033	significant
Service size	0.035	0.35575	not significant
Proxy	-0.635	0.00000	significant
Nursing requirements score	-0.046	0.03615	significant
Cognitive impairment score	-0.254	0.00000	significant
Government service	-0.052	0.52682	not significant
Rural/Remote service	0.159	0.03505	significant
Per cent of male residents in service	-0.083	0.10881	not significant
Resident gender	-0.201	0.00000	significant
Metro/regional service	0.053	0.44721	not significant
First Nations Australians	0.073	0.61662	not significant
Private service	-0.007	0.85583	not significant
Per cent of First Nations Australians in service	0.091	0.78066	not significant

## Topic modelling

Topic Analysis using the Latent Dirichlet Allocation (LDA) model from Gensim in Python was used to uncover common themes of improvement and service qualities from the open-ended question ‘What is one thing you would suggest as an improvement at this service?’. Text with missing responses was excluded from the topic modelling analysis and treated as indicative of no areas for improvement. Additionally, short responses (less than twenty characters) were separated, and Word Clouds were generated to identify frequently occurring words. The Word Clouds were constructed using a combination of unigrams, bigrams, and trigrams to identify similar responses, such as “No Suggested Improvement” or “More Staff.” The pre-processing of the remaining free text question involved several steps using Python’s Natural Language Tool Kit (NLTK). These steps included fixing contractions, removing stop



words and punctuation, lemmatization using WordNet Lemmatizer to reduce words to their root form, and extracting bigrams and trigrams to identify co-occurring words.

The pre-processed text data was utilised in conjunction with Latent Dirichlet Allocation (LDA) for topic modelling to generate broader topics from the free text responses. LDA treats each response as a collection of topics with associated probabilities. Each topic is represented as a collection of keywords, also with assigned probabilities. By specifying the desired number of topics (K), the algorithm creates a distribution of topic-keywords and calculates the probability of each response belonging to a specific topic. The topic with the highest probability was assigned to each response. The determination of the optimal number of topics involved assessing the coherence scores for different values of K, ranging from 2 to 10. This selection process was further supported by analysing the “Intertopic Distance Map” using multi-dimensional scaling, which was implemented using the pyLDAvis library in Python.

Since LDA only categorised free-text question responses into similar groups, the top 10 salient terms from each topic were individually examined, along with representative texts, to assign intuitive topic names. Given the unsupervised nature of this technique, model evaluation based on measures like accuracy was not feasible. Therefore, a stratified random sample of responses was manually studied, alongside topic-specific Word Clouds, to validate the output. Each response in this analysis was assigned to a single topic, as manual coding for the extensive volume of free-text responses was not pursued.

Furthermore, a comprehensive exploration of the free-text data was conducted for key topics to recommend specific areas for improvement. Word Clouds and a Bag of Words technique using CountVectorizer in Python were employed to identify frequently occurring words (e.g., variety, quality, portion) related to improvement in specific topics. These words were then used to categorise the responses into sub-themes. The Bag-of-Words model, which simplifies natural language processing by converting words to numerical frequencies without semantic information, facilitated the identification of these sub-themes.

## **Sentiment analysis**

Sentiment analysis on the free text ‘What would you say is the best thing about this service?’ was used to establish whether residents responded positively when asked about positive feedback. Free texts were pre-processed using natural language processing capabilities outlined under Topic Modelling and then passed through both rule-based models like Vader Sentiment Analyzer and pre-trained transformer models like SieBERT, BERTweet, and RoBERTa. Responses were categorised into Positive, Neutral, and Negative sentiments combining the output of both model types and careful evaluation of word clouds for each of the sentiments.

## Appendix 4 – RES 2023 and RES 2022 overall scores for each question

Table 17: Overall scores for each question in the RES 2023 and RES 2022. Scores in parentheses are the 2022 results. Please note that the RES 2023 question ‘How likely are you to recommend this residential aged care home to someone?’ replaced the RES 2022 question ‘Do you feel at home here?’

Question	Always	Most of the time	Sometimes	Never
Do you feel safe here?	75% (73%)	21% (22%)	4% (5%)	1% (1%)
Do you get the care you need?	57% (54%)	34% (36%)	8% (10%)	1% (1%)
Do staff treat you with respect?	71% (70%)	24% (24%)	5% (5%)	0% (1%)
Are staff kind and caring?	66% (65%)	29% (29%)	5% (6%)	0% (0%)
Do you like the food here?	26% (27%)	44% (43%)	26% (26%)	4% (5%)
Is this place well run?	42% (40%)	45% (45%)	12% (13%)	2% (2%)
Do staff know what they are doing?	40% (39%)	46% (47%)	13% (13%)	1% (1%)
Do staff explain things to you?	41% (37%)	36% (38%)	19% (20%)	4% (4%)
Do staff follow up when you raise things?	42% (39%)	40% (40%)	15% (17%)	2% (5%)
Are you encouraged to do as much as possible for yourself?	55% (47%)	30% (34%)	11% (14%)	4% (5%)
Do you have a say in your daily activities?	64% (52%)	23% (28%)	9% (13%)	3% (6%)
How likely are you to recommend this residential aged care home to someone?	59% (N/A)	26% (N/A)	9% (N/A)	6% (N/A)
Do you feel at home here?	N/A (42%)	N/A (32%)	N/A (15%)	N/A (11%)

Survey responses marked as N/A indicate that the question was not asked in the survey that year.

## Appendix 5 – Summary of the RES 2022 findings

### Sample size

The RES 2022 collected responses from 37,443 residents (20 per cent of aged care residents) across 2,645 aged care homes (99 per cent of aged care homes).

### Summary

Positive responses, on average, were lower amongst residents of the largest services (over 110 places) compared to the smallest services (less than 40 places), highlighting that service size is a factor that affects resident experience. Moreover, this analysis highlighted that residents with high complex healthcare needs, CALD residents, and First Nations Australians reported greater levels of dissatisfaction with their aged care experience.

Residents with high complex healthcare needs reported fewer positive experiences related to receiving the care they needed, less satisfaction with the food, and were less likely to feel at home than other residents.

Overall, CALD residents reported fewer positive experiences relating to food than non-CALD residents. This highlights the need for aged care homes to cater to the food preferences and cultural backgrounds of their resident population. In addition, irrespective of the aged care service type or size, CALD residents responded less positively to questions related to autonomy, which includes having a say in their daily activities and being encouraged to do as much as possible for themselves. This was also observed in all questions related to the care environment, which included questions on whether staff are kind and treat residents with respect, and whether residents get the care they need. First Nations Australians also reported a lower sense of autonomy.

### Key findings by theme

The analysis of the RES 2022 illustrated that the most positive responses related to the care environment theme. For this theme, questions on safety, respect, kindness, and general care received the most positive responses. However, only 54 per cent of residents reported that they always receive the care they need and access to healthcare services was reported by residents as a key opportunity for improvement.

Questions addressing the organisational aspects of care provision elicited more negative responses, identifying key areas for aged care homes to address to improve the resident experience. Food satisfaction was the lowest scoring question on the survey with quality and variety identified as areas for improvement. Staff communication was the second-lowest scoring question, with residents identifying more staff as an opportunity for improvement.

The two survey questions related to autonomy received similar responses, with 81 per cent of residents either always or most of the time reporting being encouraged to do as much as possible for themselves and having a say in daily activities. However, residents identified more daily activities as an opportunity for improvement.

# References

- <sup>1</sup> **Royal Commission into Aged Care Quality and Safety.** Final Report: Care, Dignity and Respect. Canberra: Commonwealth of Australia, 2021.
- <sup>2</sup> **Department of Health.** Residents' Experience Surveys. 2023. Canberra: Department of Health. <https://www.health.gov.au/our-work/residents-experience-surveys>
- <sup>3</sup> **Australian Institute of Health and Welfare.** GEN Aged Care Data. [Cited: January 16, 2024.] <https://www.gen-agedcaredata.gov.au/topics/Quality-in-aged-care/Explore-consumer-experience-in-aged-care>.
- <sup>4</sup> **Welford, Claire,** et al. Autonomy for older people in residential care: a selective literature review. 2012. Int J Older People Nurs. pp. 65-9.
- <sup>5</sup> **Sjogren, Karin,** et al. Organisational and environmental characteristics of residential aged care units providing highly person-centred care: a cross sectional study. 2017. BMC Nurs.
- <sup>6</sup> **Murphy, Kathy and Welford, Claire.** Agenda for the future: enhancing autonomy for older people in residential care. 2012. Practice Development – Autonomy For Older People In Residential Care.
- <sup>7</sup> **Department of Health.** Aged Care Funding Instrument (ACFI) User Guide. 2016. Canberra: Department of Health.
- <sup>8</sup> **Department of Health.** Australian National Aged Care Classification (AN-ACC): AN-ACC Reference Manual including AN-ACC Assessment Tool (Appendix 1). 2021. Canberra: Department of Health.
- <sup>9</sup> **Australian Bureau of Statistics.** National, state and territory population. June 2023. Canberra: Australian Bureau of Statistics [Cited: January 23, 2024.] <https://www.abs.gov.au/statistics/people/population/national-state-and-territory-population/latest-release#data-downloads>.
- <sup>10</sup> **Australian Institute of Health and Welfare.** Reporting on the health of culturally and linguistically diverse populations in Australia: An exploratory paper. 2022. Canberra: Australian Institute of Health and Welfare.
- <sup>11</sup> **Australian Bureau of Statistics.** Estimates of Aboriginal and Torres Strait Islander Australians. August 2023. Canberra: Australian Bureau of Statistics [Cited: January 25, 2024.] <https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-aboriginal-and-torres-strait-islander-australians/latest-release#data-downloads>.
- <sup>12</sup> **Australian Bureau of Statistics.** Regional Population. July 26, 2022. Canberra: Australian Bureau of Statistics [Cited: December 8, 2023.] <https://www.abs.gov.au/statistics/people/population/regional-population/latest-release#data-download>.



Phone **1800 200 422**  
(My Aged Care's freecall phone line)



Visit [agedcareengagement.health.gov.au](https://agedcareengagement.health.gov.au)

For translating and interpreting services,  
call **131 450** and ask for My Aged Care on **1800 200 422**.

To use the National Relay Service,  
visit [nrschat.nrscall.gov.au/nrs](https://nrschat.nrscall.gov.au/nrs) or call **1800 555 660**.