



Aged Care Assessment Quality Framework December 2024

Version 5.0

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1 Introduction

The Single Assessment System has been developed to simplify and improve access to aged care services and provide a single aged care assessment pathway for older people to access aged care services. The system has been established in response to Recommendation 28 of the Royal Commission into Aged Care Quality and Safety to make it easier for the older person to access aged care and adapt services as their needs change.

The Single Assessment System introduced a new assessment framework and the Integrated Assessment Tool (IAT), designed to streamline the assessment process, and enhance the overall experience for older people.

Under the Single Assessment System, assessment organisations are responsible for the day-to-day operation of the Single Assessment System Program. Assessment organisations are required to conduct both home support and comprehensive aged care needs assessments using the IAT in a manner that focusses on the older person and attributes to delivering timely, safe and nationally consistent high-quality assessments, guided by this Aged Care Assessment Quality Framework (Framework).

2 Why have an Aged Care Assessment Quality Framework?

The Australian Government is committed to high quality care for older persons, with the health, safety and welfare of aged care recipients a high priority. Aged Care Needs Assessors and assessment organisations must work in partnership with the older person, giving them real control and choice in the services they receive. This Framework reflects these principles.

Older persons engage with the My Aged Care Workforce through many channels but the engagement with the assessor workforce is critical. Assessors undertaking aged care needs assessments, bear significant responsibility for the older persons perceptions of the My Aged Care system. This Framework focuses on the older person's assessment experience.

The Framework describes essential organisational skills required to support assessors to reach and maintain a high-quality assessment experience for every older person. The Framework also incorporates the good practice of the three-tiers of quality management. It focusses on assuring quality assessments including those in relation to younger people¹, First Nations older people and those from diverse backgrounds.

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

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

Self-assessment against the Framework identifies strengths and opportunities for improvement. Self-assessment will help in developing the right skills and capabilities to deliver high quality, including new policies, procedures and guidelines, systems for data collection and external expertise.

3 A high-quality assessment experience

This Framework aligns with the consumer-focused principles of the Aged Care Quality Standards from the Aged Care Quality and Safety Commission (ACQSC) <u>single set of aged care quality standards</u> and identifies a high quality assessment as one that meets the following four quality goals:

PERSONAL –the assessment process is conducted as a respectful conversation and is responsive to the person's individual situation, context, goals, and aspirations – it includes and respects the role of carers and family and ascertains the sustainability of this support.

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

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

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

SAFE – the older person is provided a physically, emotionally and culturally safe assessment where their unique experiences are respected and factored into the way they are assessed for aged care. All assessments are delivered in a safe environment and free from harm.

4 Achieving a high-quality assessment experience

The effective and efficient provision of client-centred, high quality assessment services requires a solid foundation of rigorous quality governance and organisational systems. The below sets out the critical components that are key to supporting high quality assessment delivery to older persons:

4.1 Partnership with the older person

- Support a partnership approach with the older person in the assessment and referral process.
- Use both the older person's and carer feedback, and complaints to identify and respond to issues, and to improve the assessment process.
- Support face-to-face engagement with First Nations older people and people from cultural and linguistic diversity.
- Engage with the older person with special needs and other complex cohorts to ensure they receive the required support for their needs and goals.
- Support a safe, culturally appropriate assessment and referral process for the older person, allowing them to make informed choices.

4.2 Planning and leadership

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

4.3 Positive people and practice

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

- Supply staff with guidelines, information and tools required to conduct a high-quality assessment as described in this Framework.
- Equip assessors to identify and manage key risks to the older person.
- Ensure assessors are supported to manage occupational, health and safety risks and challenging situations, and have access to advice and support for dealing with complex older persons.
- Ensure staff receive regular information and feedback on their progress with achieving the assessment quality goals and use this to inform their professional development and that of the assessment organisation.
- Ensure there is effective clinical governance in place to support assessors to seek clinical support and exercise sound clinical judgement.

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

4.4 Elements of a high-quality assessment

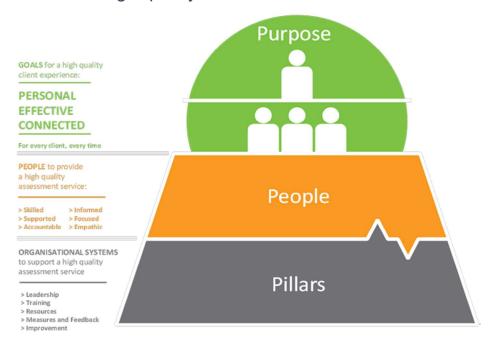


Diagram 1: Three key elements of a high-quality assessment

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

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

Assessment organisations must maintain their responsibility to ensure that all staff meet the Minimum mandatory training requirements as detailed in the My Aged Care Workforce Learning Strategy 2024 (or any subsequent versions) and support other training necessary to improve assessors' 'human' skills in terms of communication and empathy.

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

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

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

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

Assessors should assess their own performance before, during and after an assessment using a three-tiered approach to quality management. This should include measuring how the older person experience can be improved. To achieve the delivery of quality assessment services, assessment organisations are required to comply with the guidance in the My-Aged Care Assessment Manual (the Assessment Manual) and use the guidance as set out in Section 5 below of this Aged Care Assessment Quality Framework.

5 Tiered approach to managing quality

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

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

Table 1: Three tiers of assessment quality management

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

Tier 1 involves quality checks at the time of assessment in accordance with the Assessment Manual including best practice principles and other relevant guidance provided by the Department. Assessors are responsible for checking assessments and decisions before they are finalised to ensure that the IAT, and support plan, have been completed as a quality record that supports and reflects discussions with the older person. For assessments undertaken by a clinical assessor, responsibility for quality sits initially with the assessor and then the assessment delegate approving recommendations. Appropriate quality at the first tier will reduce quality risk for, and reliance on, the second and third tiers.

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

- Key Performance Indicators (KPIs) as described in the contractual arrangements for the assessment organisation and in accordance with the defined reporting cycle.
- Aged Care Assessment self-audit tool to assess the quality of completed IATs and subsequent support plans, including recommendations. Refer to the Aged Care Assessment Self-Audit Tool User Guide for more information.
- Assessment Service Client Satisfaction Survey to assess the older person's satisfaction with regards to the service they received at the time of assessment.
- My Aged Care Data Reports. The Department will provide these to assessment organisations through agreed channels to better support quality assessments.
- The Department will engage with assessment organisations in the resolution of complaints to assist in the provision of continuous improvement of quality assessments.
- An assessment organisation's internal procedures and business processes. These will
 continue to operate and complement the other quality management tools. Examples
 of internal processes include team leaders regularly supervising assessments,
 ongoing coaching and development of staff, and appropriate record keeping and
 controls for handling sensitive consumer information (see Section 6 for further
 information).

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

The independent review would be supported by suitably qualified practitioners (e.g., clinically qualified where needed) supported by evidence provided by both the Department and assessment organisation as appropriate. The purpose of this activity is not to assess the decision itself but to validate that decisions have been clearly evidenced and align with information captured during the assessment. There would be consultation between the Department and the relevant assessment organisation/s to support a common understanding of processes, expectations and intended outcomes before activities start in this tier.

5.1 Measuring quality

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

In addition, as part of the obligation to support older people with a quality assessment experience, all outlets within the assessment organisations must meet the following for the overall KPI to be reported as met, as outlined in their contract with the Department:

- 90% of the IATs and support plans meet the agreed quality score of 85 or above as measured using the "Aged Care Assessment Self-Audit Tool". A minimum of 2% of IATs completed in the reporting period, per outlet, are to be sampled for this KPI. The sample, per outlet, must include younger people.
- 85% of older persons are satisfied or very satisfied with the overall quality of service delivery, as measured independently using the existing "Assessment Service - Client Satisfaction Survey". A minimum of 2% of older persons who have had an assessment completed in the reporting period, per outlet, are to be sampled for this KPI.

To be able to meet the 2% sample target, where feasible include > 2% of older persons in sample to accommodate lower than expected response rates.

Table 2: Measures and performance targets for a PERSONAL assessment

| Objective | Measures | Performance targets | Quality management tool/s |
|---|---|--|--|
| P1. The assessment is conducted as a respectful conversation with the older person. The conversation focuses on the older person's perspective, | P1.1 The older person feels at ease with and respected by the assessor, and that their strengths, goals, needs and preferences are understood and acknowledged. | P1.1.1 85% of older persons are satisfied with assessor's understanding of their circumstances and needs, and degree to which they felt at ease with the assessor. | Client Survey Q3, Q7 |
| strengths, goals, needs and preferences. | | P1.1.2 Number of complaints from older persons and carers about the assessment process. | Assessment organisation internal procedures My Aged Care complaints process |
| P2. The IAT and support plan accurately reflect the older person's perspective, a holistic view of their | P2.1 The support plan promotes the older person's perspective and a holistic view of their circumstances, and these are reflected in the goals. | P2.1.1 90% of older persons are satisfied that the support plan reflects their situation and goals (where identified). | KPIs 11 and 12 |
| circumstances (i.e., health, cultural, social, and personal, and how these may change) and their specific goals and aspirations. | personal, needs older persons are identified, and their issues identified and addressed to ensure an accurate and appropriate | P2.1.2 The IAT, support plan, referrals, and assessor notes link to the older persons goals for 100% of assessments. | Self-audit tool Q8, Q12 |
| | support plan. | P2.2.1 IAT and Support Plan review demonstrates 100% of vulnerable and special needs older persons are identified and a corresponding plan, linking support or short- term case management put in place. | Self-audit tool Q17 |

| Objective | Measures | Performance targets | Quality management tool/s |
|--|--|--|--------------------------------------|
| P3. The assessor clarifies, acknowledges, and respects the role of the carer, family or representative in the assessment process. | P3.1 The carer, family or representative is acknowledged by the assessor, the assessor discussed their role, and they were engaged in the assessment as the older person wished. | P3.1.1 100% of older persons are satisfied that their carer, family, or representative played an appropriate role in the assessment process and has an appropriate role to play in their care moving forward. | Client Survey Q5 |
| P4. Where the assessed person is a younger person, the delegate clearly demonstrates consideration of all relevant aged care legislation and guidelines. | P4.1 Uploaded on My Aged Care older person record completed: • Aged Care Assessment of Younger Person Check Form (evidencing availability and suitability of all age-appropriate options relevant to the older persons situation) and why they are not suitable, and • the letter of approval or non-approval to the older person, statement of reasons for the decision and evidence sections clearly articulate that the delegate has turned their mind to the Approval of Care Recipients Principles 2014 and the Principles and guidelines for a younger person's access to Commonwealth funded aged care services relevant to the type of care. | P4.1.1 100% of all younger people records that are self-audited have uploaded these well evidenced documents and notes: • Aged Care Assessment of Younger Person Check Form • Letter of approval or Letter of non-approval | Self-Audit tool Q19, 20 and 21 |

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

| Objectives | Measures | Performance targets | Quality Management tool/s |
|---|---|--|---|
| E1. The assessor supports the older person to make informed decisions about support or care options to meet their needs and achieve their goals by providing clear information including any available formal and informal services and supports in their region, and what the older person can do to assist themselves (if appropriate). | E1.1 The older person understands the information provided by the assessor (including any available formal and/or informal services and/or any self- assistance options). E1.2 The support plan demonstrates an appropriate mix of formal and informal services, supports and self- supports to promote wellness, wellbeing and reablement for the older person. | E1.1.1 85% of older persons are satisfied with their understanding of the information provided by the assessor (including any available services and supports). E1.2.1 100% support plans show a mix of formal and/or informal services and self supports appropriate to promoting the older person's wellness, wellbeing and/or reablement. | Client Survey Q9, Q10 Self-audit tool Q9 |
| E2. Triage and needs assessments are delivered in a timely manner appropriate to the older person's needs. | E2.1 Triage and the needs assessment is conducted within the timeframe for the older person's referral priority. | E2.1.1 90% of referrals received from the My Aged Care Assessor Portal are actioned by the contractor (either accepted or rejected) within 3 days. E 2.1.2 90% of accepted referrals lead to the completion of an Assessment within expected timeframes. | KPI 2, 3A and 3B |
| E3. The assessor understands and takes a holistic view of the older person's situation (i.e., health, cultural, social, and personal). The assessor acknowledges the older person as the decision-maker. | E3.1 Assessor skills and knowledge meet the older person's needs. E3.2 An interpreter or appropriate support person is engaged in the assessment when required. | E3.1.1 85% of older persons are satisfied with assessor's understanding of their circumstances and needs. E3.2.1 100% of older person records and IAT show interpreter or support person engaged (where appropriate) | Client Survey: Q7 Self-audit tool Q18 |

| Objectives | Measures | Performance targets | Quality Management tool/s |
|---|---|---|---------------------------------|
| E4. The assessor appropriately time- limits formal support services so more older persons benefit in the community. | E4.1 Referrals to formal support services are made on a time-limited basis. | E4.1.1 Records and IAT show 100% of referrals are made on a time limited basis. | Self-audit tool: Q14 |

Table 4: Measures and performance targets for a CONNECTED assessment

| Objectives | Measures | Performance targets | Quality Management tool/s |
|--|--|--|---|
| C1. Assessors accurately record and make available assessment information, so older persons do not have to provide the same information to multiple assessors. | C1.1 Older persons only need to tell their story once during the assessment process. | C1.1.1 85% of older persons are satisfied with the assessor's explanation of the purpose of the assessment. C1.1.2 90% of all IATs sampled contain complete and accurate information on the older person. C1.1.3 90% of older persons records recorded outside the My Aged Care Assessor Portal are transferred onto the My Aged Care Assessor Portal within 2 Business Days of an Assessment being undertaken. C1.1.4 0% of older persons records created by assessors are duplicated. | Client Survey Q2 Self-audit tool Q1-5 Assessment organisation internal procedures (where My Assessor App has not been used) My Aged Care Data Reports Departmental monitoring processes |
| C2. The older person understands the steps in the assessment and referral process (to services and supports) and the likely waiting times for each step. | C2.1 Older persons are aware of their assessment pathway | C2.1.1 Number of older person complaints about unexpected issues in the assessment process. C 2.1.2 85% of older persons are satisfied that the assessor clearly explained the process that would follow the assessment. C 2.1.3 85% of older persons know their assessment time and date. | Assessment organisation internal procedures My Aged Care complaints process Client Survey Q10 Client Survey Q1 |

Table 5: Measure and performance target for a SAFE assessment

| Objectives | Measures | Performance targets | Quality Management tool/s |
|---|---|--|---------------------------------|
| S1. The older person is provided with a physically, emotionally and culturally safe assessment. | S1.1 The older person felt that their unique experiences were respected by the assessor were factored into their assessment experience. | S1.1.1 100% of older persons felt that their assessment was delivered in a safe environment. | Client Survey Q4 |

6 Appropriate Handling of Personal Information

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

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

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

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

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

6.1 Notifiable Data Breaches

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

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

Attachment A: Aged Care Assessment Self-Audit Tool Questions

| Audit details | | | | |
|---|------------------------------|-----------------|--|--|
| Auditor | | Date of audit | | |
| Assessor | | ACID | | |
| Date of assessment | | Assessment Type | | |
| Older person record and IAT | | Response | | |
| Wallet check completed? | | Yes / No | | |
| 2. No slang or jargon? | | Yes / No | | |
| 3. Understandable grammar and sp | pelling? | Yes / No | | |
| 4. Language tactful and objective? | | Yes / No | | |
| Thorough descriptions of the older issues, and strengths? | er person's situation, their | Yes / No | | |
| 6. For clinical assessment, if validated assessment tools were used, were they appropriate for the situation and were the results included in the support plan? | | | | |
| 7. If clinical attendance was require accordance with your organisation framework and standard operating effective goals and needs being so | Yes / No / N/A | | | |
| Comments | | | | |
| Goals and Concerns | | | | |
| 8. IAT and Support Plan flow togeth | ner as a narrative? | Yes / No | | |
| 9. Concerns and goals clear, action | nable, and realistic? | Yes / No | | |
| 10. Concerns and goals written from perspective? | n the older person's | Yes / No | | |
| 11. Older person's strengths and mogoals? | Yes / No | | | |
| Comments | | | | |
| Recommendations and referrals | | | | |
| 12. Recommendations relate to the | older person's goals and | Yes / No | | |

| needs? | |
|--|----------------|
| 13. CHSP Referrals have an end date or review date, or a rationale for ongoing services provided? | Yes / No / N/A |
| 14. Non funded services and informal supports considered? | Yes / No / N/A |
| 15. If clinical assessment, recommendations for Act based services are appropriately evidenced and aligned to a older person's immediate care needs? | Yes / No / N/A |
| 16. If clinical assessment, if a high priority recommendation for a home care package was made, was a thorough justification provided? | Yes / No / N/A |
| Comments: | |

| Vulnerable and special needs | |
|---|----------------|
| 17. If the older person is vulnerable or has special needs, was linking support, short term case management or an appropriate plan put in place? | Yes / No / N/A |
| 18. Interpreter or support person engaged throughout the assessment? | Yes / No / N/A |
| Comments | |
| Aged care assessment of a younger person | Response |
| 19. If clinical assessment, does the older person classify as a younger person? | Yes / No |
| If 'Yes' the following questions apply. | |
| I acknowledge that I have reviewed the following, evident by the responses below: | |
| 20. If clinical assessment, accurate completion of the Aged Care Assessment of Younger Person Check Form. | Yes / No |
| Comments | |
| 21. If clinical assessment, Approval or Non-Approval letter statement of reasons and evidence clearly justifies the decision for the younger person's aged care approval for that type of care. | Yes / No |
| Comments | |

Attachment B: Assessment Service – Client Satisfaction Survey

| Who is completing this survey? | | | | | | |
|--|-------|------------------|-----------------|----------------------|--|--|
| Client | Carer | Immediate Family | Friend/Relative | Other support person | | |
| | | | | | | |
| The below questions are about your assessment experience and will assist us with improving our service and the experience of other older people who may require aged care assessment services in the future. | | | | | | |
| The survey will take between 5 -10 minutes to complete and you have an option at the end to add more comments. All responses are confidential and no information we collect can be used to identify you. | | | | | | |

| of satist | indicate your level faction with each elow statements | Very Satisfied | Satisfied | Neither Satisfied or Dissatisfied | Dissatisfied | Very Dissatisfied | N/A |
|-----------|--|-------------------|-----------|---|--------------|----------------------|-----|
| 1. | The assessor arrived within the agreed time for the appointment | | | | | | |
| 2. | The assessor explained the purpose of the assessment in a clear way that I could understand | | | | | | |
| 3. | I was made to feel at ease during the assessment | | | | | | |
| 4. | The assessor provided a safe assessment experience acknowledging and respecting my unique experiences. | | | | | | |

| 5. | My family, carer or other support person was able to be involved as much as I wanted them to be | | | | | | |
|----------------------------|---|------|-----------|---------|--------------|------|-----|
| Please indicate your level | | Very | Satisfied | Neither | Dissatisfied | Very | N/A |

| of satist | indicate your level faction with each elow statements | Very Satisfied | Satisfied | Neither Satisfied or Dissatisfied | Dissatisfied | Very Dissatisfied | N/A |
|-----------|---|-------------------|-----------|---|--------------|----------------------|-----|
| 6. | I was listened to during the assessment | | | | | | |
| 7. | The assessor understood my concerns and goals (if any) | | | | | | |
| 8. | My values and beliefs were respected during the assessment | | | | | | |
| 9. | The information the assessor gave me was easy to understand. | | | | | | |
| 10. | The assessor clearly explained what would happen after the assessment | | | | | | |
| 11. | Overall, how satisfied were you with your experience on the day? | | | | | | |

| Please use the following box to include any additional comments about your assessment experience. | | | | | | | | |
|---|---|-------------------------------------|---|-------------------|--|--|--|--|
| Optional | | | | | | | | |
| Do you identify as: | | | | | | | | |
| A Veteran | Aboriginal and/or Torres Strait Islander | Non-English- speaking background | Lesbian, Gay, Bisexual, Transgender and/or Intersex | None of the above | | | | |
| | | | | | | | | |