



29 August 2024

Monthly Care Statements implementation webinar: Questions and answers

Thank you to everyone who attended and submitted their questions in the webinar.

This document provides answers to those questions.

If you have any further questions about Monthly Care Statements, please contact: monthlycarestatements@health.gov.au

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General

Will we receive the PowerPoint along with a recording, as some colleagues were unable to attend the webinar?

Yes, we emailed everyone who registered for the webinar links to the slides and recording.

Both the slides and recording are also published on our website:

- [webinar slides](#).
- [webinar recording](#).

The slide presentation does not print well from the website. It cut off on the right hand side.

We checked the slides print well. You can print the slides from the website: [webinar slides](#).

If you are still experiencing issues, we recommend you check your printer settings.

Where can I locate the QR codes to register for the pilot or to provide Monthly Care Statements?

- All QR codes are in the [webinar slides](#).
- If you experience any issues with the QR codes, use these links:
- [Register for the software pilot. Please note, registrations closed on 8 October 2024.](#)
- [Register to provide voluntary statements.](#)

Timing

When will Monthly Care Statements be mandatory?

The Australian Government (government) has not made a decision on when statements will be mandatory. The decision will be informed by experiences during the voluntary period and the outcomes of the software development project.

Statements will not become mandatory before the [new Aged Care Act](#) commences.

If we choose to be a part of the voluntary roll out, do we have to start on 1 October 2024?

No. There is no need to start giving statements on 1 October 2024. You can start giving statements at any time from 1 October 2024.

If you give statements during the voluntary period, we want to hear from you. Fill out the [registration form](#) so we can keep you updated and learn from your experience.

Will Monthly Care Statements become recommended practice or mandated?

Statements will become mandatory. The government has not made a decision on when the statements will become mandatory.

This decision will be based on:

- experiences during the voluntary period
- the outcomes of the software development project.

The voluntary period from 1 October 2024 can assist providers to embed the statements into standard practice before they become mandatory.

Statement content and format

What information would you suggest to include in Monthly Care Statements?

Our [Voluntary Monthly Care Statements guide](#) sets out the information to include in the statements.

The categories are:

- wellbeing activities (nature of the activities and frequency)
- nutrition and weight (diet type, weight and change)
- medication change (medications and changes)
- appointments (hospital visits and health/medical appointments)

When relevant to a resident, the verbal discussion or written statement should also include:

- summary information (diagnoses)
- wound management
- mobility
- falls.

Do you have an example or a template we can use?

We have a template to support providers to start giving statements during the voluntary period. Providers are welcome to:

- design their own templates
- modify the sample template to suit their needs.

Download the [template](#).

Should Monthly Care Statements be customised for each resident?

Providers do not need to customise the template for individual residents, but the information you include in a statement must be specific to that resident.

The [guide](#) and [template](#) outlines the information you should include.

You can:

- use our template, customise it or design your own
- add extra information.

Should Monthly Care Statements only include information on regular medication?

Statements should include all medication, including Pro Re Nata (PRN) as needed, and short course medications.

What do we do if we do not have information about why medication changes have occurred?

We recommend discussing statements and the information to include with relevant staff in your aged care home. The [guiding principles for medication management in residential aged care facilities](#) promotes the safe, quality use of medicines and medication management in your aged care home. This information can help you manage the roles and responsibilities of the health care team in medication management.

Will you translate the template into other languages when Monthly Care Statements become mandatory?

When the statements become mandatory, we will consider translating the template and other supporting documents for residents.

During the voluntary period, we want to see how the templates and supporting documents are used. We welcome feedback from providers and residents so we can understand where we may need to improve our resources.

During the voluntary period, providers can use [Translating and Interpreting Services \(TIS\) National](#) to help communicate with residents that have limited English proficiency.

Do Monthly Care Statements apply to the Home Care Packages program?

The statements only apply to approved residential aged care providers. There is no current proposal to extend the statements to the Home Care Packages program (or the Support at Home program from 1 July 2025).

Monitoring Monthly Care Statements

Do we need to tell you that we are providing Monthly Care Statements?

We encourage all aged care homes who take part in the voluntary period to [register](#) and give us your feedback. You can contact the department at monthlycarestatements@health.gov.au.

The feedback you give us will inform the advice we provide to the government on when the statements will become mandatory and what that mandatory requirement will look like.

Will there be a requirement to report on Monthly Care Statements?

No, you do not need to report to the department about providing statements.

We encourage aged care homes to [let us know](#) if they are giving statements during the voluntary period. We want to:

- know about how you are rolling out the statements
- hear your feedback.

Your input will help inform the government's decision on the mandatory requirements for statements.

Will the Aged Care Quality and Safety Commission monitor Monthly Care Statements?

The Aged Care Quality and Safety Commission (Commission) will not monitor statements during the voluntary period.

When the statements become mandatory, the Commission may monitor the provision of statements. Through the Commission's monitoring activities, information about the statements may be requested. For example, the Commission may seek this information if they have concerns about how providers are communicating with older people about delivery of care and services.

During the voluntary period, will the Aged Care Quality and Safety Commission expect Monthly Care Statements to be part of feedback/complaint resolution with the consumer and representative if a complaint is made about communication?

As the statements will be voluntary from 1 October 2024, there would be no expectation from the Commission that aged care homes would be providing them. The Commission will not be monitoring the statements during the voluntary period.

Resourcing

Is the time commitment in completing Monthly Care Statements being considered by Independent Health and Aged Care Pricing Authority (IHACPA) in pricing?

The activity and costs associated with delivering the statements in the voluntary period will be picked up in the annual costing studies completed by IHACPA.

IHACPA provides advice to the government on the Australian National Aged Care Classification (AN-ACC) model settings to ensure that AN-ACC funding matches actual care costs. To understand the costs, IHACPA carries out annual costing studies that collect time and motion data (i.e. how much time is spent with residents providing all types of care, including direct, indirect and shared care).

Will providers receive remuneration to support giving Monthly Care Statements?

The activity and costs associated with delivering the statements will be picked up in the annual costing studies completed by IHACPA.

The voluntary period provides a soft start for introducing the statements. It allows aged care homes to:

- develop and test the delivery of the statements
- explore how they can be integrated into regular care review cycles.

How do we resource this? Has the workload for each person been calculated and taken into account?

The work effort to give the statements will vary depending on how they are rolled out by providers during the voluntary period. For example, the impact on workload could be reduced by:

- using automation to collate the statements
- building verbal statements into existing review processes.

We are also [running a software development project to help automate statements](#).

Interaction with existing processes

Do Monthly Care Statements replace existing communication mechanisms such as care plan reviews?

No. The current Aged Care Quality Standards require providers to ensure residents have a care and services plan that is reviewed regularly. This requirement will be maintained under the strengthened Aged Care Quality Standards that are expected to come into effect with the new Aged Care Act.

Statements are a way to complement, rather than replace, existing communication. Statements could be aligned with care plan reviews and used to support these conversations with residents.

Do Monthly Care Statements need to be given out at the end of the month?

Providers can choose when in the month to give the verbal or written statement. You can give the statements on a rolling basis or on a set day each month for all residents. You can build the statements into existing processes and to suit business priorities, for example, a 'Resident of the Day' process.

Statements should cover the care provided over one month. You should document the reporting period on the statement.

Care minutes

Do Monthly Care Statements count towards care minutes?

Some tasks involved in preparing statements may count towards care minutes. For example:

- A clinical review of the statement by a registered nurse on-site at the service the resident lives in would count towards care minutes.
- Discussing the statement with the resident would also count.

However, time spent by staff developing, quality assuring and distributing written statements will not count towards care minutes. These activities are administrative.

For more information, refer to the [Voluntary Monthly Care Statements guide](#).

What does ‘conducted by’ a registered nurse mean?

The webinar included a slide that said certain activities would count towards care minutes if ‘conducted by a registered nurse, enrolled nurse or personal care worker’.

The following activities count towards care minutes if they are completed by a registered nurse, enrolled nurse or personal care worker/assistant in nursing, on-site at the service the resident lives in:

- clinical review of the statement (for example, checking whether changes to a resident’s care plan are required)
- follow-up conversations with the resident about the statement
- refining and amending a resident’s care plan.

What work by clinical staff in preparing the statements will count towards care minutes?

Both administrative and clinical staff may be involved in the production of the statements. The collation of the information, whether undertaken by an administrative or a clinical staff member, will not count towards care minutes.

The following activities count towards care minutes if they are completed by a registered nurse, enrolled nurse or personal care worker/assistant in nursing, on-site at the service the resident lives in:

- clinical review of the statement (for example, checking whether changes to a resident’s care plan are required)
- follow-up conversations with the resident about the statement
- refining and amending a resident’s care plan.

Who should receive Monthly Care Statements?

Where is information on the representative (for example, someone who has power of attorney) receiving Monthly Care Statements?

Section 2.1 of the [Voluntary Monthly Care Statements guide](#) contains information on when a provider can give the statements to someone other than the resident.

Can you talk about consent?

The overarching principles are:

- statements are for the resident
- the resident should be able to control who receives them.

The statements should not be shared with anyone else without the resident’s explicit consent.

Residents can authorise the aged care home to give the statement to another person (for example, a family member). The resident can also choose to pass on the statement themselves.

Where it's known and recorded that the resident does not have the capacity to understand the statement, the statement may be provided to the resident's representative. The representative must be authorised under the relevant state or territory law to make health decisions for the resident and/or to receive information about the resident's care (e.g. under a guardianship order or enduring power of attorney).

Can Monthly Care Statements be provided to the next of kin, a guardian or Enduring Power of Attorney if the resident does not have the capacity to receive and understand the statement?

Where a resident does not have the capacity to receive them, the statements can be given to the resident's representative where the following provisions are met:

- it is known and recorded that the resident does not have capacity to receive and understand the statements
- the representative is authorised under the relevant state or territory law to make health decisions for the resident and/or to receive information about the resident's care (e.g. under a guardianship order or enduring power of attorney).

The above provisions would also need to be met before the statements are given to the resident's next of kin.

More information can be found in the [Voluntary Monthly Care Statements guide](#).

Note: these provisions relate to the existing aged care legislative framework and will apply until the new Aged Care Act commences. The Aged Care Bill 2024 was introduced into Parliament on 12 September 2024. It includes provisions that change the obligations of providers in relation to giving the statements to a resident's supporter or representative (as per state and territory law).

Do we give Monthly Care Statements to a resident if the resident is alert and can discuss their care plan?

Yes, the default position is that the statement should go to the resident. However, the resident can request that the statement is given to another person. Document the resident's explicit consent for providing the statement to another person.

Will residents under guardianship be excluded as was the case for the pilot program?

Residents were eligible to take part in the 2023 pilot if they were able to give informed consent.

Where there were documented issues with the resident's capacity to give informed consent, the representative (authorised under state and territory legislation) was invited to take part on the resident's behalf. Providers had the discretion to exclude residents from the pilot where a:

- representative was not readily identifiable
- resident was under a public guardianship arrangement.

During the voluntary period, providers can choose whether they offer statements to a subset of residents or all residents.

The Aged Care Bill 2024 includes specific obligations for providers in relation to giving information to a resident's supporter or representative (as per state and territory law). It is likely these obligations will apply to statements.

Privacy

Given privacy requirements, what is your proposed method for distributing Monthly Care Statements to residents?

Residents may prefer the hand delivery of a hard copy statement to the resident's room. This provides an opportunity to discuss the content of the statement with the resident. Where hard copies are given, we suggest providers help their residents to:

- store the statements securely, such as in a locked drawer in their room
- dispose securely if the resident requests it.

Aged care homes could also provide the statements to their residents via password-protected email or secure online platform.

Opting out of Monthly Care Statements

Can residents make a choice about getting Monthly Care Statements?

Yes, residents can decide if they wish to receive the statements. Residents should be able to:

- opt out of receiving statements
- opt back in if they change their mind.

In the voluntary period, we encourage providers to operate on an 'opt-out' basis so that residents have the opportunity to receive a statement and consider whether it is useful to them.

Can families opt-out of this option when communication is already done via existing channels?

Opting out of the statements is a decision for the resident, not their family, unless there is a substitute decision-making arrangement in place.

The statements are not intended to replace existing communication channels. If a resident feels communication from their provider is acceptable, they may opt out of receiving a statement.

Will the department monitor who has opted out?

We have no role in monitoring whether a resident or their representative has opted out of receiving statements.

Our expectation is that the aged care home would record the opt-out in their clinical management system.

Software pilot

Where is the department at with a digital solution?

We have engaged Liquid Interactive to work with aged care homes and software vendors to develop and test digital solutions to automate the creation of the statement.

Liquid is keen to hear from providers that have multiple disjointed software systems or no software systems in place so that they can consider what might be needed to avoid extensive manual processes.

We sought expressions of interest from residential aged care providers and software vendors to take part in:

- the software pilot
- surveys, focus groups and interviews.

The pilot will last for several months. We plan to start the pilot in early 2025.

How can I register to take part in the software pilot?

Registrations closed on 8 October 2024.

What cost is involved for providers for the digital solution?

Aged care homes are encouraged to have discussions with their software vendors on the potential costs of updating or upgrading the services provided.

What would you expect from software vendors during the pilot?

We anticipate software vendors will:

- build new capability into their systems to produce the statements
- work with their existing provider clients to test this.

Liquid Interactive will work with the software sector to:

- streamline ways of building the new functionality
- pilot new systems in early 2025.

With the intention of an integration between My Aged Care and My Health Record, is this the likely end goal for the distribution of Monthly Care Statements?

The focus of the software project is on getting digital solutions into the market as soon as possible. This will allow providers to produce the statements quickly and easily ahead of mandatory statements.

Why doesn't the department develop and distribute Australian-specific holistic aged care software to help providers meet all legislated requirements and reporting?

The government recognises the importance of technology to enable provider efficiency and support the delivery of high-quality care for older Australians. For this reason, the government

has invested in the standardisation of information and technology to support interoperability, including:

- The National Aged Care Minimum Data Set (NMDS) to improve data consistency nationally, through the review and gradual standardisation of aged care data, in partnership with the Australian Institute of Health and Welfare (AIHW).
- Business to Government (B2G), which provides a new channel to streamline data exchange between aged care providers and the government, enabling integration of conformant software with government systems. Government has invested in the development of up to 5 additional APIs by 2026, building on the previous release of 24/7 Registered Nurses and Quality Indicator reporting APIs.

The department encourages providers to make software choices that best support the delivery of high-quality care, in their unique circumstances. We encourage the uptake of recent digital reforms and welcome continued sector involvement to guide these advancements. To help shape aged care digital reform or for more information:

- join the [Sector Partner Community](#)
- sign up for upcoming Digital Transformation [Tech Talk webinars](#)
- access more information about B2G on the [department's website](#)
- visit our Business to Government (B2G) [developer portal](#).

Have you engaged with major software providers to the Aged Care sector to consider integration?

Yes, software vendors were consulted during the initial pilot undertaken in 2023. The pilot indicated:

- automation of the statements would reduce the administrative burden on staff
- software vendors would need to work with the department to update their systems to meet the new requirements
- there should be lead-in time to make these changes.

Liquid Interactive will be engaging with software vendors over the coming months as part of the software pilot.

Other

What stakeholders were consulted in the design and development of the statements?

Forty aged care homes, their staff, residents, representatives, and families took part in the initial pilot. The pilot tested 5 prototypes over a 3-month trial. We used the results of this pilot to ensure the statements contain the most important information for residents, their representatives and families.

Where are the findings of the 2023 pilot and the process undertaken by pilot sites?

A summary of the outcomes of the original pilot can be found on the [Monthly Care Statements webpage](#).