

Assessor Portal User Guide 10 - Clinical Assessment Delegate Processes

This user guide is to assist Clinical Assessment Delegates in performing a range of functions in the My Aged Care assessor portal (assessor portal) that relate to delegate decisions. This includes viewing and actioning delegate decisions, as well as requesting corrections to care approval decisions and care extensions.

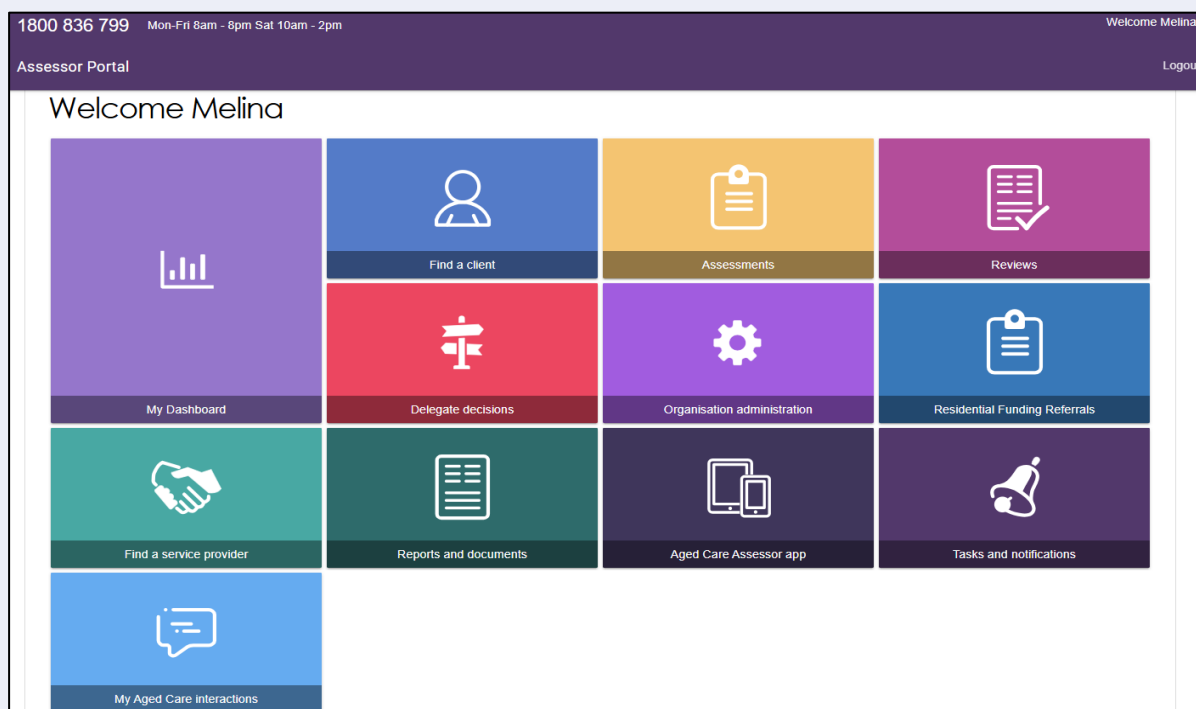
Clinical Assessment Delegates have been introduced ahead of the changes under 1 July 2025, where Non-Clinical Assessment Delegates will be required to approve the provision of entry-level aged care services under the Aged Care Act 2024. Note that Non-Clinical Assessment Delegates do not have any system functionality prior to 1 July 2025.

This user guide contains the following topics:

The Clinical Assessment Delegate home screen	2
Assessment history	2
Viewing an item for decision	3
Assigning an item for decision	5
Reassigning an item for decision	7
Recording a delegate decision.....	8
Return to a clinical assessor	9
No Decision	10
Agreeing with recommendations.....	10
Disagreeing with recommendations.....	12
Editing a recommendation	15
Adding a care type	17
Changing a decision.....	18
Finalising your decision.....	19
Printing the approval/non-approval letter.....	22
Requesting correction to care approval decision.....	24
Requesting and Approving Care Extensions	32

The Clinical Assessment Delegate home screen

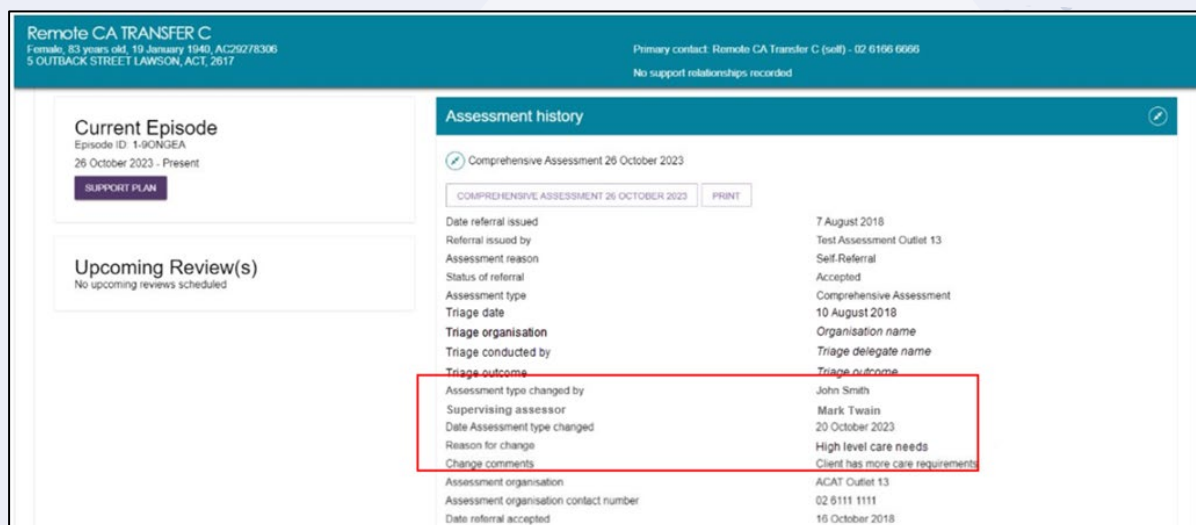
If you are both a clinical aged care needs assessor (clinical assessor) and a Clinical Assessment Delegate in the Assessor portal, your home screen will look like the following.



For more information regarding applying to be a Clinical Assessment Delegate please refer to the [My Aged Care Assessor Portal User Guide 12 – Managing Delegate Roles](#).

Assessment history

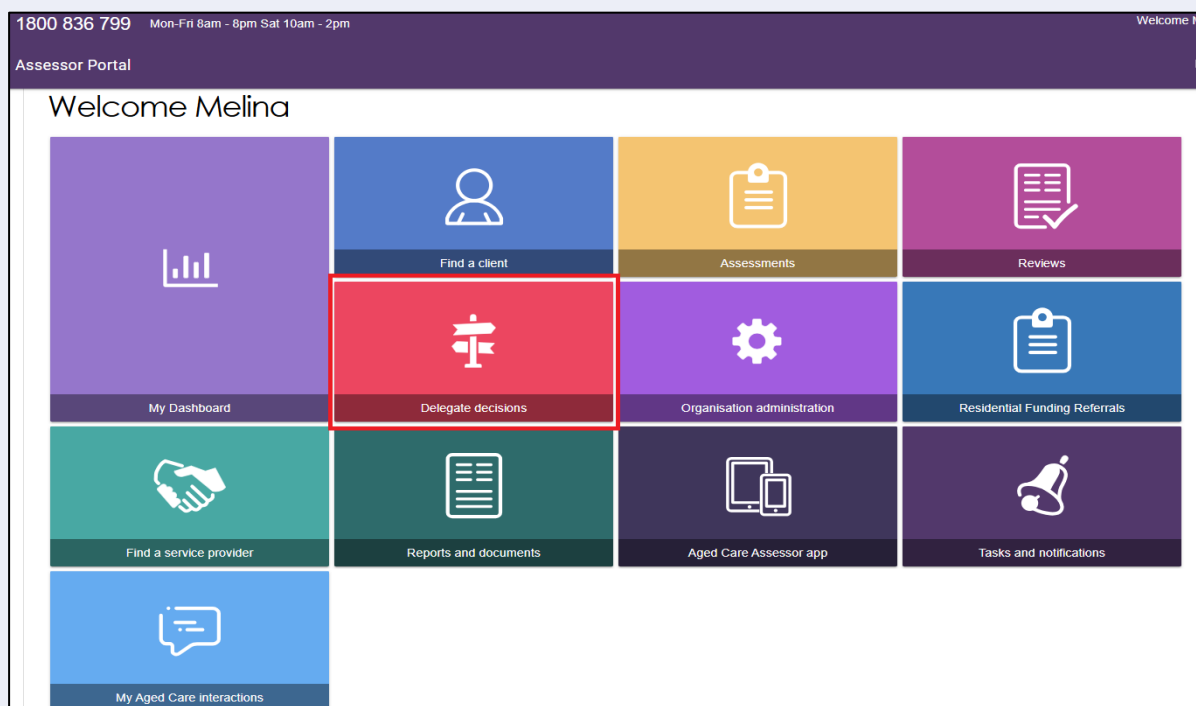
To assist Clinical Assessment Delegates with understanding and actioning delegate approvals, Clinical Assessment Delegates can view a client's assessment history via the **Plan** tab of the client record. Within the **Assessment history** section it will outline key information such as if the assessment has been completed by a non-clinical needs assessor who then converted the assessment from a home support assessment to a comprehensive assessment, as well as the details of the clinical supervising assessor.



Viewing an item for decision

As a Clinical Assessment Delegate, , follow the steps below to assign items for decision.

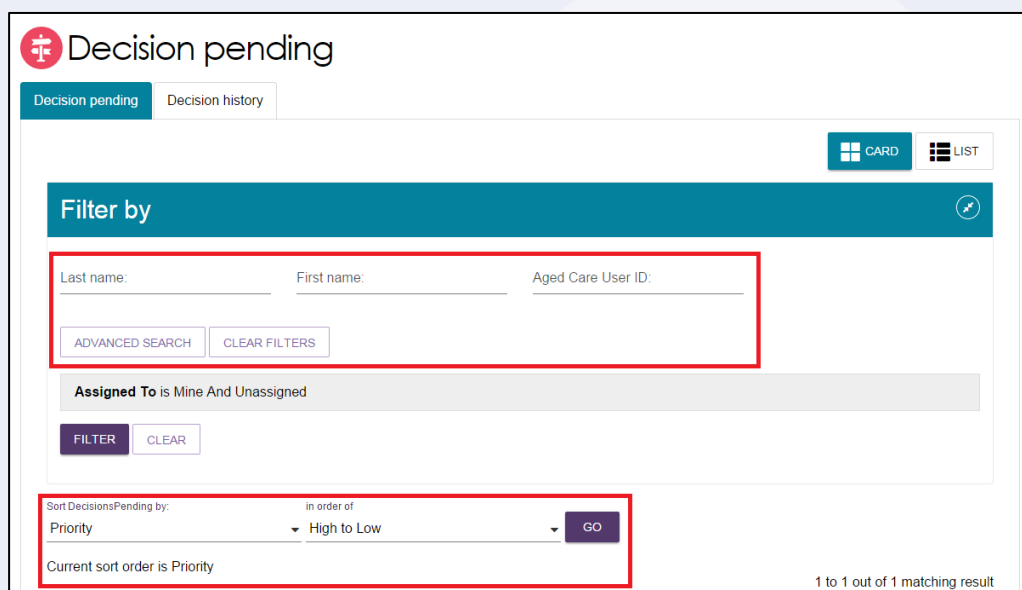
1. Select **Delegate decisions** from the homepage.



2. The queue containing assessments awaiting Clinical Assessment Delegate decision will be displayed in the **Decision pending** tab.

You can use the filter options (First Name, Last Name, and Aged Care User ID) to refine your results. To show additional filter options select **Advanced Search**.

You can also use the sort function to sort by assessment status, as well as other categories such as last name, first name, Aged Care ID, date submitted, priority, assessor and delegate names and due date. The order in which the results are displayed can also be set.



3. The due date against each assessment waiting for delegate decision will be visible to the Clinical Assessment Delegate in both the Card and List View. The pending decisions can be sorted and filtered by date due.

Decision pending

Currently viewing Aussie Aged Care

Decision pending

Decision history

CARD

LIST

Filter by

Last nameFirst nameAged Care user ID

MODIFY FILTER OPTIONS

CLEAR FILTERS

Assessment status is Awaiting Delegate Decision and Assigned to is Mine & unassigned

FILTER

CLEAR

1 to 16 out of 16 matching results

SHOW MORE UNASSIGNED

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
PASS ONE DELEGATE DECISION	Shan	AC14765226	UAT Gia two		Awaiting Delegate Decision	03/12/2022	High
AARKNOV	AANOVTWENTYNINE	AC50838824	ASSESSORUSER06 AssessorUser06		Awaiting Delegate Decision	01/12/2022	High
RESPITEELAINA	MVWaylon	AC72294754	ASSESSORUSER25 AssessorUser25		Awaiting Delegate Decision	21/08/2022	High

4. On this page is also the **Decision history** tab, which will display decisions that you have made previously.

Decision history

Currently viewing AGED CARE Outlet

Decision pending

Decision history

CARD

LIST

Filter by

Last nameFirst nameAged Care user ID

ADVANCED SEARCH

CLEAR FILTERS

Date submitted is after 24 September 2023

FILTER

CLEAR

Sort DecisionsPending by:

Date Submitted

In order of

Latest to Earliest

GO

Current sort order is Date Submitted

1 to 8 out of 8 matching results

Damien HIPWOOD

Assessor: GREEN Africa
Delegate: GREEN Africa
Aged care user ID: AC68546647
Date submitted: 23 September 2024
Assessment type: Comprehensive

Hayley SHARPE

Assessor: GREEN Africa
Delegate: GREEN Africa
Aged care user ID: AC48848568
Date submitted: 23 September 2024
Assessment type: Comprehensive

Aaron SMITH

Assessor: SHELL Orange
Delegate: GREEN Africa
Aged care user ID: AC69149045
Date submitted: 23 September 2024
Assessment type: Comprehensive



5. For both the **Decision Pending** and the **Decision History** tabs, you are able to toggle between the card view and the list view (shown below) to display the clients.

1800 836 799 Mon-Fri 8am - 8pm Sat 10am - 2pm
Assessor Portal

Welcome, Tina from Aged Care Assessment Service

Delegate decisions Find a client Find a service provider Reports and documents My Aged Care interactions Tasks and notifications Logout

Home | Delegate decisions

Decision pending

You have report(s) that are ready to be downloaded. To download, go to [Reports page](#).

Decision pending Decision history

CARD LIST

Filter by

Last name: herondale First name: Aged Care User ID:

ADVANCED SEARCH CLEAR FILTERS

Assigned To is Mine And Unassigned and Last name is herondale

FILTER CLEAR

1 to 1 out of 1 matching result

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
Herondale	Alexander	AC32063414	HERRERA Steve		Awaiting Delegate Decision	27/09/2018	Low

Assigning an item for decision

To assign a client to yourself:

1. If using the card view, select the expand arrows on the Client card to display a summary of the client's information in a pop-up. Select **ASSIGN** to allocate that item to yourself or to another Clinical Assessment Delegate within the team.

Assigned To is Mine And Unassigned and Last name is herondale

FILTER CLEAR

Sort Decisions Pending by: Priority In order of: High to Low

Current sort order is Priority

Unassigned

Alexander HERONDALE

Assessor: Steve Herrera
Aged care user ID: AC32063414
Delegate Decision due by: 27 September 2018

Alexander HERONDALE

Comprehensive Assessment Referred from Aged Care Assessment Service on 25 September 2018
Accepted on 25 September 2018

Assessor: Steve Herrera
Delegate
Date submitted: 25 September 2018

Delegate Decision due by: 27 September 2018
Recommended care: Home Care Package Level 4

Assessment details
Assessment type: Comprehensive Assessment
Assessment reason: Self-Referral
Assessment setting: Non-Hospital

VIEW SUPPORT PLAN VIEW FULL CLIENT RECORD VIEW PDF OF CLIENT RECORD

ASSIGN

2. If using the list view, select the expand arrows for the client to display a summary of the client's information in an expanded view. Select **ASSIGN** to allocate that item to yourself or to another Clinical Assessment Delegate within the team.

1800 836 799 Mon-Fri 8am - 8pm Sat 10am - 2pm
Assessor Portal

Welcome, Tina from Aged Care Assessment Service

Delegate decisions Find a client Find a service provider Reports and documents My Aged Care interactions Tasks and notifications Logout

Home | Delegate decisions

Decision pending

You have report(s) that are ready to be downloaded. To download, go to [Reports page](#).

Decision pending Decision history

CARD LIST

Filter by

Last name: herondale First name: Aged Care User ID:

ADVANCED SEARCH CLEAR FILTERS

Assigned To is Mine And Unassigned and Last name is herondale

FILTER CLEAR

1 to 1 out of 1 matching result

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
Herondale	Alexander	AC32063414	HERRERA Steve		Awaiting Delegate Decision	27/09/2018	Low



Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
Herondale	Alexander	AC32063414	HERRERA Steve		Awaiting Delegate Decision	27/09/2018	Low

Comprehensive Assessment

Assessor: Steve Herrera
 Delegate:
 Date submitted: 25 September 2018

Assessment details
 Assessment type: Comprehensive Assessment
 Assessment reason: Self-Referral
 Assessment setting: Non-Hospital

Referred from Aged Care Assessment Service on 25 September 2018
 Accepted on 25 September 2018
 Delegate Decision due by: 27 September 2018
 Recommended care: Home Care Package Level 4

VIEW SUPPORT PLAN VIEW FULL CLIENT RECORD VIEW PDF OF CLIENT RECORD

ASSIGN

- In the pop-up box, select an Clinical Assessment Delegate, and select **ASSIGN**.

Assign delegate decision for Alexander Herondale

Assign to

☒ Me

☐ Bella BLUETT

☐ Aaliyah PRESTON

ASSIGN CANCEL

- A confirmation message will appear. The client will appear in the queue of the Clinical Assessment Delegate they were assigned to.

My decisions

Alexander
HERONDALE

Assessor: Steve Herrera
 Delegate: Tua Bergqvist
 Aged care user ID: AC32063414
 Delegate Decision due by: 27 September 2018

Due in 2 days

Low

✓ Successfully assigned to Delegate.

Reassigning an item for decision

To reassign an item for decision, follow the steps below.

1. Select the expand arrow on the **Client card** to display a summary of the client's information. Select **REASSIGN**.

The screenshot shows a client card for Alexander Herondale. The card is titled 'Alexander HERONDALE' and includes a close button (X). It displays assessment details: Comprehensive Assessment, Referred from Aged Care Assessment Service on 25 September 2018, Accepted on 25 September 2018, Delegate Decision due by: 27 September 2018, Recommended care: Home Care Package Level 4. Assessment details include: Assessment type: Comprehensive Assessment, Assessment reason: Self-Referral, Assessment setting: Non-Hospital. At the bottom, there are buttons: VIEW SUPPORT PLAN, VIEW FULL CLIENT RECORD, VIEW PDF OF CLIENT RECORD, START DECISION PROCESS, and REASSIGN (highlighted with a red box).

If using the list view, select the expand arrow next to the client's name to see more information, and select **REASSIGN**.

The screenshot shows a list view of client cards. The first card is for Alexander Herondale. It includes a table with columns: Last name, First name, Aged care user ID, Assessor full name, Delegate full name, Assessment status, Date due, and Priority. The card also displays assessment details and a 'REASSIGN' button highlighted with a red box.

2. Nominate another Clinical Assessment Delegate to assign the item to, or select the option **Place back in delegate queue** if you want to un-assign it. Select **REASSIGN**.

The screenshot shows a dialog titled 'Re-assign delegate decision for Alexander Herondale'. It states: 'Delegate decision currently assigned to Cornelia GREENHAND. Re-assign to'. Below this, there are three radio button options: Bella BLUETT, Aaliyah PRESTON, and Place back in delegate queue. At the bottom right, there are two buttons: RE-ASSIGN (highlighted with a red box) and CANCEL.

You will receive a confirmation message that you have either re-assigned or un-assigned the queue item.

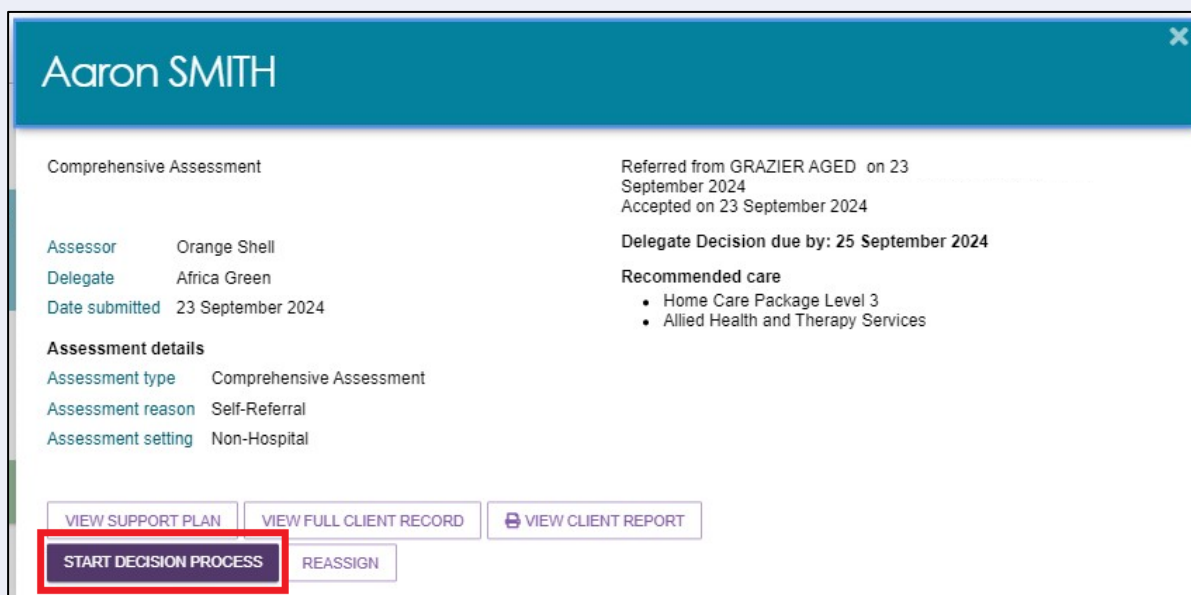
The screenshot shows a green confirmation message with a checkmark icon and the text: 'Delegate successfully unassigned.'

Recording a delegate decision

Prior to making any delegate decisions you must view the entire client record, assessment and support plan and attached information to ensure you have all the necessary evidence to support your decisions. The assessment summary prepared by the clinical assessor can be accessed through the **Identified needs** tab of the support plan.

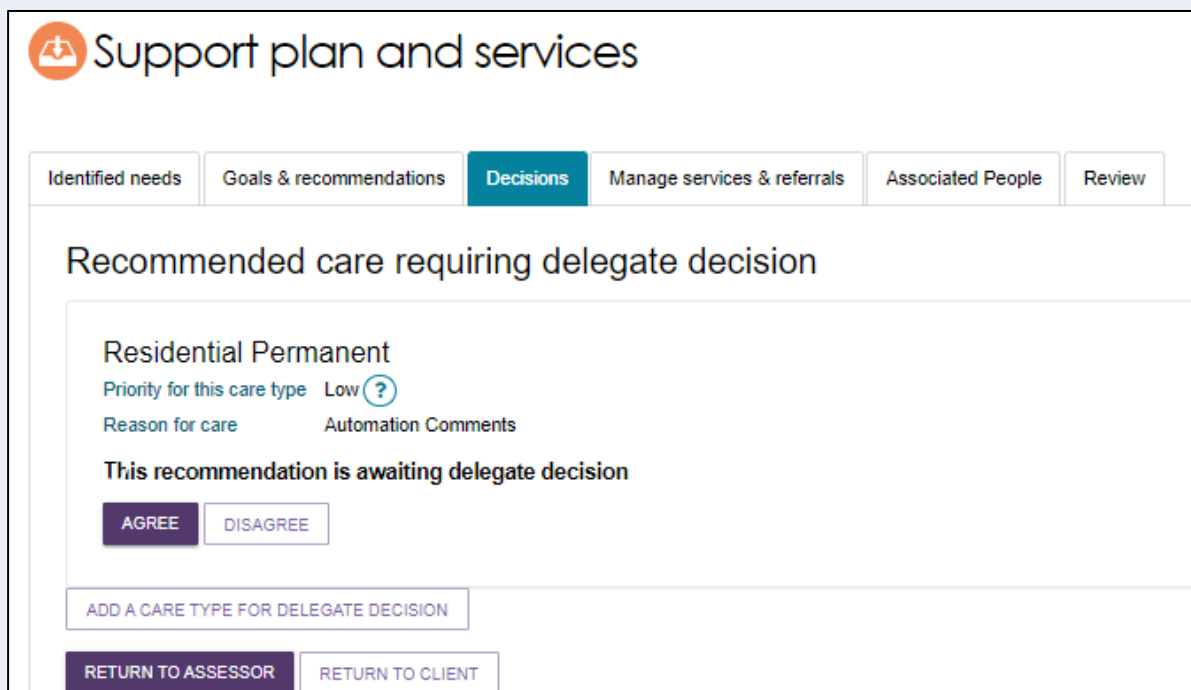
To record your delegate decision, follow the steps below.

1. From the **Decision pending** tab, select the expand arrow on the Client card to display a summary of the client's information. Select **START DECISION PROCESS**. If using list view, this option is available from the expanded client information section. Select **START DECISION PROCESS** in the pop-up box.



The screenshot shows a client information pop-up box for Aaron SMITH. The box has a teal header with the client's name and a close button. Below the header, there are two columns of information. The left column contains 'Comprehensive Assessment' and 'Assessor: Orange Shell'. The right column contains 'Referred from GRAZIER AGED on 23 September 2024' and 'Accepted on 23 September 2024'. Below this, there is a 'Delegate Decision due by: 25 September 2024' and 'Recommended care' section with two bullet points: 'Home Care Package Level 3' and 'Allied Health and Therapy Services'. At the bottom, there are four buttons: 'VIEW SUPPORT PLAN', 'VIEW FULL CLIENT RECORD', 'VIEW CLIENT REPORT', and 'START DECISION PROCESS' (which is highlighted with a red box). There is also a 'REASSIGN' button.

2. You will be taken to the **Decisions** tab on the client's support plan. The recommendations made by the clinical assessor will be displayed for your review.



The screenshot shows the 'Support plan and services' page with the 'Decisions' tab selected. The page has a teal header with the title 'Support plan and services' and a logo. Below the header, there are six tabs: 'Identified needs', 'Goals & recommendations', 'Decisions', 'Manage services & referrals', 'Associated People', and 'Review'. The 'Decisions' tab is active. Below the tabs, there is a section titled 'Recommended care requiring delegate decision'. Inside this section, there is a card for 'Residential Permanent' with 'Priority for this care type: Low' and 'Reason for care: Automation Comments'. Below the card, there is a message 'This recommendation is awaiting delegate decision' and two buttons: 'AGREE' and 'DISAGREE'. At the bottom of the card, there is a button 'ADD A CARE TYPE FOR DELEGATE DECISION'. Below the card, there are two buttons: 'RETURN TO ASSESSOR' and 'RETURN TO CLIENT'.

For **High** priority Home Care Package recommendations, you should review the reasoning provided by the clinical assessor and make an independent determination as to whether the priority given for the recommendation is appropriate.

As an Clinical Assessment Delegate, you can:

- Agree with a recommendation
- Disagree with a recommendation
- Edit a recommendation (edit and/or add Emergency Care Indicator and dates, priority and time-limitation of approval etc)
- Add a care type for Delegate decision (these will be automatically agreed to)
- Remove a care type
- Change your decision prior to finalisation (if you need to change from agree to disagreed, or disagreed to agreed)
- Select to be notified of any home care correspondence for a client that you have approved for home care and may need monitoring going forward (note that only one person from your outlet can receive these notifications).

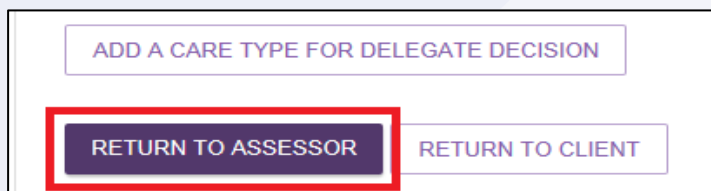
Return to a clinical assessor

There are circumstances in which you may wish to send the client back to the clinical assessor . For example:

- more evidence is required,
- the care level is not appropriate or sufficient,
- and/or amendments (e.g. to correct spelling errors) need to be made.

By selecting **RETURN TO ASSESSOR**, the original clinical assessor is able to make necessary changes before re-submitting for decision.

Note that you only have the option to return the assessment to the clinical assessor prior to agreeing or disagreeing to any recommendations. If you select **RETURN TO CLIENT** you will navigate back to the client's record.



ADD A CARE TYPE FOR DELEGATE DECISION

RETURN TO ASSESSOR RETURN TO CLIENT

No Decision

For the following scenario, Clinical Assessment Delegates will not need to make decisions for clients where **No Care Approval** is recommended.

An clinical assessor can recommend and match and refer a client for Commonwealth Home Support Programme (CHSP) services and finalise the support plan without needing to submit to the Delegate for decision if the client:

- Withdraws their application for care but is eligible for CHSP services; or
- Does not wish to apply for care under the Act but would like to receive CHSP services.

Agreeing with recommendations

1. To agree with the clinical assessor's recommendation, select **AGREE** below the recommended care type. You will need to repeat this process for each care type where multiple care types recommended.

Home | Find a client | Rico RESPITE (Vita) | Rico RESPITE (Vita) support plan and services

Mr Rico RESPITE (Vita)
Male, 80 years old, 1 September 1942, AC79490637
15 LIMBURG WAY GREENWAY, ACT, 2900

Primary contact: Rico Respite (self) - 61 2987 1234
No support relationships recorded

Support plan and services

PRINT COPY OF SUPPORT PLAN

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

Recommended care requiring delegate decision

Residential Permanent

Priority for this care type Low

Reason for care Automation Comments

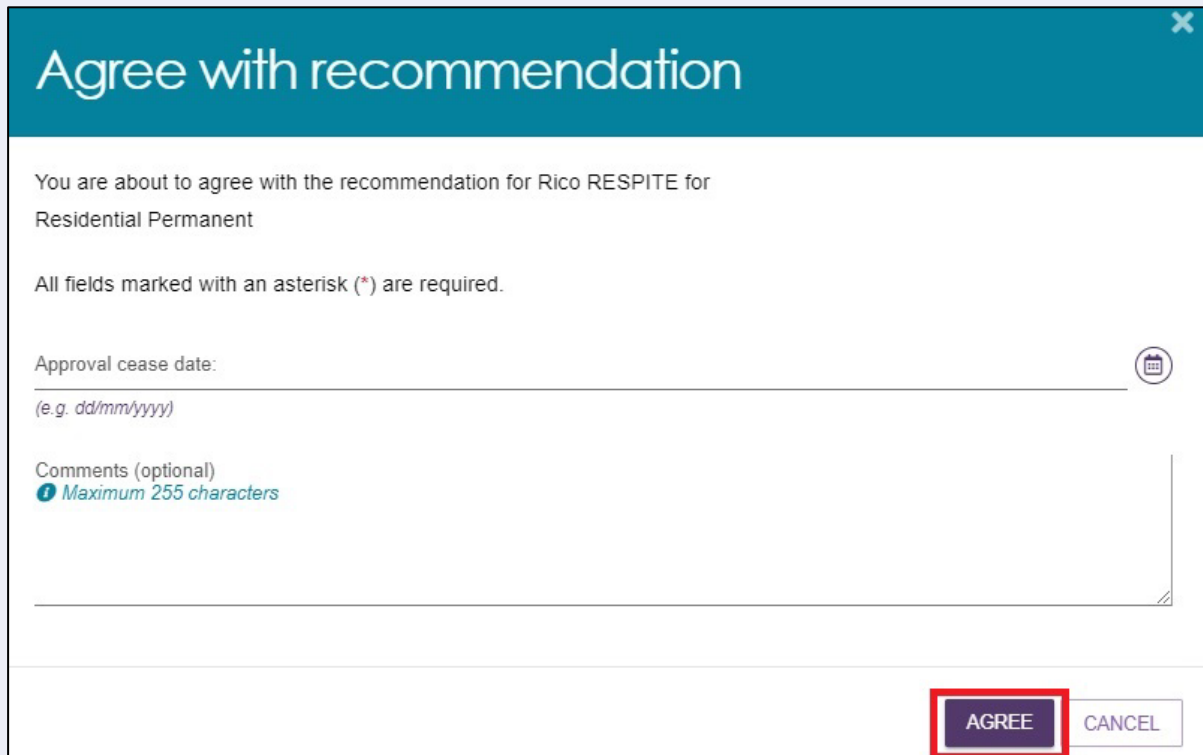
This recommendation is awaiting delegate decision

AGREE DISAGREE

ADD A CARE TYPE FOR DELEGATE DECISION

RETURN TO ASSESSOR RETURN TO CLIENT

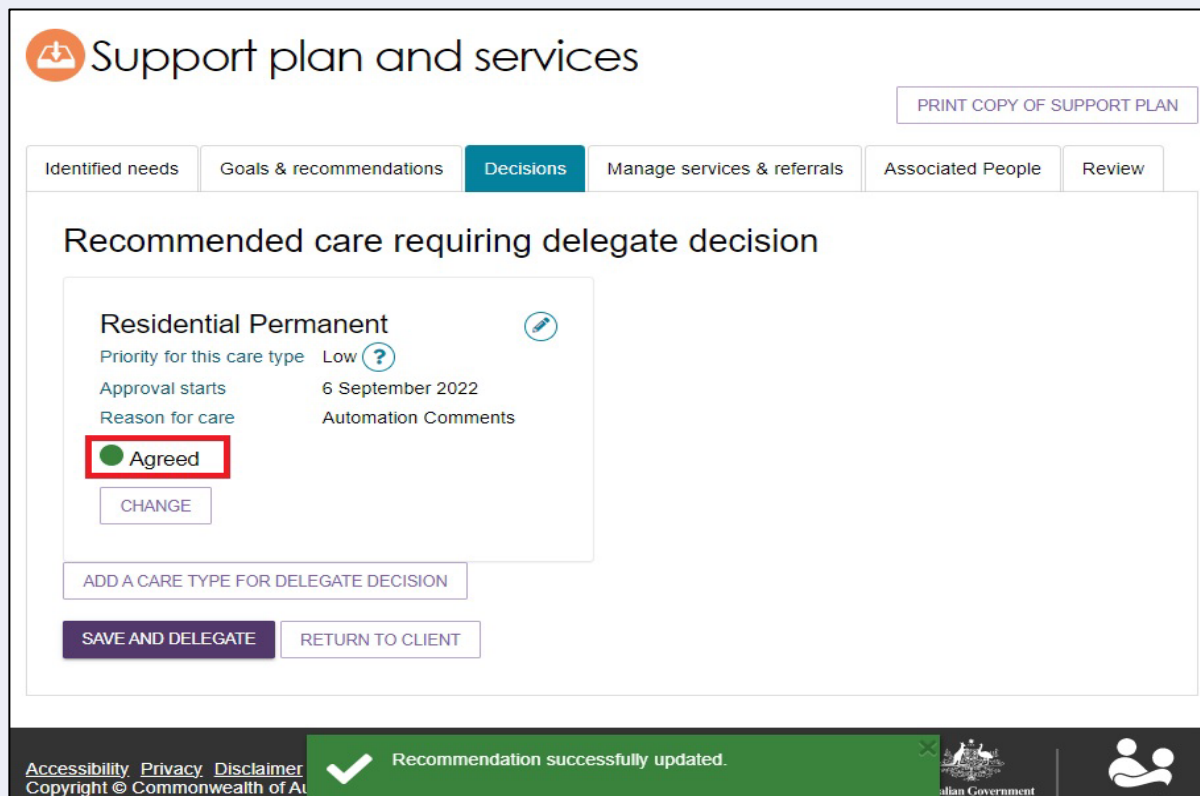
2. You will be asked to confirm that you agree with the recommendation in a pop-up box. If required, you can enter an approval cease date, and add comments. Select **AGREE**.



The screenshot shows a pop-up window titled "Agree with recommendation" with a close button (X) in the top right corner. The main text reads: "You are about to agree with the recommendation for Rico RESPITE for Residential Permanent". Below this, a note states: "All fields marked with an asterisk (*) are required." There are two input fields: "Approval cease date:" with a calendar icon and a placeholder "(e.g. dd/mm/yyyy)", and "Comments (optional)" with a blue information icon and the text "Maximum 255 characters". At the bottom right, there are two buttons: "AGREE" (highlighted with a red box) and "CANCEL".

3. If required, you are now able to set an **approval cease date for Permanent Residential Care** through the assessor portal.


A confirmation message will display, and the status of the recommendation will display as **Agreed**.



The screenshot shows the "Support plan and services" page. The "Decisions" tab is selected, showing a card for "Residential Permanent" care. The card displays "Priority for this care type" as "Low" with a question mark icon, "Approval starts" as "6 September 2022", and "Reason for care" as "Automation Comments". A green circle with the word "Agreed" is highlighted with a red box. Below the card are buttons for "CHANGE", "ADD A CARE TYPE FOR DELEGATE DECISION", "SAVE AND DELEGATE", and "RETURN TO CLIENT". At the top right, there is a button for "PRINT COPY OF SUPPORT PLAN". At the bottom, a green banner displays a checkmark and the message "Recommendation successfully updated." along with accessibility links, copyright information, and the Australian Government logo.

4. A client is only eligible to receive **Short-Term Restorative Care (STRC)** under certain conditions. When reviewing an STRC approval for a client who does not meet the eligibility criteria a warning message will appear asking if you wish to agree with the recommendation.

Agree with recommendation



Please ensure this client is eligible for STRC as:

- the client is currently receiving Residential Permanent Care

Do you wish to proceed?

You are about to agree with the recommendation for Rebecca JAMES for Short-Term Restorative Care

- In Home/Community
- In Home/Community and Residential Facility
- In Residential Facility

All fields marked with an asterisk (*) are required.

Comments (optional)
Maximum 255 characters

0 / 255

AGREECANCEL

For more information about STRC, refer to the [Short-Term Restorative Care Programme Manual](#) and the [My Aged Care – Assessor Portal User Guide 14 – Short-Term Restorative Care](#).

Disagreeing with recommendations

Disagreeing with a recommendation will result in a non-approval of that recommended care type.

If a recommendation is mistakenly added by the clinical assessor, the Clinical Assessment Delegate can:

- 1) disagree with the clinical assessor's recommendation, then
- 2) add their own recommendation.

The disagreed recommendation remains visible at the client's **Decisions** tab. It can be edited but not deleted.

Recommended care requiring delegate decision

Short-Term Restorative Care

- In Home/Community
- In Home/Community and Residential Facility
- In Residential Facility

Priority for this care type: High

Reason for care: Comment goes here

Agreed

CHANGE

Residential Respite Care

Priority for this care type: Low

Reason for care: Automation Comments

Declaration: Yes

Reason DEMMI not completed: Automation Comments

Delegate comment: Disagree

Disagreed

CHANGE


Follow the steps below to disagree with a recommendation.

1. Select **DISAGREE** below the recommended care type. You will need to repeat this process for each care type that you disagree with.

Mr Robertson N RESPITE (Robert)

Male, 79 years old, 19 April 1943, AC70460381
15 LIMBURG WAY GREENWAY, ACT, 2900

Primary contact: Robertson Respite (self) - 61 2987 1234
No support relationships recorded

Support plan and services

PRINT COPY OF SUPPORT PLAN

Identified needs

Goals & recommendations

Decisions

Manage services & referrals

Associated People

Review

Recommended care requiring delegate decision

Residential Permanent

Priority for this care type Low ?

Reason for care Automation Comments

This recommendation is awaiting delegate decision

AGREE

DISAGREE

ADD A CARE TYPE FOR DELEGATE DECISION

RETURN TO ASSESSOR

RETURN TO CLIENT

2. You will need to provide a comment about your reason for disagreeing with the recommendation, then select **DISAGREE**.

Disagree with recommendation

You are about to disagree with the recommendation for Robertson RESPITE for Residential Permanent

All fields marked with an asterisk (*) are required.

Comments or reason for disagreement *
Wrongly assigned by assessor

DISAGREE

CANCEL

3. A confirmation message will display, and the status of the recommendation will change to **Disagreed**.

Support plan and services

PRINT COPY OF SUPPORT PLAN

Identified needs Goals & recommendations **Decisions** Manage services & referrals

Associated People Review

Recommended care requiring delegate decision

Residential Permanent

Priority for this care type Low ?

Reason for care Automation Comments

Delegate comment Wrongly assigned by assessor

Disagreed

CHANGE

ADD A CARE TYPE FOR DELEGATE DECISION

SAVE AND DELEGATE RETURN TO CLIENT

Recommendation successfully updated.

4. If you need to change your decision, you can select **CHANGE**. This option will only be available prior to saving and completing the approval process by selecting **Save and Delegate**. See the [Changing a Decision](#) section for more details.

Change decision

You are about to change the recommendation from disagreed to **agreed** for Robertson RESPITE for Residential Permanent

All fields marked with an asterisk (*) are required.

Approval cease date:

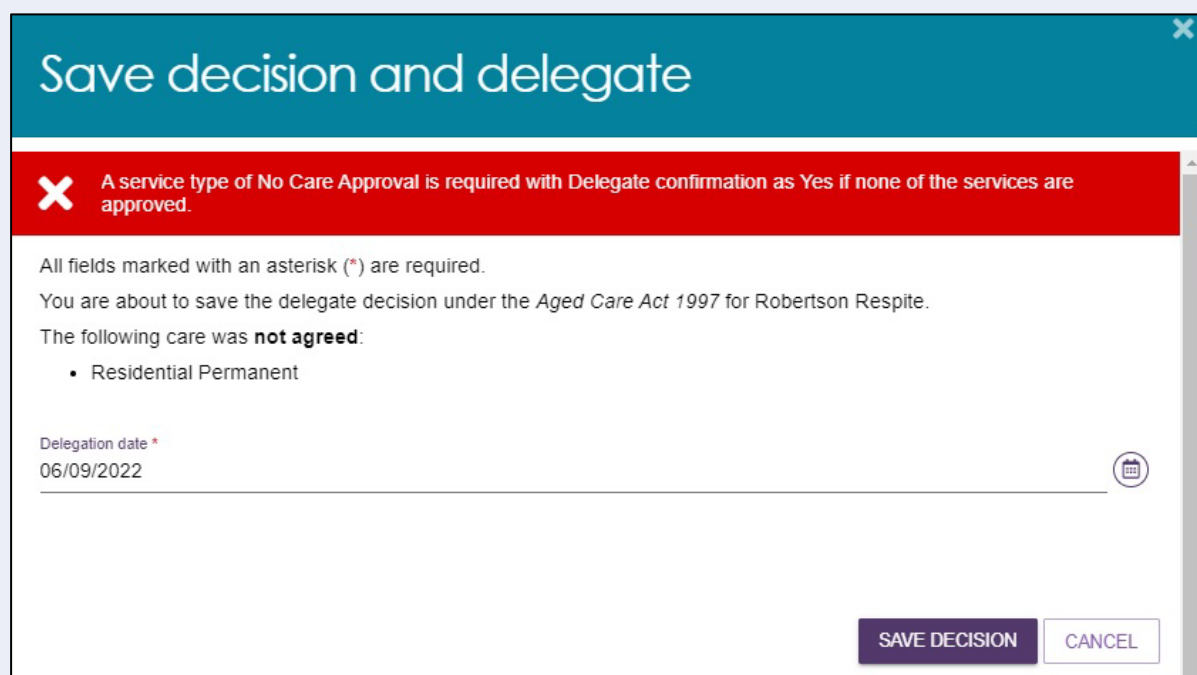
(e.g. dd/mm/yyyy)

Comments (optional)
Maximum 255 characters

CHANGE CANCEL

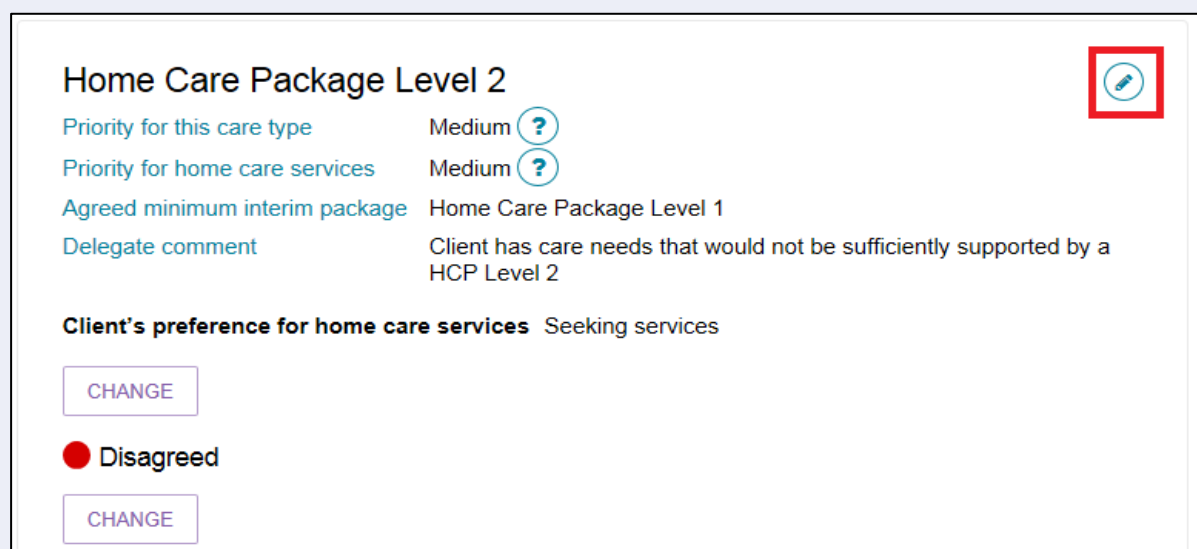
5. If you disagree with all recommendations and you do not add any new approval decisions, you may be prompted to select “No Care Approval” as a service type during the **Save Decision and Delegate** pop-up in order to complete the delegate decision.

Go to [Adding a Care Type](#) for more information.



Editing a recommendation

1. To edit a care type or level of care recommended by a clinical assessor, select the **Edit** icon.



- The care type information will be displayed and you will be able to make any changes required. Select **SAVE TO PLAN** to save the changes.

Edit a care type

Requires Approval
All fields marked with an asterisk (*) are required.

Which care type applies? *
Home Care Package Level 2

If time-limited, when does the approval stop (optional)
(e.g. dd/mm/yyyy)

What is the priority of this care type? *
Medium

The priority for home care service is Medium

Is this emergency care?
☐ Yes ☒ No

When did the emergency care start? *
(e.g. dd/mm/yyyy)

SAVE TO PLAN CANCEL

- You can also change the care type/ level through the edit functionality.

To change a Home Care Package level, you will need to choose a reason for the change. When changing the priority to **High**, you will also need to choose a reason from the options that appear on why the client requires a high priority for home care and provide comments below.

Edit a care type

Requires Approval
All fields marked with an asterisk (*) are required.

Which care type applies? *
Home Care Package Level 3

If time-limited, when does the approval stop (optional)
(e.g. dd/mm/yyyy)

What is the priority of this care type? *
High

The priority for home care service is Medium

☐ Carer is in crisis or no longer able to provide care due to
☐ Personal safety at risk
☐ Immediate risk of the client entering residential care due to

What is the reason for the change in priority? *

Reason or comments for the change of priority: *
Maximum 255 characters

SAVE TO PLAN CANCEL

Adding a care type

Clinical Assessment Delegates can add another care type for delegate decision for the client, if required.

1. Select **ADD A CARE TYPE FOR DELEGATE DECISION**.

Mr Robertson N RESPITE (Robert)
Male, 79 years old, 19 April 1943, AC70460381
15 LIMBURG WAY GREENWAY, ACT, 2900
Primary contact: Robertson Respite (self) - 61 2987 1234
No support relationships recorded

Support plan and services

PRINT COPY OF SUPPORT PLAN

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals

Associated People | Review

Recommended care requiring delegate decision

Residential Permanent

Priority for this care type: Low

Approval starts: 6 September 2022

Reason for care: Automation Comments

Agreed

CHANGE

ADD A CARE TYPE FOR DELEGATE DECISION

SAVE AND DELEGATE | RETURN TO CLIENT

2. In the pop-up box, select the care type that applies from the drop down box. You will need to select the priority for the care type.

Add care type for delegate decision

All fields marked with an asterisk (*) are required.

Which care type applies? *

Home Care Package Level 4

If time-limited, when does the approval stop (optional):

(e.g. dd/mm/yyyy)

What is the priority of this care type? *

High

The priority for home care service is High

What is the reason for a high priority home care recommendation? *

☐ Carer is in crisis or no longer able to provide care due to

☐ Personal safety at risk

☐ Immediate risk of the client entering residential care due to

The client's preference for seeking home care services is

☒ Seeking services ☐ Not seeking services

What is the agreed minimum interim package level?

Home Care Package Level 2

Is this emergency care?

☐ Yes ☒ No

Reason or comments *

SAVE TO PLAN | CANCEL



! If a client is under the aged of 65, several additional entry fields will appear to document their exceptional circumstances.

- When setting or changing the priority level to **High** for a Home Care Package recommendation, reason(s) must be selected from the answers provided. The Clinical Assessment Delegate must also provide reasons for changing the initial priority that was recommended by the clinical assessor in the comments field.

What is the priority of this care type? * ?

High

The priority for home care service is High ?

What is the reason for a high priority home care recommendation ? ? *

☒ Carer is in crisis or no longer able to provide care due to:

Please select an answer from below*

☒ A change in the carer's personal circumstances

☐ An inability to sustain caring role due to a lack of assistance being received

☐ Personal safety at risk

☐ Immediate risk of the client entering residential care due to:

- The care type will be added to the **Recommended care requiring delegate decision** list with a decision of **Agreed**.

Identified needs Goals & recommendations **Decisions** Manage services & referrals Associated People Review

Recommended care requiring delegate decision

Home Care Package Level 3

Priority for this care type Medium ?

Priority for home care services Medium ?

Agreed minimum interim package Home Care Package Level 1

Client's preference for home care services Seeking services

CHANGE

Agreed

CHANGE

Residential Permanent

Priority for this care type Low ?

Approval starts 6 September 2022

Reason for care Automation Comments

Agreed

CHANGE

Changing a decision

- If you need to change your decision from Agreed to Disagreed, or Disagreed to Agreed, you can select the **CHANGE** button.

Support plan and services

Identified needs Goals & recommendations **Decisions** Manage services & referrals Associated People Review

Recommended care requiring delegate decision

Home Care Package Level 3

Priority for this care type Medium ?

Priority for home care services Medium ?

Agreed minimum interim package Home Care Package Level 1

Client's preference for home care services Seeking services

CHANGE

Agreed

CHANGE

Residential Permanent

Priority for this care type Low ?

Approval starts 6 September 2022

Reason for care Automation Comments

Agreed


CHANGE

2. You will be able to add approval cease dates and comments where appropriate in the pop-up.

Change decision

You are about to change the recommendation from disagreed to **agreed** for Alexander Herondale for Home Care Package Level 2
With a priority for home care services of Medium

All fields marked with an asterisk (*) are required.

Approval cease date: 
(e.g. dd/mm/yyyy)

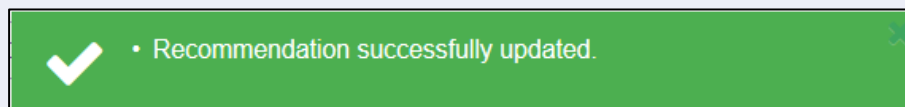
Comments (optional)
Maximum 255 characters

0 / 255

CHANGE CANCEL

3. If you are changing the decision from **Agreed** to **Disagreed**, you will need to provide a reason for the change. Please note, this option will only be available prior to saving and completing the approval process.

A confirmation message will display.



Finalising your decision

1. Once the decision has been made, select **SAVE AND DELEGATE**.

Mr Robertson N RESPITE (Robert)

Male, 79 years old, 19 April 1943, AC70460381
15 LIMBURG WAY GREENWAY, ACT, 2900

Primary contact: Robertson Respite (self) - 61 2987 1234
No support relationships recorded

Support plan and services

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

PRINT COPY OF SUPPORT PLAN

Recommended care requiring delegate decision

Home Care Package Level 3

Priority for this care type Medium ?

Priority for home care services Medium ?

Agreed minimum interim package Home Care Package Level 1

Client's preference for home care services Seeking services

CHANGE

Agreed

CHANGE

Residential Permanent

Priority for this care type Low ?

Approval starts 6 September 2022

Reason for care Automation Comments

Agreed

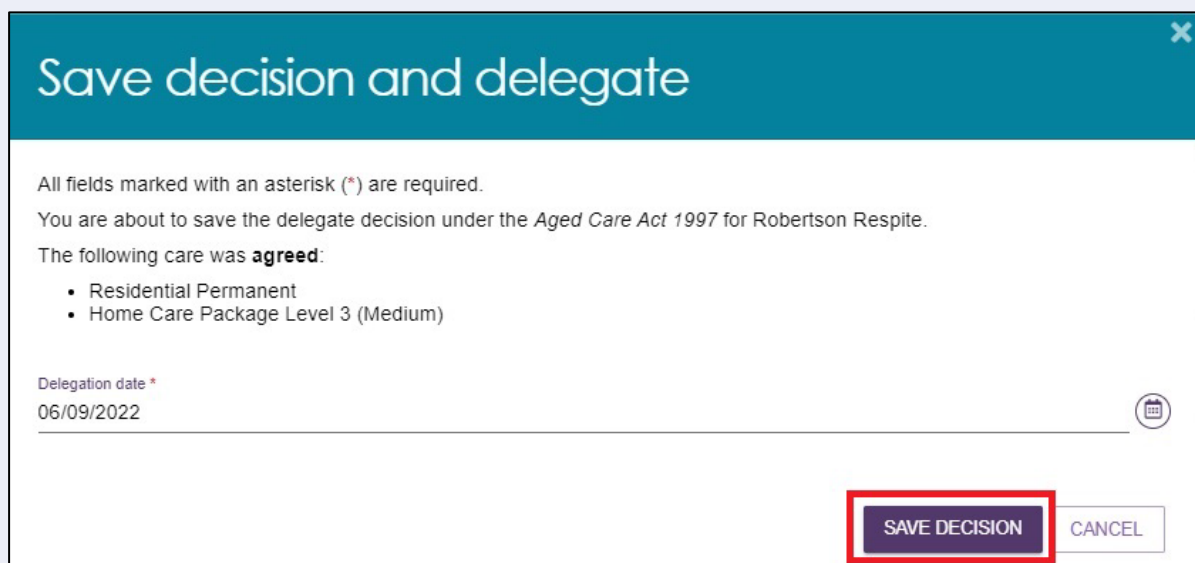
CHANGE

ADD A CARE TYPE FOR DELEGATE DECISION

SAVE AND DELEGATE RETURN TO CLIENT

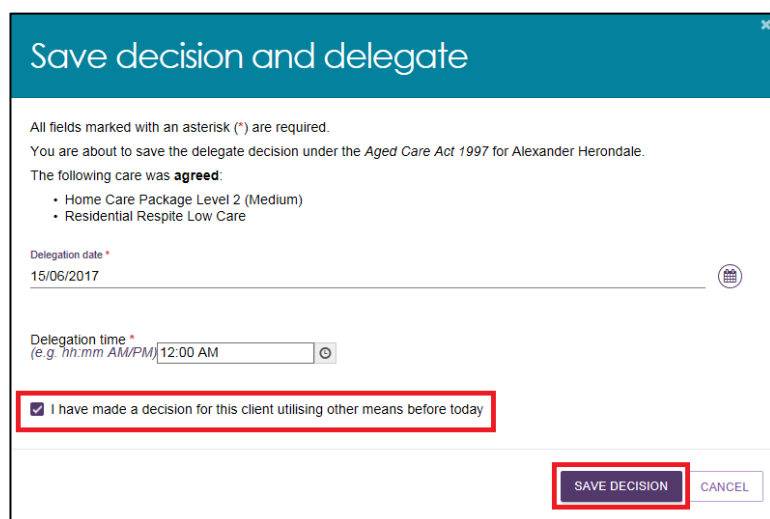


2. A pop-up will display, confirming any care types that were agreed and not agreed. If you need to make any changes to your decision, select **CANCEL**. You need to ensure the date of the delegation is correct. If you are satisfied with the decision and the date, select **SAVE DECISION**.



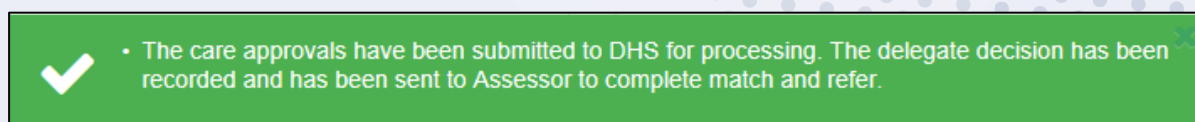
The screenshot shows a pop-up window titled "Save decision and delegate" with a close button (X) in the top right corner. Below the title bar, it states: "All fields marked with an asterisk (*) are required." and "You are about to save the delegate decision under the *Aged Care Act 1997* for Robertson Respite." It then lists "The following care was **agreed**:" with two bullet points: "Residential Permanent" and "Home Care Package Level 3 (Medium)". Below this is a "Delegation date *" field with the value "06/09/2022" and a calendar icon. At the bottom right, there are two buttons: "SAVE DECISION" (highlighted with a red box) and "CANCEL".

- ! If the approval was actioned off-system earlier than the day that the delegation is completed via the portal, you are able to set the date of delegation to the earlier date as reflected on the Offline Approval Form. It is available for download from the Reports and Documents tile of the assessor portal. This form is evidence that you made the approval decisions prior to the date you are making the entry on the system. You must attach the Offline Approval Form to the **Attachments** tab.



The screenshot shows a pop-up window titled "Save decision and delegate" with a close button (X) in the top right corner. Below the title bar, it states: "All fields marked with an asterisk (*) are required." and "You are about to save the delegate decision under the *Aged Care Act 1997* for Alexander Herondale." It then lists "The following care was **agreed**:" with two bullet points: "Home Care Package Level 2 (Medium)" and "Residential Respite Low Care". Below this is a "Delegation date *" field with the value "15/06/2017" and a calendar icon. Below that is a "Delegation time *" field with the value "12:00 AM" and a clock icon. At the bottom, there is a checkbox labeled "I have made a decision for this client utilising other means before today" which is checked and highlighted with a red box. At the bottom right, there are two buttons: "SAVE DECISION" (highlighted with a red box) and "CANCEL".

3. A confirmation message will display stating that the approvals have been submitted to Services Australia to process and that the decision has been recorded and sent to the clinical assessor to finalise the client's support plan and match and refer for service.



A green banner with a white checkmark icon on the left. The text reads: "The care approvals have been submitted to DHS for processing. The delegate decision has been recorded and has been sent to Assessor to complete match and refer." There is a small 'X' icon in the top right corner of the banner.

4. If you have approved a Home Care Package, you can request to receive notifications of any home care correspondence received by that client from the department. This may be required in circumstances where the client is considered to be a vulnerable client that may require assistance from a clinical assessor to link to home care services. To receive notifications, go to the **Approvals** tab in the client record under the Home Care section by selecting the 'edit' button. Only one person from an outlet may receive this notification.

Approvals

Client summary | Client details | **Approvals** | Plans | Attachments | Services | My Aged Care interactions | Notes | Tasks and Notifications

Approvals
This page shows you what care approvals are in place

Current care approvals
Home Care Package Level 3

Previous care approvals
No previous care approvals are available

Home care
All dates and times are in Australian Eastern Standard Time (AEST)

Seeking services
Last changed on 1 March 2021 05:04:31 PM by Halle Hamilton (Assessor)

DHS prior approvals last updated
Never

Notify of home care correspondence ?
No-one selected

Use notify of home care correspondence where there is a need for the Assessor to monitor and provide additional assistance to a client's home care package process.

Refer to the help text for guidance.

Use notify of home care correspondence where there is a need for the Assessor to monitor and provide additional assistance to a client's home care package process.

5. The clinical assessor will be able to see the client under the **Delegate decision complete** section of their **Current assessments** tab. The clinical assessor will then need to match and refer for services, and finalise the support plan.

Current assessments

Current assessments | Recent assessments

Filter by

Sort by: Assessment Priority | in order of: High to Low | GO

Current sort order is Assessment Priority

1 to 3 out of 3 matching results

Delegate decision complete

Nova BOND
FRANKLIN, ACT, 2913
Aged care user ID: AC25972829
Date accepted: 12 November 2019
Comprehensive
Delegate Decision Complete

November BOND
FRANKLIN, ACT, 2913
Aged care user ID: AC42520312
Date accepted: 11 November 2019
Comprehensive
Delegate Decision Complete

- The clinical assessor will receive a notification in the **Task and notifications** page that the delegate has completed their decision, and they will be able to navigate to the client record and directly to match and refer for services from this page.

Tasks and notifications

Tasks Notifications Estimated HCP wait times

Filter by

Last name: First name: Aged Care User ID:

ADVANCED SEARCH CLEAR FILTERS

Date received is after 23 May 2017

FILTER CLEAR

☐ Select all

Received	Category	Title/Description	Aged Care User ID	Client name	Select	Remove
21/06/2017	Delegate Decision	Delegate Decision An assessment has been submitted for Delegate Decision. Details are as follows - Aged Care User ID: AC64922115 Assessor: BL_AJ396956 Activity ID: 1-9HJPGV5	AC64922115	RYDER Ash	<input type="checkbox"/>	
21/06/2017	Delegate Decision	Formal Delegate Decision A formal Delegate Decision has been made on the approved care type under the Aged Care Act 1997. Details are as follows - Aged Care User ID: AC74328998 Delegate Name: Bella Bluett Date decision made: 21/13/2017 12:13:44 Decision Status: Care Approved Activity ID: 1-9BN6YGL Match and Refer	AC74328998	HERONDALE Alexander	<input type="checkbox"/>	

Printing the approval/non-approval letter

- To generate, print and upload approval or non-approval letters, navigate to the **Decisions** tab of the support plan. At the bottom of the page, you will be able to select **GENERATE APPROVAL LETTER** or **GENERATE NON-APPROVAL LETTER**. A person assigned the Delegate Support role will also be able to generate, print, and upload these letters.

Alexander Herondale support plan and services

PRINT COPY OF SUPPORT PLAN COMPREHENSIVE ASSESSMENT 15 JUNE 2017

Identified needs Client Motivations Goals & recommendations **Decisions** Manage services & referrals Associated People

Current care approvals

Residential Respite Low Care
Priority for this care type: Medium
Approval starts: 15 June 2017
Source system: Gateway

Home Care Package Level 2
Priority for this care type: Medium
Priority for home care services: Medium
Agreed minimum interim package: Home Care Package Level 1
Approval starts: 15 June 2017
Source system: Gateway

Delegate decisions and comments

Assessed on 15 June 2017

Decisions

Residential Respite Low Care
Priority for this care type: Medium
Approval starts: 15 June 2017
Source system: Gateway
● Agreed
ADD RESIDENTIAL RESPITE CARE EXTENSION

Home Care Package Level 2
Priority for this care type: Medium
Priority for home care services: Medium
Agreed minimum interim package: Home Care Package Level 1
Approval starts: 15 June 2017
Source system: Gateway
● Agreed

Decision date
15 June 2017 12:00 AM (Australian Eastern Standard Time)

GENERATE APPROVAL LETTER UPLOAD APPROVAL LETTER

RETURN TO CLIENT



2. If you have agreed to more than one care type recommendation for the client, you only need to generate and print one approval letter to send to the client. The information about all agreed care types will appear on this letter.

When you select **GENERATE APPROVAL LETTER**, you will be asked to enter information in a pop-up regarding the assessment. This information, for example the client's doctor's name, will display on the Approval letter.

The screenshot shows a pop-up window titled "Generate approval letter". It has a teal header bar. Below the header, the word "Evidence" is displayed. There is a text input field for "Name of the qualified medical professional your medical information provided by (insert name of qualified medical personnel)". Below this are three checkboxes with labels: "Assessment information indicates you need help to perform daily living tasks", "Assessment information indicates that you require assistance to make decisions about your living activities and arrangements", and "Assessment information which indicates that you would benefit from increased social and community participation". There is also a text input field for "Other evidence as reason for care approval". At the bottom right, there are two buttons: "GENERATE APPROVAL LETTER" (highlighted with a red box) and "CANCEL".

! Any reviewable decision completed by a Clinical Assessment Delegate must contain the following in the decision letter (Approval or Non-Approval letter):

- The Clinical Assessment Delegate's decision/s, as to whether to approve a person as a care recipient under section 22-1 of the Act and any limitations or variations to the approval decision/s;
- The reason/s for the decision/s;
- The supporting evidence to justify the decision/s; and
- The right of review.

This is to ensure high quality and consistency in letters that clients receive.

3. If the Approval letter takes too long to generate, you will be re-directed to the **Reports** tab where you will be able to select **View** to open a copy of the letter.

Certain user generated documents, including Approval/Non Approval letters and Referral Code letters, will be retained in **Recently Requested Reports** for seven days, after which they will be cleared from this screen. They can be regenerated as per the original process.

The screenshot shows a web interface titled "Reports and documents". It has a teal header bar with "Home | Reports and documents". Below the header, there is a section titled "Reports and documents" with a teal icon. Below this are three tabs: "Reports" (highlighted with a red box), "Forms", and "Links". Below the tabs is a section titled "My Reports". It contains a table with the following data:

Name	Requested Date	Status
Hane Sporer Delegate Approval Letter Template 7 September 2022	7 September 2022	Ready - View (highlighted with a red box)

- When you have signed the letter, you can use the **UPLOAD APPROVAL LETTER** button in the **Decisions** tab of the support plan to upload the letter to the client's record. Alternatively, you can upload this through the **Attachments** tab on the client record.

Assessed on 25 July 2018

Decisions

Transition Care

- After Hospital Care
- Other Transition Servi
- Rehabilitation

Priority for this care type

Approval starts

Entry period end date

Source system

Agreed

Decision date

25 July 2018 12:00 AM (Australian Eastern Standard Time)

GENERATE APPROVAL LETTER

UPLOAD APPROVAL LETTER

REQUEST/CHANGE NOTIFICATION OF HOME CARE CORRESPONDENCE

RETURN TO CLIENT

Requesting correction to care approval decision

A corrections process is available where you have made an error in recording a decision.

Correction requests are able to be submitted up to 42 days after initial delegation, where there are no active or commenced service referrals.

To request a correction to care approval decisions follow the steps below.

- In the Delegate Decisions tab of the portal, navigate to the **Decision history** tab. Select the expand arrow on the client card to display a summary of the client's information in the pop-up. Select **REQUEST CHANGES TO CARE APPROVAL DECISION**. If you are using list view, this option will be available from the expanded client information section.

Card View

Decision history

Decision pending

Decision history

Filter by

Last name:

ADVANCED SEARCH

CLEAR FILTERS

FILTER

CLEAR

Sort Decisions Pending by:

Date Submitted

In order of:

Latest to Earliest

Current sort order is Date Submitted

Alexander HERONDALE

Age 86 (25 August 1930)

Referred from Golden Assessment Outlet on 15 June 2017

Recommended care

- Residential Respite Low Care
- Home Care Package Level 2

Transmission status to DHS: FAILED

VIEW SUPPORT PLAN

VIEW CLIENT RECORD

VIEW PDF OF CLIENT RECORD

REQUEST CHANGES TO CARE APPROVAL DECISIONS

Ash RYD

Mark MONDAY

Alexander HERONDALE

Ash BEAM

1 to 7 out of 7 matching results

List View

Decision history

Currently viewing AGED CARE Outlet

Decision pending

Decision history

CARD

LIST

Filter by

Last name

First name

Aged Care user ID

ADVANCED SEARCH

CLEAR FILTERS

Date submitted is after 24 September 2023

FILTER

CLEAR

1 to 8 out of 8 matching results

Age 84 (14 December 1939)

Transmission status to DHS: Submitted

Recommended care

Home Care Package Level 3

VIEW SUPPORT PLAN

VIEW FULL CLIENT RECORD

VIEW CLIENT REPORT

REQUEST CHANGES TO CARE APPROVAL DECISIONS

- Record a reason for the change and provide appropriate reasons for the request, then select **OK, START CHANGES**. Your reasons need to be consistent with the assessment information on the client record.

Request changes to care approval decisions

All fields marked with an asterisk (*) are required.

You are about to request changes to the care approval decisions for Alexander Herondale.

Please provide a comment for these changes? *

0 / 255

OK, START CHANGES

CANCEL

- You will be redirected to the client's support plan and services page, where you will receive a confirmation message of your change request, and that the correction is in progress.

You have successfully requested to begin making corrections to Care Approvals.

Care approval correction in progress.

4. Whilst on the same screen, you will be able to make edits to, remove, and/or add care types, including:
- making changes to the commencement date of the delegate decision (provided that the declaration is ticked and the Offline Approval form is attached).
 - requesting the removal and addition of different care levels within a care type within the same correction request.

Home | Delegate decisions | Janees CITIZENN support plan and services

Mr Janees CITIZENN
Male, 80 years old, 1 July 1942, AC60163045
1 BETTONG AVENUE ACCESS THROSBY, ACT, 2914
Prefers to speak Chinese

Assessed on 7 September 2022

Decisions

Residential Respite Care

Priority for this care type Medium ?

Approval starts 7 September 2022

Reason for care test

Source system Gateway

Agreed

ADD RESIDENTIAL RESPITE EXTENSION

Decision date 7 September 2022

Assessed on 7 September 2022

Assessed on 29 August 2022

ADD A CARE TYPE FOR DELEGATE DECISION GENERATE APPROVAL LETTER UPLOAD APPROVAL LETTER

RETURN TO CLIENT

5. To request to remove a Home Care Package approval that you have entered incorrectly, select the remove (bin) button next to the Home Care Package decision.

Delegate decisions and comments

Assessed on 23 September 2024

Decisions

Home Care Package Level 3

Priority for this care type Medium ?

Priority for home care services Medium ?

Agreed minimum interim package Home Care Package Level 1

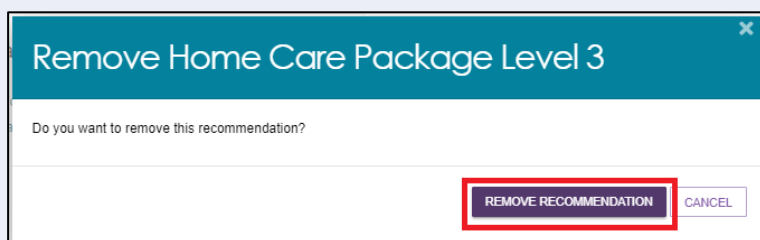
Approval starts 23 September 2024

Source system Gateway

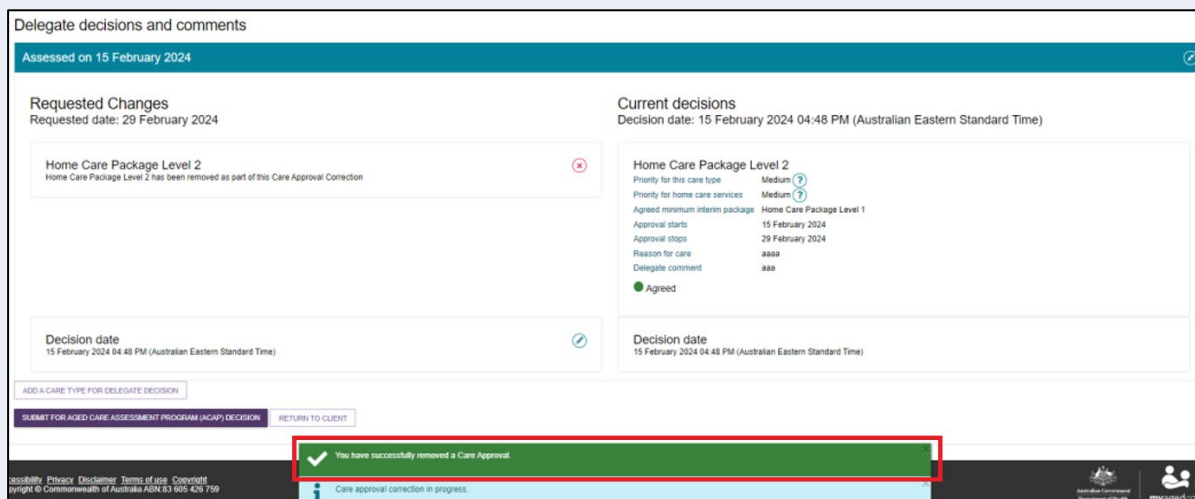
Agreed

Decision date 23 September 2024 08:51 PM (Australian Eastern Standard Time)

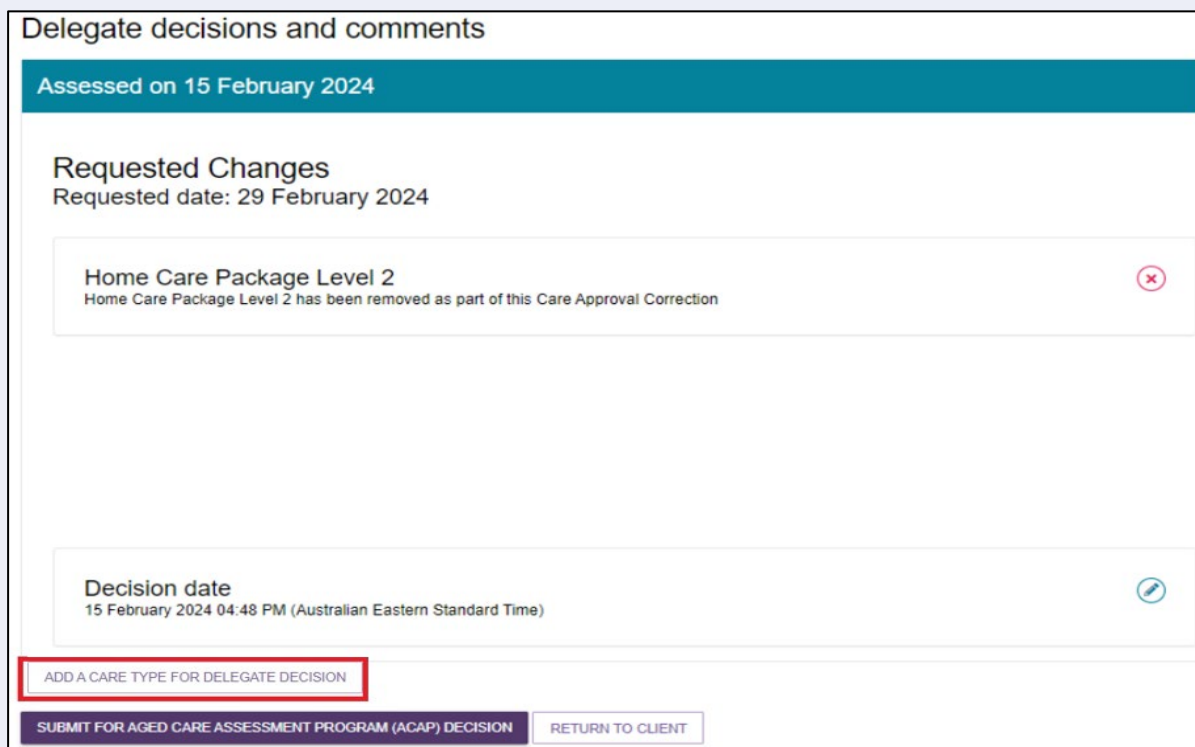
A pop-up will display. Confirm your request to remove the incorrect record by selecting **REMOVE RECOMMENDATION**.



A green banner will then display to confirm that the care approval has been successfully removed.



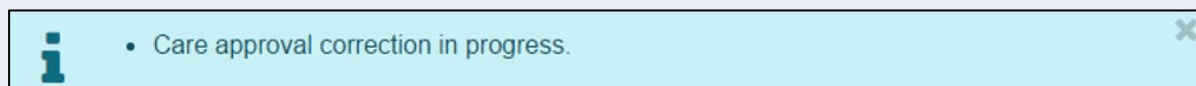
- To then add the correct Home Care Package approval as intended by the clinical assessor and the Clinical Assessment Delegate, select **ADD A CARE TYPE FOR DELEGATE DECISION**.



In the pop-up, add the care type, including the correct Home Care Package level and priority for the Clinical Assessment Delegate decision. Once you have successfully completed the required fields (marked by an *) select **SAVE TO PLAN**.

The screenshot shows a pop-up window titled "Add care type for delegate decision". At the top, a yellow banner with a warning icon states: "The client is now seeking services. On save, a home care package will be requested for any existing approval." Below this, a message says: "All fields marked with an asterisk (*) are required." The form contains several fields: "Which care type applies? *" with a dropdown menu showing "Home Care Package Level 4"; "If time-limited, when does the approval stop (optional):" with a date input field and a calendar icon; "What is the priority of this care type? *" with a dropdown menu showing "Medium"; "The priority for home care service is Medium" with a question mark icon; "The client's preference for seeking home care services is" with two radio buttons: "Seeking services" (selected) and "Not seeking services"; and "What is the agreed minimum interim package level?" with a dropdown menu showing "Home Care Package Level 1". At the bottom right, there are two buttons: "SAVE TO PLAN" (highlighted with a red box) and "CANCEL".

After successfully saving the changes to the Home Care approval, a blue banner will apply outlining that the care approval correction is in progress.



7. If you exit the correction screen, you can navigate back to it by selecting **CONTINUE MAKING CHANGES TO CARE APPROVAL DECISIONS** in the expanded client card on the **Decision history** page.

The screenshot shows an expanded client card for "Alexander HERONDALE". The card displays the following information: "Age 86 (25 August 1930)", "Referred from Golden Assessment Outlet on 15 June 2017", "Recommended care" with a list: "Residential Respite Low Care" and "Home Care Package Level 2", and "Transmission status to DHS: SUBMITTED" with a green dot icon. At the bottom, there are four buttons: "CONTINUE MAKING CHANGES TO CARE APPROVAL DECISIONS" (highlighted with a red box), "VIEW SUPPORT PLAN", "VIEW CLIENT RECORD", and "VIEW PDF OF CLIENT RECORD".

8. You will be able to see the requested changes displayed against the current decisions. When you have made the required changes to the care approval decisions, select **SUBMIT FOR AGED CARE ASSESSMENT PROGRAMME (ACAP) DECISION**.

The screenshot shows the 'Support plan and services' interface. At the top, there are tabs: 'Identified needs', 'Goals & recommendations', 'Decisions', 'Manage services & referrals', 'Associated People', and 'Review'. The 'Decisions' tab is active. Below the tabs, there's a section titled 'Delegate decisions and comments' with a sub-header 'Assessed on 7 September 2022'. This section contains two columns: 'Requested Changes' and 'Current decisions'. The 'Requested Changes' column shows 'Residential Permanent' with details: 'Priority for this care type: Medium', 'Approval starts: 7 September 2022', and 'Reason for care: test'. The 'Current decisions' column shows 'Residential Respite Care' with details: 'Priority for this care type: Medium', 'Approval starts: 7 September 2022', 'Reason for care: test', 'Source system: Gateway', and 'Agreed'. Below these columns, there are two more sections: 'Assessed on 7 September 2022' and 'Assessed on 29 August 2022'. At the bottom, there are two buttons: 'SUBMIT FOR AGED CARE ASSESSMENT PROGRAM (ACAP) DECISION' and 'RETURN TO CLIENT'.

9. A pop-up message will display requesting confirmation to proceed. Select **SUBMIT**.

The screenshot shows a confirmation pop-up message titled 'Submit for Aged Care Assessment Program (ACAP) decision'. The message text reads: 'You are about to submit the changes to the care approvals to the Aged Care Assessment Program (ACAP) for their decision.' At the bottom right, there are two buttons: 'SUBMIT' and 'CANCEL'.

10. You will receive a confirmation message that the correction of the request will be received by the Department's Aged Care Assessment Program (ACAP) delegate.

The screenshot shows a confirmation message with two bars. The top bar is green and contains a checkmark icon and the text: '• The request for care approval changes has been sent to the Aged Care Assessment Program (ACAP) for their decision. • The assessor has been notified of these requested changes.' The bottom bar is light blue and contains an information icon and the text: '• Waiting for approval to the correction of the Care Approvals.'

11. The client will be displayed in the **Decision history** tab with a status of **Acceptance Pending**. Once the department has made a decision on the correction request, this status will change to **Delegate Decision Complete**.

Decision history

Decision pending | **Decision history**

Filter by

Sort Decisions Pending by: Date Submitted | in order of: Latest to Earliest | GO

Current sort order is Date Submitted | 1 to 7 out of 7 matching results

Mark MONDAY	Alexander HERONDALE	Ash BEAM
Assessor: BLUETT Bella Delegate: BLUETT Bella Aged Care ID: AC73457624 Date submitted: 19 June 2017 Assessment type: Comprehensive	Assessor: BLUETT Bella Delegate: GREENHAND Cornelia Aged Care ID: AC92239649 Date submitted: 15 June 2017 Assessment type: Comprehensive	Assessor: BLUETT Bella Delegate: BLUETT Bella Aged Care ID: AC09014184 Date submitted: 13 June 2017 Assessment type: Comprehensive
Delegate Decision Complete Medium	Acceptance Pending Medium	Finalised Medium

12. There will also be a notification advising of the decision in your **Tasks and notifications** page. You will be able to filter by last name, first name and Aged Care User ID as well as use **Advanced Search** functionality to help you find notifications for certain clients.

The notification itself will contain links back to the client record and the correction request. It will also allow you to remove the notification from the page.

Tasks and notifications

Tasks | **Notifications** | HCP Notifications | Maximum HCP wait times

Filter by

☐ Select all

Received	Category	Title/Description	Channel	Aged Care User ID	Client name	Select	Remove
7 September 2022	Delegate Decision	Correction of Care Approval A request for correction to care approval/s has been submitted. Details are as follows - Aged Care User Id: AC60163045 Correction Details: Update Residential PermanentUpdate Residential Respite Care Activity Id: 2-77857189390 Go to: Decisions		AC60163045	CITIZENN Janees	<input type="checkbox"/>	

13. Once the Clinical Assessment Delegate has made their decision on the correction, you will receive another notification advising that the correction has been completed.

Received	Category	Title/Description	Aged Care User ID	Client name	Select	Remove
20/07/2017	Delegate Decision	Care Approval Decision Changed A delegate decision has been made on the request to change a care approval for Assessment: 1-9KUGTX9 Aged Care User Id: AC62171095 Where: Status Delegate Decision Complete , as follows: Update Home Care Package Level 4 Update Accepted Activity Id: 1-20848517305	AC62171095	DONNELLY Ian	<input type="checkbox"/>	

14. You will also be able to see the assessment status reflect this when it changes to **ACAP Decision Complete** in your **Decision history** tab. Additional information regarding the correction decision will be visible by selecting the expand arrow, including the date and details of the correction.

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date submitted	Priority
Donnelly	Ian	AC62171095	HAMILTON Halle	HAMILTON Halle	ACAP Decision Complete	20/07/2017	Medium
Age 85 (1 July 1932)			Decision on changes to care approvals on 20 July 2017		Recommended care Residential Respite Low Care Residential Permanent Home Care Package Level 4		
Transmission status to DHS: FAILED							
VIEW SUPPORT PLAN		VIEW CLIENT RECORD		VIEW PDF OF CLIENT RECORD		REQUEST CHANGES TO CARE APPROVAL DECISIONS	
VIEW CORRECTIONS HISTORY							

15. A record of the corrections history for the client can be viewed by selecting **VIEW CORRECTIONS HISTORY**.

View corrections history

Decision history for Ian Donnelly

Home Care Package Level 4 (Update Accepted) 20 July 2017

CLOSE

Requesting and Approving Care Extensions

Care extensions can be requested by clinical assessors or service providers as follows:

- For Residential Respite Care and Transition Care approvals, service providers can request care extensions on behalf of the client through the My Aged Care Services and Support Portal.
- For Residential Respite Care, clinical assessors can also generate a care extension for a person living in the community who requires additional respite through the assessor portal.

In cases where a client has a valid Residential Respite Care approval and requires additional Residential Respite days, but is currently living at home and not currently receiving residential aged care services, a service provider will not be able to request an extension on behalf of the client. The Clinical Assessment Delegate will instead be able to initiate the care extension on behalf of the client.

If you are unable to complete a care extension request for a client via the assessor portal, you should call the Aged Care Service Provider and assessor Helpline on 1800 836 799.

To make a decision about care extensions, follow the steps below.

1. The extension request will appear in the **Decision pending** tab under **unassigned**. It will have a status of **Acceptance Pending**. Open the client's card in card or list view by selecting the Expand icon.

The screenshot displays the 'Decision history' page in a web application. At the top, there's a navigation bar with 'Home' and 'Delegate decisions'. Below it, the 'Decision history' title is shown with a red cross icon. A tab bar at the top of the content area has 'Decision pending' and 'Decision history', with 'Decision history' being the active tab. A 'Filter by' section is present, with a dropdown menu set to 'Assessment Status' and a 'GO' button. Below the filter, it states 'Current sort order is Assessment Status'. The main content area shows two cards. The first card is for 'Janees CITIZENN' with details: Assessor: FLOWER Emily, Aged care user ID: AC60163045, Date submitted: 7 September 2022, and Assessment type: Comprehensive. Its status is 'Acceptance Pending' and priority is 'Medium'. The second card is for 'Eddy EXTENSION' with details: Assessor: FLOWER Emily, Delegate: FLOWER Emily, Aged care user ID: AC39121652, Date submitted: 31 January 2022, and Assessment type: Comprehensive. Its status is 'Acceptance Pending' and priority is 'Low'. A red box highlights the 'Eddy EXTENSION' card, and a red square icon is visible in the top right corner of the card.

2. Assign the client to yourself if not already done, then the client will now appear under **My Decisions**. Select **START DECISION PROCESS**.

Eddy EXTENSION

Age 89 (15 February 1933)
Referred from Suncorp ACAT Outlet on 31 January 2022
Recommended care

- Residential Respite Care

Transmission status to DHS: Submitted

[START DECISION PROCESS](#) [VIEW SUPPORT PLAN](#) [VIEW FULL CLIENT RECORD](#) [VIEW CLIENT REPORT](#)

3. You will see the care extension request. Review the information and select **MAKE EXTENSION DECISION**.

Support plan and services

[PRINT COPY OF SUPPORT PLAN](#)

[Identified needs](#) [Goals & recommendations](#) [Decisions](#) [Manage services & referrals](#) [Associated People](#) [Review](#)

Current care approvals

Residential Respite Care

Priority for this care type: Low ?

Approval starts: 31 January 2022

Reason for care: zddasad

Source system: Gateway

Recommended care requiring delegate decision

Care extension: Residential Respite Care

Service provider: ABC Health Care

Proposed extension start date: 23 June 2022

Proposed number of extension days: 21

Reason for extension: Carer stress

[MAKE EXTENSION DECISION](#)

This extension request is awaiting delegate decision

4. In the pop-up, select **Yes** or **No** with regards to granting the extension, and fill out the other fields.

Make a care extension decision

All fields marked with an asterisk (*) are required.

Do you want to grant the **21 day extension for Residential respite?**

☒ Yes
☐ No

When does the extension start? *

20/07/2017

Rationale *

Maximum 255 characters

MAKE DECISION **CANCEL**

5. A notification will be displayed and the extension request will show with a status of **Granted** or **Not Granted**.

Support plan and services

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

Current care approvals

Residential Respite Care
Priority for this care type Medium ?
Approval starts 7 September 2022
Source system Gateway

Care extension: Residential Respite Care
Extension start date 7 September 2022
Extension stop date 27 September 2022
Number of extension days 21
Reason for extension Severity of the care recipient's condition
Granted

6. If the service provider requested the extension, they will receive a notification advising them of the decision in their **Tasks and Notifications** in the Services and Support Portal.

Type	Due Date	Received Date	Category	Title/Description	Activity Id	Portal
Notification	20/07/2017		Client Services	Care Extension Request A formal Delegate Decision has been made for a care extension request. Details are as follows - Aged Care User Id: AC91417612 Service : Residential Respite High Care Requested By : Requested by Outlet name : Decision : Update Accepted Delegate Name :	1-20851939775	Service Provider Portal