Your guide to the Aged Care Act 2024

Understanding and Adapting

This document is for older people, their families and carers who are currently receiving or are seeking government funded aged care services.

The Department of Health, Disability and Ageing has developed this document to help you understand the changes introduced by the Aged Care Act 2024 (the Act), and how they might apply to you.

This guide is an alternative format to the eLearning module for older people, their family and carers.

This guide, together with other available resources, can also be used for having conversations about the changes and to deliver other learning activities.

The eLearning module and additional resources for facilitated conversations and learning are available on the department’s website [eLearning for the new Aged Care Act](https://www.health.gov.au/our-work/aged-care-act/prepare/elearning#modules).

The Department of Health, Disability and Ageing reserves the right to add or change supplementary information to this document as needed.

The Aged Care Act 2024 (the Act) will start on 1 July 2025. This document is your guide to understanding the changes being introduced, how they might apply to you, and how the aged care system is adapting to put the rights of the older person first.

It provides you with a greater understanding of the following:

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Chapter 1

Introduction

# Changes across your aged care journey

## Understanding the Age Care Act 2024

The Aged Care Act 2024 (the Act) puts the rights of older people first. It includes a Statement of Rights for older people accessing aged care services.

The Act will start from 1 July 2025. It will be the main law that sets out how the aged care system will operate.

The key changes for older people are:

|  |  |
| --- | --- |
| A rights-based focus | The Act introduces a Statement of Rights, which outlines the rights of older people when seeking or accessing government-funded aged care services. Aged care providers (providers) have a responsibility to uphold the Statement of Rights. This should be part of your care plan discussions with your provider. |
| Enhanced quality standards | The Strengthened Aged Care Quality Standards (Quality Standards) and the Aged Care Code of Conduct clearly define what good care looks like. They set clear expectations for the quality of aged care services you receive from providers and workers. They require providers to deliver person centred care and actively involve you in making decisions about the care you receive. The Code of Conduct applies to all providers and the Quality Standards will apply to providers of a specific range of services. |
| Greater protections when you speak up | The Act increases protections for whistleblowers - people who call out issues. Older people, families, carers, and aged care workers can report a person or organisation who has not followed aged care law, without fear that they will be punished or treated unfairly.  Aged care providers will be required to have a complaints and feedback system to provide an older person, their family and carers, or workers to provide comment on the delivery of government-funded services. A person can also raise complaints directly to the Aged Care Quality and Safety Commission (ACQSC). |
| Safeguards around decision-making | You can register one or more people of your choice to assist you in your decision-making, ensuring you have control and choice over your own life and care.  These registered supporters have a clear responsibility to help you make your own decisions, promote your wellbeing, and act in accordance with your wishes. The supporter cannot make the decision for you. |
| An independent complaints process | If you believe your rights have been breached, or you have a complaint about your care, you can raise this with your provider or make a complaint to the Aged Care Quality and Safety Commission. The Complaints Commissioner will uphold the rights of older people and maintain independent, transparent and accountable complaints processes. |
| New funding arrangements | Under the Act there are changes to the funding of some aged care services. This includes what the government will pay and what you may need to pay based on a means test, to enable an equitable aged care system. Your provider will work with you to see what you can pay based on your income and value of any assets you own. |
| New Support at Home program | Support at Home program will replace the Home Care Packages Program and the Short-Term Restorative Care Programme from 1 July 2025. The Commonwealth Home Support Programme (CHSP) will transition to the Support at Home Program no earlier than 1 July 2027. |

### What's changing and what's staying the same?

|  | What is changing? | What is staying the same? |
| --- | --- | --- |
| Planning ahead / transitioning to new arrangements | * new Statement of Rights outlining the rights older people should expect when seeking or accessing aged care services * option to register a supporter to help older people make and communicate aged care decisions * new service and funding model including portability of classification level approval to Multi-Purpose Services Program (MPSP) or National Aboriginal and Torres Strait Islander Flexible Aged Care Program (NATSIFACP) * residential care daily living, non-clinical care fee and contributions * refreshed My Aged Care website to support changes. | * continuity of care * transitioning of existing services into new system * My Aged Care entry point, functionality and support * Care Finders, Elder Care Support, navigation and advocacy services * income and asset testing of family home * ability to search for a provider by their specialisation * continue to use My Aged Care website Find a Provider tool to search for and compare providers when connecting to care. |
| Assessing needs | * continuity of care * transitioning of existing services into new system * My Aged Care entry point, functionality and support * Care Finders, Elder Care Support, navigation and advocacy services * income and asset testing of family home * ability to search for a provider by their specialisation * continue to use My Aged Care website Find a Provider tool to search for and compare providers when connecting to care. | * single assessment system workforce (commenced in 2024) * no re-assessment for those already in the system unless their needs change in the future * MPSP and NATSIFACP providers can still offer immediate services where needed. |
| Connecting to care | * more help to stay at home with additional Support at Home packages and increased funds for home modifications and assistive technology * new Support at Home program incorporates home care and short-term restorative care * no earlier than 2027, CHSP transitions into Support at Home * once approved for residential aged care, a residential aged care place is allocated to the older person * strengthened end of life and palliative care rights across all providers. | * most older people will continue to access their services in the same way * support plan based on budget allocation * respite care in a residential care setting * right to be supported by and stay connected to volunteers including through safe visitation. |
| Receiving quality care | * rights to exercise choice and control in the planning and delivery of care * wellness and reablement focus to maintain and improve independence * cultural safety and inclusivity focus to ensure identity, culture, spirituality and needs are supported * increased provider obligations for stronger standards for diversity, dementia care, clinical care, provider governance, food and nutrition * enhanced protections for older people, including complaints mechanisms, and greater enforcement options for the Aged Care Quality and Safety Commission (ACQSC) * accessible complaints processes * whistleblower protections * duty of care for registered providers and responsible persons and compensation pathways for older people. | * Care Finders, Elder Care Support and other navigation and advocacy services * the ability to exercise choice and control over the planning and delivery of your services, including changing providers * the ability to lodge a complaint * right to make decisions about the care and services they receive with their will and preferences heard and respected. |
| Fees and contributions | * some changes across fees for certain services * Support at Home participants will only pay contributions on services received * lifetime cap of $130,000 in individual contributions across Support at Home and the non-clinical care component of residential care contributions * Support at Home Budget Planner to help the older person get an estimate of their contributions and potential budget * changes to accommodation payment arrangements for new residents. | * you will not pay fees associated with your Home Care Package if you are assessed as not needing to pay an income tested care fee. * no worse off principle (NWOP) applies to people who, on 12 September 2024, were either receiving a package, on the National Priority System, or assessed as eligible for a package * lifetime cap of $82,347 (indexed) remain for those eligible for the NWOP * current fee arrangements continue for those in residential care before 1 July 2025 * NATSIFACP fee structure will remain unchanged. |
| Changing circumstances | * a rights-based and culturally safe approach to assessing changes in circumstances * if you are re-assessed onto a higher budget, it will be at one of the new Support at Home classifications * improved protections over your personal information * requirements to keep government up to date with any change in financial circumstances * new end-of-life support without entering residential care. | * an older person can still request a re-assessment or a support plan review under current processes if already in the system * those new to the system will receive a personalised support plan and service approvals. |

### When are the changes occurring?

The Act will start from 1 July 2025. There are various readiness activities, consultations and events that will be carried out in the lead up to the implementation of the Act and after implementation, through to December 2025.

We will continue to let you know about upcoming activities through our regular email newsletters. For updates and information, please [subscribe to the aged care sector newsletters and alerts.](https://www.health.gov.au/using-our-websites/subscriptions/subscribe-to-aged-care-newsletters-and-alerts)





Learn more about the reforms

For more information about the Act please see the fact sheets below. There are different versions available as follows:

* Fact sheet for older people
* Easy read fact sheet
* Plain language fact sheet

For a detailed roadmap of the Aged Care Reform elements visit the [Department's webpage](https://www.health.gov.au/our-work/aged-care-reforms/roadmap).

Further resources include:

* [Prepare for the new Aged Care Act](https://www.health.gov.au/our-work/aged-care-act/prepare)
* [My Aged Care website](https://www.myagedcare.gov.au/)
* [Landing page for the Act](https://www.health.gov.au/our-work/aged-care-act)
* [Commonwealth Home Support Programme Homepage](https://www.health.gov.au/our-work/chsp)
* [Navigating the reforms](https://www.health.gov.au/our-work/aged-care-reforms/navigating-the-reforms)

# Your rights in care

## Person-centred and respectful aged care

### A new rights-based Aged Care Act

From 1 July 2025, you will have stronger protections under the new rights-based Act.

You deserve respect and the right to make your own choices with dignity. This includes when you access government-funded aged care services in your home or in a residential aged care setting.

The Act places older people at the centre of their aged care experience. A key feature of the Act is the Statement of Rights, which clearly outlines the rights you will have when accessing or seeking to access government-funded aged care services.

Your needs are at the centre of your aged care

The Statement of Rights gives you the right to:

* make your own decisions about your own life
* have your decisions not just accepted, but respected
* get information and support to help you make decisions
* communicate your wishes, needs and preferences
* feel safe and respected
* have your culture and identity respected
* stay connected with your community

## What the Statement of Rights means for you

|  |  |
| --- | --- |
| Independence, choice and control | You have the right to make decisions about things that affect your life. This includes decisions about:   * government-funded aged care services you use * how you access government-funded aged care services and who provides them * your money and belongings.   You also have the right to choose how you live, even if there is some personal risk. For example, choices about your social life and close relationships. |
| Fair access | You have the right to a fair and accurate assessment to find out what government-funded aged care services you need.  This assessment should be done in a way that suits you. It should respect your:   * culture and background * personal experience and any trauma * cognitive conditions, such as dementia.   You also have the right to get the kind of care you need, when you need it. This includes palliative care and end-of-life care. |
| Safety and quality | You have the right to safe, quality, and fair government-funded aged care services that treat you with dignity and respect.  This includes the right to access government-funded aged care services that:   * value and support your identity, culture, and background * respect your experience, including any trauma * are accessible and meet your needs * are free from violence, abuse, and neglect.   You have the right to receive care from:   * workers with the right training, skills, and experience * providers that meet all the conditions under the aged care laws. |
| Respect for your privacy and information | Your provider must:   * respect your personal privacy * protect your personal information, such as information about your health and finances * allow you to choose when your personal information can be given to someone else, such as an advocate or a lawyer.   You have the right to get records and information about your rights and the government-funded aged care services you use. This includes how much they cost. |
| Communication that meets your needs | You have the right to:   * get information in a way you understand * give feedback.   You have the right to communicate in the language or method you prefer. This includes using interpreters or communication aids if you need them.  You also have the right to meet with your provider and your supporters in a way that suits you. That might mean meeting at a time of day that works best for you. |
| Support to raise issues quickly and fairly | When there are issues with your government-funded aged care services, you have the right to:   * get support from your provider * complain without fear or being punished * get a quick and fair response to your complaints. |
| Support and connection with people and community | You may need support to understand your rights, make decisions or make a complaint. You have the right to get this support from an advocate or someone else you choose.  You have the right to communicate with your advocate or support person at any time you like. Providers should respect the role of the people who are important to you. For example, family, friends, and carers.  You have the right to stay connected with:   * the people who are important to you * your pets * your community, including by taking part in leisure or cultural activities.   Aboriginal and Torres Strait Islander peoples have a right to stay connected with their community, Country, and Island Home. |

## The principles of person-centred and respectful aged care

The Statement of Principles explains what the new legislation is trying to achieve. It helps to guide the decisions, actions and behaviours of providers, workers and government agencies on how the aged care system should operate.

The Statement of Principles also gives extra peace of mind. It says that people who use aged care services – or want to – will have their needs, wishes, and personal situations respected.

### Why this matters to you

As a person using aged care, you have the right to:

|  |  |
| --- | --- |
| ✓ | safe and high-quality care and services |
| ✓ | be treated with dignity and respect |
| ✓ | have your identity, culture and diversity valued and supported |
| ✓ | live without abuse and neglect |
| ✓ | be informed about your care and services in a way you understand |
| ✓ | access all information about you, including information about your rights, care and services |
| ✓ | have control over and make choices about your care and personal and social life, including where the choices involve personal risk |
| ✓ | have control over, and make decisions about, the personal aspects of your daily life, financial affairs and possessions |
| ✓ | your independence |
| ✓ | be listened to and understood |
| ✓ | have a person of your choice, including an aged care advocate, support you or speak on your behalf |
| ✓ | complain free from reprisal and have your complaints dealt with fairly and promptly |
| ✓ | personal privacy and to have your personal information protected |
| ✓ | exercise your rights without it adversely affecting the way you are treated |



Learn more about your rights in care

To learn more about person-centred care view the [Easy Read Fact Sheet](https://www.health.gov.au/resources/publications/a-new-aged-care-act-for-the-rights-of-older-people-easy-read-fact-sheet?language=en).

# Understanding ageism and why it matters

## What is ageism?

Ageism is how we think about, feel about, and act towards people based on their age. It includes stereotypes (beliefs), prejudice (feelings), and discrimination (behaviours). Ageism is often unconscious, widely accepted, and deeply embedded in society.

Definition (COTA Australia, 2023)

## Why it matters: rights-based aged care

Ageism matters because it can limit older people’s choices, dignity, and access to quality care. The Aged Care Act 2024 (the Act) addresses ageism by embedding a rights-based approach that upholds respect, inclusion, and autonomy for every older person.

The Statement of Rights, outlines that every older person has the right to:

* dignity, respect, and fairness
* choice and control over decisions
* safe, appropriate, and person-centred care
* freedom from discrimination—including ageism

Everyone has the right to be safe and free from all forms of age-based discrimination. Others making decisions for you based on your age, stereotypes and assumptions, can leave you feeling undervalued, disrespected, and powerless, and have a negative impact on all aspects of your life.

## How is ageism different to age discrimination?

Age discrimination is defined by law in the Age Discrimination Act 2004 (Cth). It applies in specific settings like employment or access to services.

| Ageism | Age discrimination |
| --- | --- |
| Stereotypes, prejudice and discrimination based on age | Unlawful unfavourable treatment based on age in specific contexts |
| Does it apply in aged care?  Yes, it is often interpersonal or systemic | Does it apply in aged care?  Sometimes, with some exemptions |

Age discrimination and legal exemptions – when aged-based decisions are permitted in aged care

Under the Age Discrimination Act 2004 (Cth), certain exemptions apply that limit how the law addresses age discrimination in aged care. These include provisions allowing age-based treatment decisions in health and aged care when reasonably necessary, such as prioritising older people for particular services. The Act also permits positive discrimination - measures designed to benefit or reduce disadvantage for older people - like senior discounts or targeted care programs.

Addressing ageism is key to promoting equality, dignity, inclusion and empowerment.

## What does ageism look like in aged care?

Ageism can be direct or indirect and can have an enormous impact on older people. Here are some examples of what ageism can look like:

| Behaviour | What it looks like |
| --- | --- |
| Dismissing concerns | “You’re just getting old, that’s normal.” |
| Patronising language (elderspeak) | Using baby talk or oversimplified words |
| Assuming incapacity | Excluding someone from decision-making without checking ability |
| Benevolent ageism | Over-helping or shielding someone “for their own good” |
| Limiting treatment options | Deciding against referrals based solely on age |

The following pages feature some examples of what ageism can look like in an aged care environment.

### Believing older people can’t make decisions for themselves

Harriet is 84 years old and lives in an aged care facility. She is mentally alert and enjoys joining into group discussions and activities and values making her own choices about her daily routine. Some days, her arthritis limits her ability to join in and move around unassisted or she needs additional support or time to complete daily tasks.

Even though she’s capable, staff often make decisions for her without asking - like picking her meals, telling her when to join activities, or helping her get dressed even when she says she can do it herself.



#### The impact

In response to this situation Harriet might end up feeling frustrated and disempowered.

#### What can Harriet do?

* she can communicate with a worker about her needs/wants
* get a trusted person, family, friend or advocate to raise this on her behalf with the worker
* get a trusted person, family, friend or advocate to raise this on her behalf with the aged care service.

It is the right of the older person to tell the provider what they want and need, and it is the responsibility of the provider to follow their wishes.

### Dismissing older people's concerns

Vin, a 79-year-old resident in an aged care facility, reports ongoing pain in his lower back. When he tells the nurse on duty, she responds, “That’s just what happens when you get old. Nothing to worry about.”

No further assessment was made by the nurse, no referral is made and no follow up is had with Vin.



#### The impact

In this situation, Vin might feel dismissed, ignored and that his concerns are not being taken seriously. Vin has the right to feel supported and respected and to have his concerns taken seriously.

#### What can Vin do?

* he can communicate with his carer about his needs/wants
* keep reporting his concerns to the nurse on duty
* get a trusted person, family, friend or advocate to raise this on his behalf with the nurse
* get a trusted person, family, friend or advocate to raise this on his behalf with the aged care service.

## Cultural safety in aged care

Under the Statement of Rights, older people have the right to culturally safe, culturally appropriate, trauma aware, healing-informed aged care services. This includes the right to have their identity, culture, spirituality, and diversity valued and supported. For older Aboriginal and Torres Strait Islander people this means they also have the right to stay connected to their community, Country and Island Home.

The term cultural safety is used throughout the Act. Cultural safety is about creating an environment where all older people feel safe, and their diverse needs and preferences are respected.

The National Aboriginal and Torres Strait Islander Ageing and Aged Care Council (NATSIAAC) defines cultural safety through the following key elements:

|  |  |
| --- | --- |
| Self-awareness and reflection | Cultural safety requires providers and workers to understand their own culture and the impact that their culture, thinking, and actions may have on the culture and wellbeing of others through ongoing critical self-reflection.  This self-reflection is critical to ensuring a culturally safe, respectful, responsive and racism free aged care system providing for the optimal safety, autonomy, dignity, and absolute wellbeing of Aboriginal and/or Torres Strait Islander Elders and older people, and their families. |
| Recipient centred | Only the older person who is the recipient of a service or interaction can determine whether it is culturally safe. |
| Building trust and relationships | Providers and workers must take responsibility for building trust and relationships with Aboriginal and/or Torres Strait Islander service users, and their families. |
| Centred on living experience and cultural needs | Creating a new, culturally safe aged care system which centres on the living experience, cultural, and ageing needs, as determined by Aboriginal and/or Torres Strait Islander service users themselves. |
| Trauma-aware, healing-informed practice | The implementation of a trauma aware, healing informed approach to professional practice, and facilitating a greater understanding and respect for individual and collective cultures, histories, knowledges, traditions, stories, and values of Aboriginal and/or Torres Strait Islander service users, their families and communities, will greatly support the delivery of a quality and culturally safe aged care. |
| Continuous improvement and accountability | Providers must firmly commit to continuously measure and improve structures and behaviours necessary for cultural safety and quality support to remain embedded in the Australian aged care system. |



Learn more about ageism

Read about age discrimination as defined by the [Australian Human Rights Commission on their website](https://humanrights.gov.au/age-discrimination-factsheets-and-guides).

For age discrimination factsheets and guides visit the [Australian Human Rights Commission's website](https://humanrights.gov.au/age-discrimination-factsheets-and-guides).

The Aged Care Diversity Framework initiative sets out how our aged care system can meet the diverse needs of all older Australians. It includes action plans for government, aged care providers and consumers. It also provides resources to help providers meet the goals of the framework. [Learn more about the framework](https://www.health.gov.au/our-work/aged-care-diversity-framework-initiative).

Chapter 2

Services & fees

# What services will look like

## Introduction to new care models and service delivery

There is a new model for delivering aged care services under the new legislation. The new model explains how the system will protect you, with a focus on your rights, wishes, and preferences. It also emphasises stronger working relationships between older people, providers and government agencies.

The new model changes how:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| complaints and feedback are managed | information is available to older people | existing support programs are regulated. |

The new model sets out how both in-home care and residential aged care will be regulated and provided.

'The aged care system should support older people to live at home for as long as they wish and can do so safely.

– Principle 1 of the Aged Care Taskforce

## Services to support you to live at home for longer

The Australian Government is improving in-home aged care to help you live independently at home for longer.

In-home care services will be provided through the Support at Home Program and Specialist Aged Care Programs.

### Support at Home Program

A new program has been developed called Support at Home, which will bring together some in-home aged care programs from 1 July 2025.

#### Support at Home will:

* better support you to remain independent at home through an increase in places
* bring together current in-home aged care programs over time
* have new assessment and classification arrangements to ensure the program is more equitable
* increase focus on early interventions to help you to stay active and independent
* ensure higher levels of care for those with complex needs who require more help to remain at home.

### Which programs will be replaced by Support at Home?

Support at Home is being implemented in two stages:

#### Stage 1 – From 1 July 2025

The Support at Home program will replace the Home Care Packages (HCP) Program and Short-Term Restorative Care (STRC) Programme.

#### Stage 2 – No earlier than 1 July 2027

The Commonwealth Home Support Programme (CHSP) will become part of the Support at Home program. CHSP will continue operating as usual until it moves to Support at Home.

Although CHSP will continue operating as usual until it moves to Support at Home from 1 July 2025 there will be changes to the way that CHSP services are described, regulated and delivered. This means that:

* we will regulate CHSP providers the same way as other aged care programs, providing greater protections for older people
* the services that CHSP provider deliver will stay the same but the service catalogue and names of many services will change to align to the Support at Home service list.

## Other services

While you may be eligible to access services under Support at Home, it may be possible for you to also access specialised services or access additional short-term services.

More information on participant programs can be found here: [Accessible aged care services for Australians | My Aged Care](https://www.myagedcare.gov.au/accessible-all).

Participants can also call the My Aged Care Contact Centre on 1800 200 422.

### Residential Care

Residential aged care services are available to people who can no longer live in their own home as they age and require continual government-funded aged care services. It includes accommodation and personal care 24 hours a day, as well as access to nursing and general health care services.

### Transition Care Program

The Transition Care Program (TCP) helps older people recover after a hospital stay by providing short-term care for up to 12 weeks. Care is tailored to the older persons’ needs and goals. It can provide a package of services such as physiotherapy, occupational therapy as well as social work, nursing support or personal care.

### Multi-Purpose Service Program (MPSP)

The MPSP provides combined health and aged care services for some rural and remote communities. Providers delivering services under this program are generally located in small communities where it would not be viable to operate a separate hospital and aged care home.

All providers will deliver residential care services, and some also provide services in the home or community. Contact your local Multi-Purpose Service (MPS) to find out more about the services they deliver. You can use the [Find a provider tool](https://www.myagedcare.gov.au/find-a-provider) on My Aged Care to search for services in your area.

### National Aboriginal and Torres Strait Islander Flexible Aged Care Program (NATSIFACP)

NATSIFACP funds aged care services that allow you to feel safe and secure in your identity, culture and community setting. It aims to help you remain close to home and community.



Learn more about what services will look like

For more Support at Home resources, visit the [Department's website](https://www.health.gov.au/our-work/support-at-home/resources?sort_by=field_h_resource_date_value&sort_order=DESC).

For more information on residential aged care, [visit the residential aged care homepage](https://www.health.gov.au/our-work/residential-aged-care/about-residential-aged-care).

For more information regarding NATSIFACP [visit the program's homepage](https://www.health.gov.au/our-work/national-aboriginal-and-torres-strait-islander-flexible-aged-care-program).

For more information regarding MPSP visit [the program's homepage](https://www.health.gov.au/our-work/multi-purpose-services-mps-program/reforms).

To learn more about the TCP, [visit the program's homepage](https://www.health.gov.au/our-work/transition-care-programme).

# Accessing services & funding

## Accessing funded aged care services under the Act

The Act sets up a consistent framework for assessing the eligibility of older people who are seeking to access government-funded aged care services.

There is now a single assessment process to determine if you are eligible to undergo a needs assessment and then what aged care services you require.

Here is a summary of the steps to access aged care services:

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|  |  |  |
| 1. Register and apply for aged care  Register and apply for services through the My Aged Care website or call My Aged Care on 1800 200 422. | 2. Eligibility test  You will be assessed against the Eligibility Criteria to determine if you qualify for government-funded aged care services. | 3. Aged care needs assessment  You will then be referred for an assessment. Assessments are done in person by an approved needs assessor.  The assessor will explain the process to you, including how the Integrated Assessment Tool works. The assessor may recommend approval of one or more services. |
|  |  |  |
| 4. Classification  The assessor will determine a classification type and classification level for the recommended services.  The classification type refers to the duration of care needed (duration meaning whether the services is ongoing, short-term, or related to hospital transition).  The classification level refers to the amount of funding you can receive for the services, unless you access services through a specialist aged care program. | 5. Prioritisation  You will be prioritised based on how urgently you need the services. | 6. Placement and access  Once you have been approved for services, you may be offered a place based on priority. You can start receiving services once a place has been allocated. |

## Fees and contributions

The new legislation sets out the individual fees and contributions that are payable for government-funded aged care services. This includes means testing to determine what your contributions will be.

The calculation for means testing is different between Support at Home and Residential Care.

Fees and contributions will also be different if you choose to access services under a specialist aged care program.

### Financial hardship assistance

Financial hardship assistance can help you, if for reasons beyond your control, you can’t afford your aged care costs. Each case is assessed on an individual basis.

If you are eligible, the Australian Government will pay some, or all, of your fees and charges – helping you to get the care you need. Or in the case of a specialist age care program, your provider will have their own policies in place to cover these situations.

### Support at Home contributions

Your contributions to government-funded aged care services will be based on a combination of your income and assets. You will access a Support at Home budget based on your approved classification category and level.

### The 'no worse off principle' for fee arrangements

A ‘no worse off’ principle is applied for anyone receiving care under an existing program.

This principle means that older rules still apply to people who were already using a service before new rules start.

Home care recipients moving to the new program in July 2025 will be allocated Support at Home funding that is equivalent to their existing Home Care Package (HCP) level and aligned to new program rules.

For participant contributions, a no worse off principle applies for Home Care Package (HCP) recipients who, on 12 September 2024, were either receiving a Home Care Package, on the National Priority System, or assessed as eligible for a package.

These participants will make the same contributions, or lower, than they would have had under HCP program arrangements, even if they are re-assessed into a higher Support at Home classification at a later date.

**‘No worse off’ principle arrangements include:**

Previous HCP recipients who were not required by Services Australia to pay an income-tested care fee will continue to make no contributions for the remainder of their time in Support at Home.

If you are a full rate pensioner paying no fees under your HCP as at 12 September 2024, you will never pay fees under Support at Home.

Previous HCP recipients who, based on the outcome of their income test were required to pay an income-tested care fee, will transition to Support at Home with discounted contribution arrangements. Services Australia will notify these participants, and their provider of the contribution amount payable. These participant contribution arrangements also include maintaining the current lifetime cap.

If you are currently on a Home Care Package you will move to the Support at Home program in July 2025.

You will be allocated Support at Home funding that is equivalent to your existing Home Care Package level and aligned to the new program rules.

## Residential Care contributions

The new legislation will see some changes to the Residential Care contributions including the following.

### Means testing

* A resident’s means tested amount is based on your assessable income and assets.
* It will **continue** to be the sum of your **income tested amount** and **asset tested amount.**
* Income and asset taper rates are changing.
* Current means tested care fee will be abolished.

### Introduction of hotelling contribution

* The Hotelling Supplement will be means tested for new residents (from 1 July).
* Residents who can afford to pay their full accommodation costs will contribute to daily living costs such as food, cleaning, laundry and utilities.

### Non-clinical care contribution

* The Government will fund all clinical care costs in residential aged care.
* The new means-tested Non-Clinical Care Contribution (NCCC) will replace the Means Tested Care Fee.
* This contribution is for non-clinical care costs such as bathing and mobility assistance.
* It only applies to residents paying the full Hotelling Supplement contribution.

### Mandatory reporting

* Providers will regularly report individual refundable deposit balances.
* You will need to report changes to your personal and financial circumstances.
* You can elect to be classified ‘means not disclosed’. You won’t be asked to report financial circumstances and you won’t be eligible for government support with accommodation costs or NCCC.

### Accommodation costs

* Retentions will apply to the refundable accommodation deposit (RAD) or refundable accommodation contribution (RAC) paid by eligible residents.
* Daily accommodation payments (DAPs) will be indexed on 20 March and 20 September.

**‘No worse off principle’ for residential care fee arrangements**

If you are currently in mainstream residential care, you will retain your existing contribution arrangements for the entirety of your stay in residential care. A no worse off principle will apply to everyone in residential aged care on 30 June 2025. Existing residents retain their existing contribution arrangements for the entirety of their stay in residential care.



Learn more about accessing services and funding

To learn more about the Support at Home Program, [view the handbook here](https://www.health.gov.au/resources/publications/support-at-home-program-handbook?language=en).

For more information about the Multi-Purpose Service Program, [visit the webpage here](https://www.health.gov.au/resources/publications/support-at-home-program-handbook?language=en).

For more information about the [National and Torres Strait Islander Flexible Aged Care Program visit the page](https://www.health.gov.au/our-work/national-aboriginal-and-torres-strait-islander-flexible-aged-care-program) here.

To view a summary of the Support at Home Program and the contributions participants in the program will pay, [view the factsheet](https://www.health.gov.au/resources/publications/support-at-home-fact-sheet?language=en) here.

For more information about fees and scenarios, [visit the residential aged care fees and scenarios page](https://www.health.gov.au/our-work/residential-aged-care/charging/fees/scenarios).

For more information on financial hardship assistance, visit the [MyAgedCare page](https://www.myagedcare.gov.au/financial-hardship-assistance).

Chapter 3

Safety & empowerment

# Quality & safety in care

## The Strengthened Aged Care Quality Standards

The strengthened Aged Care Quality Standards (Quality Standards) set expectations for providers to ensure they deliver safe and quality care. They create a shared understanding of what is expected in aged care.

The strengthened Quality Standards:

* place older people at the centre of their care
* support older people living with dementia
* better include older people from diverse backgrounds
* provide stronger requirements for clinical care and food and nutrition
* use clear language and minimise duplication
* reflect the new Statement of Rights.



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| --- | --- |
|  | The individual  I have the right to be treated with dignity and respect and to live free from any form of discrimination. I make decisions about my government-funded aged care services, with support when I want or need it. My identity, culture and diversity are valued and supported, and I have the right to live the life I choose. My provider understands who I am and what is important to me, and this determines the way my government-funded aged care services are delivered. |
|  | The organisation  The organisation is well run. I can contribute to improvements to care and services. My provider and aged care workers listen and respond to my feedback and concerns. I receive government-funded aged care services from aged care workers who are knowledgeable, competent, capable and caring. |
|  | Care and services  The government-funded aged care services I receive:   * are safe and effective * optimise my quality of life, including through maximising independence and reablement * meet my current needs, goals and preferences * are well planned and coordinated * respect my right to take risks. |
|  | The environment  I feel safe when receiving government-funded aged care services. Where I receive government-funded aged care services through a service environment, the environment is clean, safe and comfortable and enables me to move around freely. Equipment is safe, appropriate and well-maintained and precautions are taken to prevent the spread of infections. |
|  | Clinical care  I receive person-centred, evidence-based, safe, effective, and coordinated clinical care services by health professionals and competent aged care workers that meets my changing clinical needs and is in line with my goals and preferences. |
|  | Food and nutrition  I receive plenty of food and drinks that I enjoy. Food and drinks are nutritious, appetising and safe, and meet my needs and preferences.  The dining experience is enjoyable, includes variety and supports a sense of belonging. |
|  | The residential community  I am supported to do the things I want and to maintain my relationships and connections with my community. I am confident in the continuity of my care and security of my accommodation. |

## How providers are expected to comply with the Standards

There is a Code of Conduct in Aged Care (Code of Conduct) that all registered providers, carers, and aged care workers (including volunteers) must follow when delivering aged care services.

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| **Safe and quality services**  Providers must deliver services that are safe and of quality, ensuring they meet the needs and rights of older people. | **Accountability**  Providers are held accountable for their actions and must regularly demonstrate their compliance with the Quality Standards. | **Continuous improvement**  Providers must commit to continuous improvement towards the delivery of high-quality care. |

If you need to report an incident that you believe breaches the Quality Standards, the Aged Care Quality and Safety Commission will take appropriate action to ensure transparency and accountability, supporting the delivery of high-quality and safe care.

## What safe, respectful, high-quality care should feel like

Mei, a 70-year-old with chronic health issues, has recently chosen to receive care in her home. She values her privacy and enjoys spending time with her family.

The aged care provider delivers care in line with responsibilities under the Act including the Strengthened Standards and the Code. Here is how these obligations shape Mei's care.



### Promoting health

The service provider ensures that all Support at Home services delivered to Mei promote her health and wellbeing. They regularly assess her needs, wishes and preferences and update her care plan to reflect any changes.

### Worker suitability

The provider has a robust system in place to ensure that all workers are suitable for delivering aged care services, care or support. They conduct regular screenings and background checks to maintain a safe environment.

### Safeguarding functions

The provider has a system for reporting and addressing any inappropriate conduct. If any issues arise, they are promptly reported to the regulatory agencies, ensuring transparency and accountability.

### Positive impact

By complying with the Strengthened Standards and the Code, the provider delivers Mei with a supportive and respectful environment. She feels safe, valued, and empowered, which significantly enhances her quality of life.

Bruce, a 75-year-old with mobility issues, recently moved into an aged care home. He values his independence and enjoys participating in community activities.

The residential aged care provider follows the provider obligations outlined in the Act. Here is how these obligations shape Bruce's care:



### Safe and quality services

The residential aged care provider ensures that all services delivered to Bruce are safe and of high quality, and in line with his service agreement. They regularly assess his needs, wishes and preferences and update his care plan to reflect any changes.

### Incident management

The aged care home has a robust incident management system in place. If any incidents occur, a worker promptly reports it to the regulatory agencies, ensuring transparency and accountability.

### Restrictive practices

The aged care workers only use restrictive practices as a last resort and in accordance with prescribed rules. They always consider the impact on Bruce and seek alternatives whenever possible.

### Positive impact

* **Personalised care:** Bruce's care plan is tailored to his needs, wishes and preferences, ensuring he receives the best possible care.
* **Safety and wellbeing:** The residential aged care provider’s commitment to safe and quality services ensures Bruce’s safety and wellbeing.
* **Transparency:** The incident management system ensures that any issues are promptly addressed, maintaining trust and accountability.

## Provider responsibilities and duties of care

All government-funded aged care providers need to be registered with the Aged Care Quality and Safety Commissioner before they can start offering services. As part of their registration, providers need to meet obligations based on the type of services they deliver.

The obligations aim to have the following result:

* **Safe and quality services:** Providers must deliver services that align with the rights of older people, ensuring safety and quality.
* **Accountability:** Providers are held accountable for their actions and must report incidents to regulatory agencies.

Once registered, a provider must meet obligations that include:

* Delivery of government-funded aged care services must be in accordance with any applicable requirements prescribed by the Aged Cared Rules 2025 (the Rules).
* Providers actions, and those of their aged care workers, must be in alignment to the Code of Conduct.
* Providers must have an agreement with every older person they provide government-funded aged care services to, known as a Service Agreement.
* Providers must have a care and services plan for every older person they provide government-funded aged care services to, in line with the Rules.
* Providers must comply with the Rules surrounding the use of restrictive practices.
* Providers also must have sufficient incident management processes and be aware of their obligations surrounding reportable incidents.

Failure to meet these conditions could result in the providers registration being revoked, and/or fines being imposed.

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Learn more about quality and safety in care

Find out more information about the Quality Standards and to better understand how providers will be assessed against the standards [visit the Department's website](https://www.health.gov.au/our-work/strengthening-aged-care-quality-standards) here.

# Decision-making & empowerment

## What supported decision-making is and how it protects your rights

Supported decision-making is the process of providing support to help you make and communicate your decisions and remain in control of your life. Everyone has the right to make decisions about their life, including the support and services they receive from aged care. This applies even in circumstances where there is personal risk and is driven by your will and preference, not best interest.

The Statement of Rights is a fundamental part of the Act supporting older people to make and communicate their decisions.

## You are in control of your care decisions

When the Act starts, you can still choose who can support you to make decisions, including if you want or need support. These people are called registered supporters. Carers and other significant people in your life can continue to play an important role in supporting you, without needing to become a registered supporter.

As of 30 June 2025, if you have a regular or authorised representative active in My Aged Care, they will become a registered supporter on 1 July 2025.

Becoming a registered supporter does not provide a person with decision-making authority. A registered supporter’s role is to support you to make decisions. In supporting you to make decisions, registered supporters have duties they must uphold.

A registered supporter must:

* **Prioritise the older person's preferences**  
  Prioritise the will and preferences of the older person they support, and promote their personal, cultural and social wellbeing.
* **Provide support as needed**  
  Support the older person only as much as needed for them to make their own decisions.
* **Help maintain decision-making ability**  
  Do their best to help the older person maintain their ability to make their own decisions.
* **Avoid conflicts of interest**  
  Take steps to avoid or manage conflicts of interest.
* **Understand duties**  
  Ensure they know and understand their duties. This includes any consequences for non-compliance.

When performing these duties, registered supporters must act honestly, diligently, and in good faith. All these changes put the rights of older people at the centre of decision-making.

Some registered supporters may also have guardianship, enduring power of attorney or similar legal authority. These people are appointed decision-makers under state or territory arrangements to make a decision on behalf of an older person.

If you or your current regular representative do not want to move to a new supporter relationship, you can withdraw/end the relationship in My Aged Care. Doing this before 1 July is called ‘opting out’.

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Learn more about decision-making and empowerment

To learn more about supported decision-making and how to register a supporter for aged care, [visit this webpage](https://www.health.gov.au/our-work/aged-care-act/about).

To learn more about upcoming changes to support roles and relationships and opting out, [visit this webpage](https://www.myagedcare.gov.au/arranging-someone-support-you/upcoming-changes-support-roles-and-relationships).

# Speaking up & staying safe

## How to raise concerns if something feels wrong

Every older person, people who are close to them, and aged care workers should feel safe to make complaints about the delivery of funded aged care services without fear of being punished or treated unfairly.

Making a complaint can improve the quality of your care and help other people with the same problem.

Providers will be required to have a complaints and feedback system to provide an older person, their family and carers, or workers a pathway to provide comment on the delivery of government-funded aged care services.

You can also make a confidential or anonymous complaint to the Aged Care Quality and Safety Commission (ACQSC). Raising concerns is safe and easy and anyone can make a complaint, including:

* people who use aged care
* family, friends, representatives and carers of people who use aged care
* aged care staff and volunteers
* health and medical professionals.

## Overview of whistleblower protections

The Act will do more to protect whistleblowers – people who call out issues. This is to make sure older people, people who are close to them, and aged care workers can report information without fear that they will be punished or treated unfairly.

People can make a report to:

* an aged care worker of a registered provider
* a registered provider
* a responsible person of a registered provider
* an independent aged care advocate
* the department, or an official of the department
* the Commissioner or a staff member of the ACQSC
* police officer.

People can make the report in person, over the phone or in writing. The report can also be made anonymously.

The report can be made about someone who has not followed the aged care law, or more broadly, about an organisation that hasn’t followed the aged care law.

If someone makes a report, they will:

* be protected from any negative results that come from making the report
* have their identities or identifying information protected, with some exceptions – for example, where it is necessary to share information with the ACQSC or a lawyer, or to prevent a serious threat to a person or people.

## Where to go for help and advocacy support

If you’re seeking, or accessing, government-funded aged care services,  
and would like support to work out what’s best for your situation, an aged care advocate can help.

An advocate is an impartial person who can support you in a variety of situations – from understanding aged care services or fees through to understanding your rights and managing your aged care. The National Aged Care Advocacy Program (NACAP) is free, independent and confidential support that can be used by all older persons accessing or seeking government funded aged care services, their families and carers.

The Australian Government also funds the Older Persons Advocacy Network (OPAN) to deliver the NACAP across Australia. The program provides free, confidential and independent information and support to older people seeking or accessing government-funded aged care as well as their families of choice or and other supporters.

OPAN’s aged care advocates can help you to understand and exercise your aged care rights, find aged care services that meet your needs, and resolve issues with your government-funded aged care provider.

If you have questions or concerns, you can speak to an aged care advocate by calling the Aged Care Advocacy Line on 1800 700 600 to be connected with the aged care advocacy organisation in your state or territory or alternatively visit their website.

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Learn more about speaking up and staying safe

To learn more about advocacy support visit the [OPAN website](https://opan.org.au/) or download the [OPAN self-advocacy toolkit](https://opan.org.au/information/download-resources/) here.

For more information about whistleblower protections or to raise a concern visit the [Department's website](https://www.health.gov.au/our-work/aged-care-act/about#protection-for-whistleblowers).

For more information about making a complaint, visit the [ACQSC's website](https://www.agedcarequality.gov.au/contact-us/complaints-concerns/what-do-if-you-have-complaint).