Residents’ Experience Survey

A guide for providers

Version 2.1

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Section 1

Introduction

# 1. Introduction

The Residents' Experience Survey is an important initiative of the Australian Government to empower older people by inviting them to share their experiences and views about the quality of the care they receive.

The Government is committed to understanding residents' perspective about what is working well and what areas need improving at their residential aged care home.

We acknowledge the work by providers and their staff and thank you for your ongoing commitment to a practice of continuous quality improvement.

Your ongoing support of the Residents' Experience Survey demonstrates this commitment to your residents.

This guide has been developed for residential aged care providers and staff to support your participation in the annual Residents' Experience Survey.

The guide will be periodically updated to ensure you have access to the latest information. We encourage you to download and distribute amongst your staff. You can download the guide on the Department of Health and Aged Care's website at [health.gov.au/our-work/residents-experience-surveys](https://www.health.gov.au/our-work/residents-experience-surveys).

Section 2

What is the Residents’ Experience Survey?

# 2. What is the Residents’ Experience Survey?

## 2.1 Purpose

The experiences of older people living in residential aged care homes provide insights into the quality of the services they receive. The annual Residents’ Experience Survey offers your residents an opportunity to share feedback on their care.

We use the survey feedback in a number of ways to encourage transparency, connection and a commitment to quality improvement in residential aged care.

A summary of the survey responses is shared with providers via a Residents’ Experience Report, which is sent directly to each aged care home provider after participation. We encourage you to discuss the report with your staff, residents, and their families and carers.

The survey presents you with a valuable opportunity to understand how your residents feel about their care and to actively engage them in quality improvement planning.

The results are also used to calculate a residential aged care home’s Residents’ Experience rating in Star Ratings. You can read more about Star Ratings in Section 6.

## 2.2 Background

The Residents’ Experience Survey was introduced in response to the Final Report of the Royal Commission into Aged Care Quality and Safety (Royal Commission). The survey addresses Recommendation 94 in the Final Report by adopting a comprehensive approach to quality measurement and reporting.

The recommendation states that Residents’ Experience reporting should be informed by surveys with at least 20 per cent of aged care residents.

To ensure we meet this intent and to also capture an appropriate representation of resident views, we set a target to survey a random sample of at least 20 per cent at each residential aged care home.

## 2.3 The independent survey team

We heard through consultation with older people, their families, and carers, that they feel most comfortable sharing feedback with a person independent of their aged care provider or the Government.

That’s why we engage an independent third party with a qualified survey team to deliver the annual survey on behalf of the Government.

The survey team visits each participating residential aged care home and completes the survey in-person with each participating resident, allowing them to reflect on their lived experience at their residential aged care home. The survey is voluntary and the survey team seeks informed consent from residents that have been randomly selected on the day. This process ensures participants are comfortable with proceeding with the survey, and the feedback collected is representative of all the residents at the home.

The survey team is qualified and experienced in:

* conducting surveys
* engaging with older people.

They have also undergone current:

* police checks
* Working with Vulnerable People checks
* COVID-19 and influenza vaccinations.

Each survey team member goes through formal training which includes the completion of many training modules. Some of the training modules are developed and/or facilitated by:

* University of Tasmania (Wicking Centre for Dementia) Massive Open Online Course (MOOC)
* My Aged Care Quality Learning Online Modules
* Older Persons Advocacy Network (OPAN)

## 2.4 The survey questions

The survey consists of a set of 14 simple questions developed by the Aged Care Quality and Safety Commission with the help of La Trobe University’s Lincoln Centre for Research on Ageing.

The questions include:

* 12 Likert-scale questions that require participants to choose their preferred response from a set of options (‘always’, ‘most of the time’, ‘some of the time’ or ‘never’)
* two open-response questions that enable participants to provide more detail about their experiences and views.

This allows both qualitative and quantitative analysis to be performed on the response data.

The 12 Likert-scale questions are:

1. Do staff treat you with respect?
2. Do you feel safe here?
3. Is this place well run?
4. Do you get the care you need?
5. Do staff know what they are doing?
6. Are you encouraged to do as much as possible for yourself?
7. Do staff explain things to you?
8. Do you like the food here?
9. Do staff follow up when you raise things with them?
10. Are staff kind and caring?
11. Do you have a say in your daily activities?
12. How likely are you to recommend this residential aged care home to someone?

The two open-response questions are:

1. What would you say is the best thing about this service?
2. What is one thing you would suggest as an improvement at this service?

## 2.5 Timing of the survey

The Residents’ Experience Survey is conducted at aged care homes annually so that we can measure and monitor general resident satisfaction over time. The survey commences in February and runs to October each year.

It is the aged care provider’s responsibility to schedule their preferred survey date for their residential aged care home.

The survey itself can take between 10 to 30 minutes for each resident to complete.

Altogether, the survey process for an aged care home can take anywhere from a few hours to an entire day to be completed, depending on the number of surveys undertaken. All efforts are made by the survey team to reduce any service disruption during the process.

## 2.6 How we use the survey results

We use the responses collected to inform the Residents’ Experience Report for each participating aged care home. The report is sent to the provider-level contact listed on the Government Provider Management System (GPMS) for the aged care home. We encourage providers and their staff to review the report and use it to inform discussions with your residents and your quality improvement activities. The feedback is also used to calculate the Star Ratings Residents’ Experience rating for your aged care home. You can find Star Ratings for your service on the ‘Find a provider’ tool on the My Aged Care website at [myagedcare.gov.au/find-a-provider](http://www.myagedcare.gov.au/find-a-provider).

More information about the Residents’ Experience Report and Star Ratings for residential aged care can be found in Section 6 of this guide.

The department also produces a sector-wide analysis of trends in the Residents’ Experience Survey results. You can find the latest findings on the department’s website at [health.gov.au/our-work/residents-experience-survey/findings](https://www.health.gov.au/our-work/residents-experience-survey/findings).

Section 3

A guide to supporting resident participation

# 3. A guide to supporting resident participation

## 3.1 Engaging residents

The survey team visits your aged care home and conducts the survey in-person with participating residents. Participants are randomly selected by the survey team to ensure all residents have a similar chance to participate and have their voices heard.

When a resident is offered the opportunity to participate in the survey, they will be invited to speak in private where they cannot be overheard. Workers are reminded that they should not be present while the survey is being conducted.

The survey team will explain the process to each participating resident and answer any questions they may have. Before the survey commences, the resident will be asked for their consent to participate in the survey. Residents can request to have someone they trust, like a family member, to sit with them or join by telephone.

Surveys are done verbally and can take between 10 to 30 minutes each. Interpreters and assistance can be arranged to help residents in participating in the survey.

## 3.2 Seeking consent

Participation in the survey is voluntary for residents. The survey team will seek informed consent from residents before the survey begins.

Consent is determined in a range of ways. On approaching a resident, the survey team member will introduce themselves and explain the purpose of the survey before seeking consent to participate. Where participants are unwilling or unable to provide consent, the survey will not proceed. The survey team member will then excuse themselves and move on to the next selected resident.

A resident can change their mind after agreeing to participate in the survey. Residents can stop the survey and withdraw at any time. Information already received will be deleted. No further information will be collected about them.

## 3.3 Maintaining resident privacy

To ensure the integrity of the survey and to respect participants’ comfort and right to anonymity, it is important that workers (including aged care staff, contractors and volunteers) are not present when a survey is being conducted.

The survey responses are also de-identified, so that specific residents are not connected to any specific feedback.

Workers at the aged care home will not be told who is invited or takes part in the survey. Information collected from the survey will be kept strictly confidential and securely stored.

## 3.4 Reporting incidents during surveys

It is the responsibility of a provider to have an incident management system in place and notify the Aged Care Quality and Safety Commission (Commission) if a Serious Incident Response Scheme reportable incident occurs.

When the survey team visits a home, they have a responsibility to notify the aged care home management team if they witness or are notified of an alleged incident that involves a resident. The survey team will:

* encourage the resident to report the incident to the manager and/or clinical manager of the aged care home
* provide the resident with information on the Older Persons Advocacy Network and encourage them to seek support
* notify the manager and/or clinical manager of the aged care home of the alleged incident, so they can report the incident as per their obligations.

If the survey team perceives the home’s response to the alleged incident is insufficient, the survey team may report the incident to the Commission as a matter of concern.

## 3.5 Enabling resident participation

### Translations and aids

The survey approach has been developed to meet best practice methods, ensuring that it is both inclusive and sensitive to the needs of residents. This includes making sure that the survey team is trained and qualified to engage with older people from diverse backgrounds in an appropriate manner. Where needed, language interpreters are engaged to assist and, in some circumstances, a nominated representative may be contacted to complete the survey on the resident’s behalf.

Visual images such as smiley and frowning faces may be used to assist residents to complete the survey. The survey team member may also present the questions in written form to help the resident.

Residents can participate in the survey in multiple sittings. The residents or the survey team member can stop the survey at anytime to allow the resident to rest and then continue answering the remaining questions later that same day as long as consent is not revoked.

### First Nations approach

The survey team can offer several options to encourage greater participation from First Nations residents, including:

* offering group discussions to support a community approach to the questions
* asking the aged care home to organise a known Elder to support the surveys
* completing the survey in paper format to avoid any privacy concerns.

At the time of scheduling the survey, aged care homes with a significant number of First Nations residents (for example, when three or more First Nations residents might be expected to be surveyed) will be presented with these options to decide on the best method for their residents.

### Cognitive impairment

In developing the Residents’ Experience Survey process, we consulted a range of dementia experts and advocates. They confirmed the importance of older people with cognitive impairment having the opportunity to provide feedback to shape the care they receive.

From this feedback, the department has developed the survey methodology to ensure the survey approach meets the needs of those with cognitive impairment.

The survey team is trained to work with older people with cognitive impairment and to determine if a person can meaningfully engage in the survey process. If a person is unable to participate (for example, if they are at an advanced stage of illness) then the survey team will contact their nominated representative to complete the survey on their behalf.

### Proxies

While the primary aim of the survey is to gather feedback directly from residents, there are instances where they may be unable or unwilling to speak for themselves. In this case, the survey may be completed by the resident’s representative as a proxy. The Residents’ Experience Survey sets out criteria on who can be nominated as a resident’s proxy to complete the survey.

Proxy surveys are only sought from a formally appointed representative that is registered with My Aged Care. The formal representative has authority to act on the resident’s behalf and has the same power to make care-related decisions as the resident themselves.

Prior to being surveyed as a proxy, the survey team member will introduce themself and ask if they are willing to participate in the survey on behalf of the resident. The representative can decline to participate. The survey team member will attempt to contact the next representative listed for that resident. Up to three representatives are listed for each resident. This process helps to ensure that the opinion of the proxy most closely reflects the experience of the resident. While the survey team will always aim to speak to the resident directly in the first instance, it is important that in their absence a representative is able to act on their behalf. To maintain resident anonymity, the survey team will not request representative details from the provider.

Section 4

A guide for aged care home teams

# 4. A guide for aged care home teams

## 4.1 Participation requirements

It is voluntary for your aged care home to participate in the Residents’ Experience Survey.

If an aged care home declines to participate or does not facilitate the survey team’s access to undertake the survey, the home will not be invited to participate in the survey until the following year.

## 4.2 Provider exemptions

### Unable to participate

We may grant an exemption to an aged care home when non-participation in the survey is outside of your control, for example, when non-participation is due to an outbreak of COVID-19 or other infectious illness, or a natural disaster.

This means your aged care home will not receive a Star Ratings Residents’ Experience rating.

When your aged care home’s Star Ratings are updated on the My Aged Care website, you will only have a rating published against the other 3 subcategories as appropriate. Your aged care home will not receive an Overall Star Rating due to noncompletion of the Residents’ Experience Survey.

### New aged care home

Aged care homes that have been operating for less than 12 months are automatically exempt from participating in the annual Residents’ Experience Survey and from publication of Star Ratings for up to 12 months.

The Residents’ Experience Survey will be undertaken within 12 months of becoming operational. Until that time, the Residents’ Experience Survey questions will still be displayed on the My Aged Care website. However, no findings will be displayed against the questions to highlight that there is no data available.

Once the home’s Residents’ Experience Survey have been conducted, Star Ratings will be calculated and published as part of a subsequent quarterly update to Star Ratings.

A new aged care home operating for less than 12 months can volunteer to participate in the survey if:

* at least 5 permanent residents have been living in the aged care home for at least 6 weeks, and
* the home has been in operation for at least 3 months for the residents’ data to be available.

**Offline services**

* If an aged care home’s status changes from offline to operational, the department will assess whether the home’s previous Residents’ Experience Star Rating is less than 12 months old and can be published on the My Aged Care website. If the survey data is more than 12 months old, the home will be invited to participate in the current survey round (or the next survey round if the visit is unable to be scheduled by the survey team).

**No withdrawal of consent after participation**

Participation in the Residents’ Experience Survey is voluntary for both aged care homes and residents. However, an aged care home is unable to withdraw consent after the survey has been completed.

This is because withdrawing participation after residents have completed the survey unjustly takes away the resident’s opportunity to share their lived experience as consented and agreed.

## 4.3 The survey process

The survey process has been made as simple as possible to minimise impact on your staff. Before the Residents’ Experience Survey begins, the survey team will send all aged care homes an information pack containing a poster and a residential booklet to distribute within your home. This information pack is to help your residents, their families and carers to understand the purpose of the survey.

Between January and October each year, the survey team will contact aged care homes to schedule a visit, confirm resident information via a checklist, and give you an opportunity to ask any questions that you may have. Aged care homes may need to provide an updated resident list to ensure the survey team has the most up to date information about all residents.

Aged care homes might be asked to assist the survey team in gaining access to the site and navigating around the premises. Workers are not required to chaperone the survey team at any time and are not to be present during the survey, to maintain the confidentiality of resident feedback.

## 4.4 Scheduling the survey

The survey team will contact aged care homes to schedule the survey at least four weeks in advance of a visit. The aged care home is advised of the survey’s purpose and is given the opportunity to provide insights on the status of each resident, including identifying residents who may require additional support to participate. This allows for alternative communication methods to be arranged, for example ensuring an interpreter can be present for residents who speak a language other than English, or aids to assist residents who may be deaf, legally blind, or non-verbal.

### Cancelling a scheduled visit

An aged care home can cancel a scheduled visit if there is a genuine emergency or unforeseen event that would restrict the ability of the survey team to visit the home and conduct the survey. However, the aged care home is responsible for rescheduling the visit, noting that non-participation may impact the home’s Star Rating.

Each year a deadline is set for the survey to be completed. If an aged care home has not arranged to reschedule the visit before this date, the home will receive a Star Rating Residents’ Experience rating of 1-star. This date is communicated to all aged care homes at the start of the survey round.

## 4.5 On the day of the survey

The survey team will arrive at your aged care home early on the morning of the scheduled visit.

We kindly ask that you offer them an appropriate area to base themselves, such as a meeting room or similar.

It would also be useful if you could please provide a layout of your home, to assist the survey team in navigating around the building/s.

To maintain resident privacy during the survey, we ask that workers not be present while the survey is being conducted with the residents.

When a survey team member is ready to commence the survey, they will follow this process:

* knock on the resident’s door, or approach the resident in a common area, and introduce themselves
* explain the purpose of the survey
* invite the resident to participate and seek a private setting as needed
* ask for the resident’s verbal consent
* ask the resident if they require assistance such as a support person or language interpreter for example.

The resident will then be asked if they are comfortable in their surroundings and if they are ready to proceed.

The survey team member will use a tablet or similar, to share the questions and document the answers from each participant.

The survey will take approximately 10 to 30 minutes to complete with each resident.

Participation is voluntary so participants can stop at any time throughout the process.

Once the survey has been completed, the aged care home will receive an invitation to participate in a survey to share their experiences of the Residents’ Experience Survey. All responses are anonymous and will be used for quality improvement of the survey processes.

Section 5

How participants are chosen

# 5. How participants are chosen

## 5.1 Sampling

A random sampling methodology is used to select the residents who are invited to participate in the Residents’ Experience Survey. At least 20 per cent of residents at each participating aged care home are surveyed. The survey rate varies depending on the size of the home to ensure enough residents are surveyed to give statistically meaningful results, and to ensure resident anonymity.

The sampling methodology is also designed to ensure the survey sufficiently captures the views of residents with diverse backgrounds. For each home, 40 per cent of the sample will be randomly selected from the population of residents from the following backgrounds:

* people from Aboriginal and Torres Strait Islander communities
* people from culturally and linguistically diverse backgrounds
* people who live in rural or remote areas
* people who are financially or socially disadvantaged
* veterans
* people who are homeless or at risk of becoming homeless
* care-leavers
* parents separated from their children by forced adoption or removal
* lesbian, gay, bisexual, transgender and intersex people.[[1]](#footnote-2)

The remaining 60 per cent will be randomly selected from the population of residents not identified as having a diverse background.

### Participating residents

Permanent residents who have been residing in the home for at least six weeks are eligible to participate in the survey. This timeframe ensures that the residents have spent enough time in the home and to feel comfortable in sharing their lived experience.

### Exclusions

The following exclusion criteria applies for residents:

* on leave
* living at the aged care home temporarily receiving respite
* in isolation due to infectious diseases
* who are in active palliative care
* who are no longer a resident due to being deceased, discharged, or relocated to a different home.

## 5.2 Randomisation approach

The survey team will attend the aged care home with a pre-loaded resident list on their tablet and sorted into sampling groups. The survey team will work with an appointed staff member at the aged care home (manager, clinical nurse, etc) to identify any residents that meet the exclusion criteria (as defined in section 5.1) and their reasons for exclusion. In addition, the survey team will seek advice from the appointed staff member to identify residents who may have behaviours that could impact the interaction between the survey team and resident.

The survey team will use a randomisation process for the aged care home that is based on layout and number of rooms and wings. Using a randomisation software tool, the survey team will walk around the home to select residents to participate in survey. This approach minimises the administrative burden on aged care staff as it does not require matching of residents to room numbers by the aged care home.

Residents will be randomly selected to meet the overall minimum participation target (refer to section 5.3), as well as meeting the 40 per cent quota for residents with a diverse background and 60 per cent quota for residents not identified as having a diverse background.

## 5.3 Participation targets

Participation targets are based on the total resident number at each aged care home, to ensure that the survey outcomes are both representative and unidentifiable.

The methodology requires no less than 20 per cent of residents being surveyed at each aged care home. Where there are less than 12 residents in the aged care home, all residents will be invited to participate.

Where the participation target at an aged care home is not met, a follow-up visit is scheduled on another day to survey additional residents to meet the target. Appropriate representatives of residents may also be contacted to complete the survey on behalf of the resident (refer to the Proxy information in section 3.5).

Where all residents have been approached and the target is still not met, the survey is considered finalised. To reduce the risk of identification, a Resident Experience Report is only provided to aged care homes where a minimum of four residents have completed the survey. We will either provide an exemption or will partially publish the aged care home’s Residents’ Experience Star Rating (see section 6.2).

The participation table below shows the survey targets:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Residents living in the home | 0 – 11 | 12 – 39 | 40 – 59 | 60 – 70 | 71 – 149 | 150 – 299 |
| Minimum participation to meet 20% target | All residents | 12 | 13 | 14 | 20% | 20% |

Section 6

Understanding the survey results

# 6. Understanding the survey results

The Residents’ Experience Survey is conducted annually. This allows aged care homes time to review the previous survey results and implement improvements over time to improve the quality of care they deliver.

## 6.1 Residents’ Experience Reports

The anonymous information collected from the survey is combined and summarised into a Residents’ Experience Report and sent to the provider to share with the aged care homes to identify areas for improvement in the quality of care they provide. The Residents’ Experience Report is provided within six weeks of the survey being finalised. Each aged care home will receive the report with de-identified feedback for their home. Providers are encouraged to use this feedback to inform their plans for quality improvement.

The Star Ratings improvement manual provides guidance on how to identify opportunities to improve the experience of residents. This guide is available on the department’s website at [health.gov.au/resources/publications/star-ratings-improvement-manual](http://health.gov.au/resources/publications/star-ratings-improvement-manual).

### Government Provider Management System

Residents’ Experience Reports are sent to the nominated provider-level contact listed in the Government Provider Management System (GPMS). Aged care homes are encouraged to make sure their contact information in GPMS is current, so the Residents’ Experience Report is sent to the relevant contact.

You can access GPMS through the platformat [provider.health.gov.au](https://provider.health.gov.au/serviceproviderportal/login?ec=302&startURL=%2Fserviceproviderportal%2Fs%2F). If you need help, please call the My Aged Care Service Industry, Provider and Assessor Helpline **via phone on 1800 836 799** for help. It is open Monday to Friday (8am to 8pm) and Saturday (10am to 2pm) local time across Australia.

There are several resources available to help you with the GPMS system on the department’s website at [health.gov.au/resources/collections/government-provider-management-system-resources](https://www.health.gov.au/resources/collections/government-provider-management-system-resources), including:

* user guides and quick reference guides
* ‘how to’ video guides
* the GPMS user guide.

## 6.2 Star Ratings for residential aged care – the Residents’ Experience rating

Star Ratings provide a nationally consistent benchmark to monitor, compare and improve residential aged care. It makes it easier for older people, their families and carers to compare the quality and safety of aged care homes and make informed choices about their care.

Star Ratings draws on data from providers and reflects this back to the sector, including from the National Aged Care Mandatory Quality Indicator Program and Care Minutes.

All aged care homes receive an Overall Star Rating between 1 and 5 stars as well as a rating across four sub-categories:

* **Residents’ Experience** – based on the results of the annual Residents’ Experience Survey.
* **Compliance** – based on the regulatory decisions (specific formal regulatory notices) and accreditation decisions by the Aged Care Quality and Safety Commission.
* **Staffing** – based on the average amount of care time residents receive, based on care delivered by registered nurses, enrolled nurses, personal care workers or assistants in nursing, compared with the average care targets set by the Government.
* **Quality Measures** – based on information about five crucial areas of care, including falls and major injury, unplanned weight loss, pressure injuries, medication management and the use of restrictive practice.

Residents’ Experience is the heaviest weighted sub-category, accounting for 33 per cent of the Overall Star Rating. This reflects the value placed on the experiences and views of residents in measuring quality of care.

### Quarterly updates

Star Ratings for aged care homes are updated quarterly and published on the ‘Find a provider’ tool on the My Aged Care website.

While the Residents’ Experience Star Rating has previously been updated annually, since January 2023, providers started to see their Residents’ Experience rating update in Star Ratings in the quarter following their completion of the survey.

This change supports the provision of more up-to-date information for older people and aligns with updates to the Staffing and Quality Measures sub-category ratings. The Compliance rating updates daily.

You can find out more about Star Ratings at [health.gov.au/our-work/star-ratings-for-residential-aged-care](https://www.health.gov.au/our-work/star-ratings-for-residential-aged-care).

### Full publication

An aged care home’s Star Rating Residents’ Experience rating and their survey responses will be fully published on the My Aged Care website where a minimum of four residents have completed the survey.

### Partial publication

To ensure resident anonymity, an aged care home’s Star Ratings Residents’ Experience rating is calculated and published, but not the responses to the 12 individual survey questions. This occurs when the home has had three residents participate in the survey.

### No publication

The Star Rating Residents’ Experience rating and survey results will not be published and the Residents’ Experience Report will not be shared in the event that the aged care home has less than three residents complete the survey.

## 6.3 Reviewing your results

Aged care homes are unable to dispute the Residents’ Experience Survey results as these are driven by the responses provided by residents about their experiences and views on their care.

If an aged care home genuinely believes that there is a mistake with the results of the Residents’ Experience Survey you are encouraged to contact the department via [ACRES@Health.gov.au](mailto:ACRES@Health.gov.au).

## 6.4 Feedback

We encourage you to share your thoughts on the Residents' Experience Survey process.

To support continuous improvement, the independent survey provider will seek your feedback via a survey that will be sent within two weeks of you receiving your Residents’ Experience Report. This survey will seek detail on what is working well and what we can improve.

If you have any concerns about the how the Residents’ Experience Survey is conducted, you are encouraged to contact the department directly. Read more information at [health.gov.au/our-work/residents-experience-survey](https://www.health.gov.au/our-work/residents-experience-surveys).

1. As per Section 11-3 of the *Aged Care Act 1997.* [↑](#footnote-ref-2)