

## People who are financially or socially disadvantaged

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To complete this application, you will need to:

- Provide details of the outlet the application relates to (Section 1).
- Indicate which criteria you wish to demonstrate to support your application (Section 2).
- Provide the required information for your selected criteria and confirm that you have included any attachments needed (Section 3). Please ensure you have removed any individuals' names from evidence provided, except where explicitly requested. Leave the sections relating to other criteria blank.
- Upload this form together with all required attachments to your application within the My Aged Care Service and Support portal.

Please refer to the [My Aged Care provider specialisation verification: aged care provider guidance manual](#) (provider guidance manual) for more detail about the application process.

### Privacy

Your personal information is protected by law, including the Privacy Act 1988 and the Australian Privacy Principles, and is being collected by the Australian Government Department of Health and Aged Care for the primary purpose of verifying the eligibility of aged care providers against the criteria set out in the Specialisation Verification Framework to ensure that aged care provider profiles on My Aged Care reflect information, which is accurate and relevant, for the purposes of providing aged care recipients and their representatives with specialised healthcare services. Your personal information may also be used and disclosed for other purposes such as delivering and evaluating the initiative and for statistical, performance, policy development and research purposes.

The department will not disclose your personal information to any overseas recipients.

If you do not provide this information, the department will be unable to verify the eligibility of your application.

You can get more information about the way in which the Department of Health and Aged Care will manage your personal information, including our privacy policy, at [Privacy Policy | My Aged Care](#).

# Section 1. Applicant details

**Name of outlet:**

**Outlet ID number:**

## Confirmation

- ☐ I declare that the information provided as part of this application is true and correct to the best of my knowledge. I understand that once the claims to specialisation in the delivery of care made in this form have been verified by the assessor my organisation will make best efforts to maintain the specialisations through adherence to the requirements set out by the My Aged Care provider specialisation verification framework. In the event that this specialisation cannot be maintained, a representative of my organisation will inform the department (by emailing [macspecialisation@health.gov.au](mailto:macspecialisation@health.gov.au)) to remove the specialisation from My Aged Care. I understand that if I wish to reinstate this specialisation, I will need to re-apply for verification by the assessor. I understand that if my organisation is not able to produce the required evidence, my organisation will not be able to claim to provide specialised services on its My Aged Care provider profile. I understand that representative contact information may be used by the department where further evidence or clarifications are required to progress the application.

**Name of Primary Representative**

**Date**

**Primary Representative Ph. No.**

**Primary Representative Email**

**Name of Secondary Representative**

**Secondary Representative Ph. No.**

**Secondary Representative Email**

## Section 2. Criteria

For this specialisation, you must meet **one** of the **Tier 1** criteria – **OR** – **all** of the relevant **Tier 2** criteria listed below.

Please indicate on this page which criterion or criteria you wish to demonstrate.

### Tier 1 (select one)

- ☐ **Criterion 1:** Provider delivers Assistance with Care and Housing services or is a care finder organisation that focuses on clients who are financially or socially disadvantaged (applies to Commonwealth Home Support Programme providers only).
- ☐ **Criterion 2:** 50% or more of residents have been assessed as being homeless and have a relevant behavioural diagnosis (applies to residential aged care only).

### Tier 2 (select all)

- ☐ **Criterion 3** Provider supports residents to access the same activities as those residents who are able to pay (applies to residential aged care only).
- ☐ **Criterion 4:** Provider has policies and procedures in place to support and promote the delivery of specialised aged care to financially or socially disadvantaged aged care recipients.
- ☐ **Criterion 5:** Provider offers services which are specifically targeted towards financially or socially disadvantaged people.

## Section 3. Evidence

In this section, please fill out all fields required for the criterion or criteria you selected in Section 2 above.

### Tier 1 criteria

☐ **Criterion 1:** Provider delivers Assistance with Care and Housing services or is a care finder organisation that focuses on clients who are financially or socially disadvantaged. (Applies to Commonwealth Home Support Programme providers only.)

#### Supporting evidence

No further information is needed – the assessor will undertake a desktop review of departmental records which list providers funded to deliver these services.

☐ **Criterion 2:** 50% or more of residents have been assessed as being homeless and have a relevant behavioural diagnosis. (Applies to residential aged care only.)

#### Supporting evidence

No evidence required – the assessor will undertake a desktop review of departmental records which list providers approved under the Homeless Supplement or the Specialised Homeless Base Care Tariff.

## Tier 2 criteria

☐ **Criterion 3:** Provider supports residents to access the same activities as those residents who are able to pay. (Applies to residential aged care only.)

**Please provide information on activity costs and approaches to ensuring those experiencing financial or social disadvantage are included in all activities.**

☐ **Criterion 4:** Provider has policies and procedures in place to support and promote the delivery of specialised aged care to financially or socially disadvantaged aged care recipients

**Please name at least one policy and one procedure that explicitly supports the delivery of specialised aged care to people who are financially or socially disadvantaged.**

These might relate, for example, to staff recruitment and retention, intake, provision of care, training, etc.

**Please describe at least one example of how each policy and procedure supports the delivery of specialised care.**

### Supporting evidence

- ☐ Please check the box to confirm you have attached a copy of each of the policies and procedures noted above.

☐ **Criterion 5:** Provider offers services which are specifically targeted towards financially or socially disadvantaged people.

**Please describe your services targeted toward financially or socially disadvantaged people.**

These might include, for example, being a point of contact for a person during a crisis, answering questions around their care, providing welfare checks (particularly during a crisis), offering technology packages and connecting them with other service providers (for example alcohol services and mental health services).

### **Supporting evidence**

- ☐ Please check this box to confirm you have attached supporting evidence of appropriateness (e.g. feedback from aged care recipients or a relevant organisation).