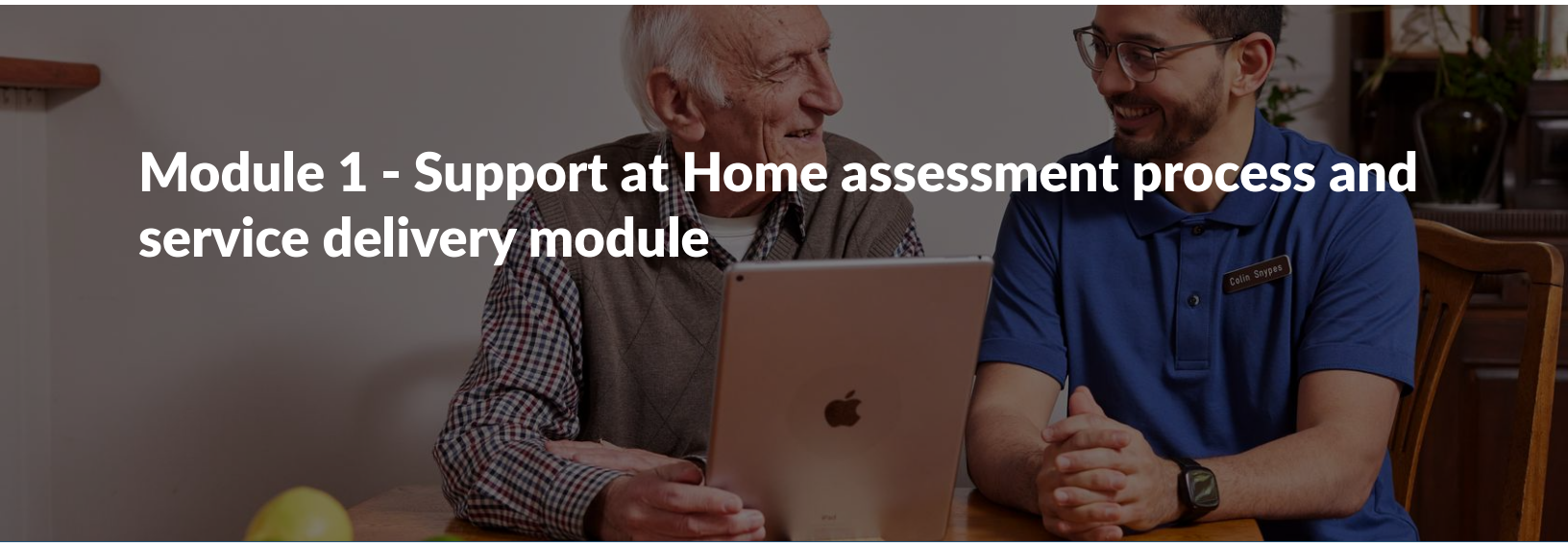


Module 1 - Support at Home assessment process and service delivery module

About

This Support at Home assessment process and service delivery module gives providers a comprehensive view of the aged care assessment process and delivering services to Support at Home participants.

The department reserves the right to change or add supplementary information to this training.

Duration

This course will take approximately **30 minutes** to complete. You can access the learning resources at any time.

Start

Select **Start course** above or **select a specific lesson below** to begin.

Aged Care Quality Standards

UNDERSTANDING AGED CARE ASSESSMENTS

Assessment and access

UNDESTANDING THE FUNDING CLASSIFICATIONS AND THE SERVICE LIST

Funding classifications for ongoing services

The service list and service categories

CEASING /TEMPORARILY STOPPING SERVICES | OTHER PROGRAMS

Ceasing and temporarily stopping services

Other programs for older people

COURSE WRAP-UP

Knowledge check

Helpful resources

Course wrap-up

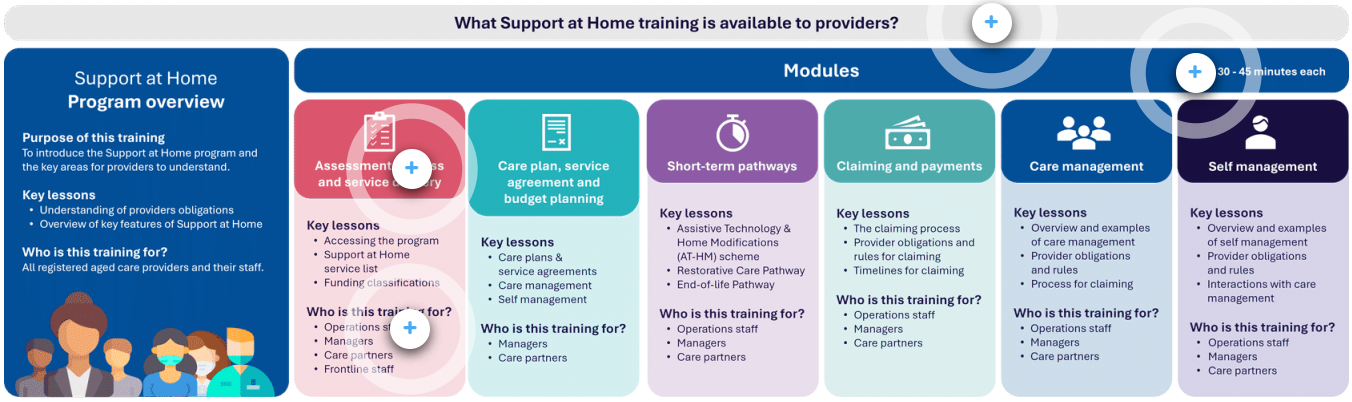
Lesson 1 of 10

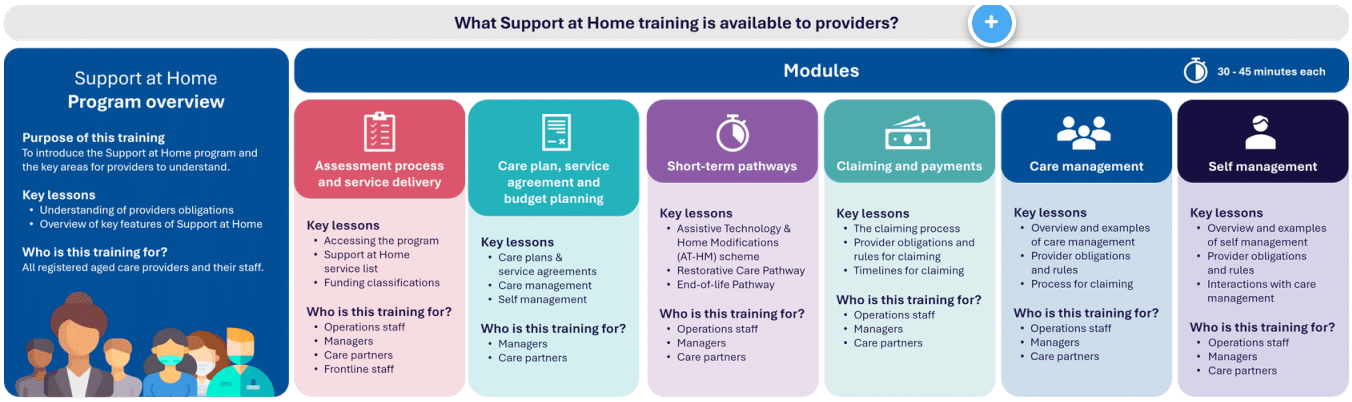
Welcome

The Department of Health, Disability and Ageing acknowledges and pays respect to the Traditional Owners and Custodians of the lands throughout Australia. We recognise the strength and resilience of Aboriginal and Torres Strait Islander people, and their continuing connections to land, sea and community. We pay our respects to Elders past, present and emerging. We also extend our respects to any Aboriginal and Torres Strait Islander people participating in this learning.

Aboriginal and Torres Strait Islander people should be aware that this training may contain images of deceased persons in photographs.

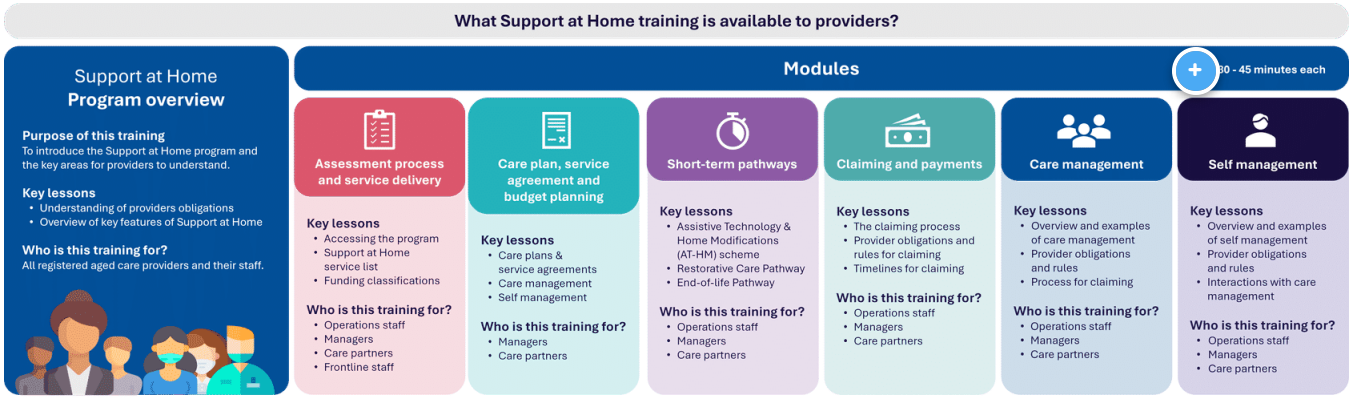
The diagram below provides an overview of the Support at Home training modules available.





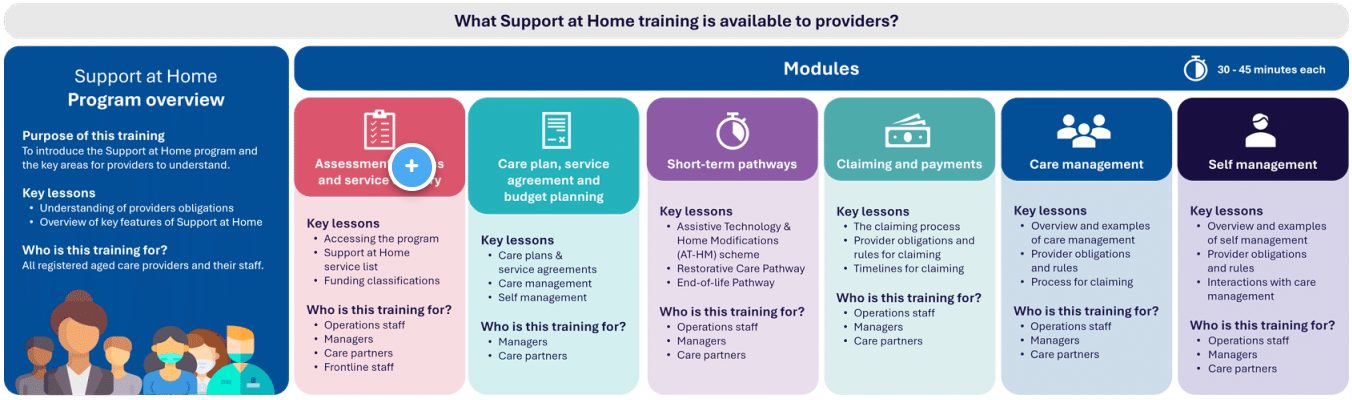
Is this training mandatory?

No, but this training is strongly recommended. This training will help providers understand the Support at Home program prior to the changes taking effect when Support at Home commences.



How long will it take to complete this training?

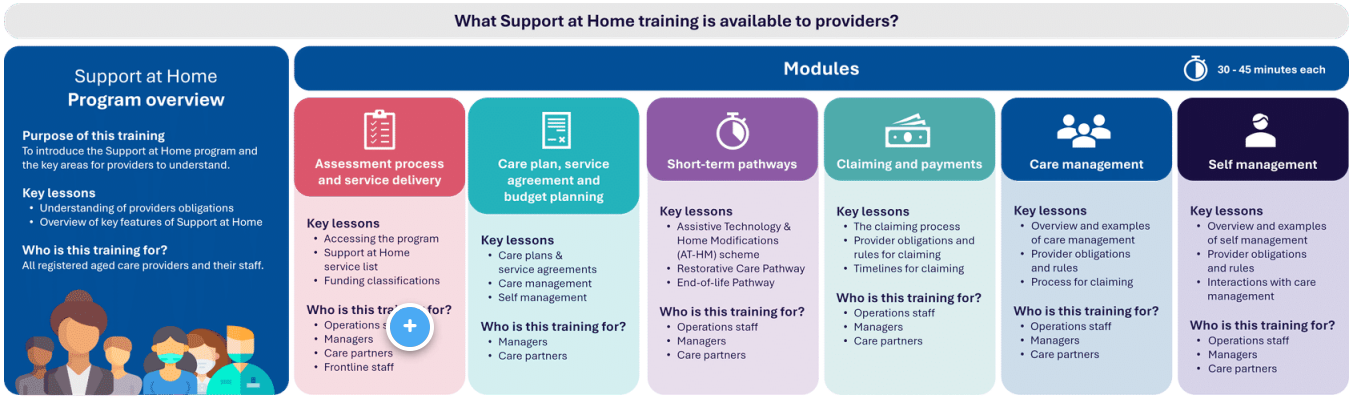
About 30 minutes.



Purpose of this training

This training supports providers to deliver government-funded aged care services.

This training will cover the My Aged Care assessment process and delivering Support at Home services and their funding categories.



Who is this training for?

This training has been developed for all registered aged care providers and their staff.

This module may be more relevant to operations staff, managers, care partners and frontline staff within provider organisations. This includes staff members who need a comprehensive understanding of the services and funding under Support at Home.

This training may also be relevant to other groups such as independent aged care advocates and third-party providers.

Accessibility

This training has been developed to meet accessibility standards. Learners who are using assistive technologies (such as Job Access with Speech) will also be able to complete the training.

The department is committed to inclusion, and we are aware that each of us experience inclusion differently. Please let us know what we can do to make this course accessible and inclusive for you. If you would like to request a different reasonable adjustment or to provide accessibility feedback please email learning.and.capability@health.gov.au.

NEXT LESSON: AGED CARE QUALITY STANDARDS FOR ASSESSMENTS AND SERVICE DELIVERY

Aged Care Quality Standards

The objectives of the Aged Care Act 2024 (the Act) establish a person-centred framework. This framework promotes the older person's right to an adequate standard of living in the aged care system. This framework should be applied when delivering aged care services.

The strengthened Aged Care Quality Standards.

- One key area of the Act is the strengthened Aged Care Quality Standards, which links directly to the obligations of a provider delivering services.
- The Standards explain what safe quality care should look like and supports providers to deliver services that older people need and expect.

Image of the Aged Care Quality Standards diagram

Providers need to ensure that they follow their obligations under the aged care laws when delivering Support at Home services.

These obligations arise from the Act, Aged Care Quality Standards, Statement of Rights and Statement of Principles.

Click the '+' icons to explore the key provider obligations when delivering Support at Home services.

Standard 1 of the strengthened Quality Standards requires providers to support older people to exercise dignity of risk to achieve their goals and maintain independence and quality of life.

The Statement of Rights and the Statement of Principles support a person-centred aged care system, ensuring older people receive equitable, safe and quality care.

Providers will need to work with participants to balance their duty of care with a participant's right to make choices, even if their choices include some risk to themselves.

This concept is known as 'dignity of risk' and is an older person's right under the Statement of Rights.

More information on dignity of risk can be found on the Strengthened Quality Standards of the Aged Care Quality and Safety Commission.

The Aged Care Diversity Framework provides guidance for an accessible aged care system for every older person.

Providers cannot discriminate against participants based on cultural, ethnic or spiritual backgrounds. All providers will need to deliver culturally safe services.

Providers who wish to claim specialised care offerings on My Aged Care will need to apply for Specialisation Verification. More information on Specialisation Verification is on the department's website at Specialisation Verification for aged care services.

Providers need to have a complaints and feedback system in place for participants, their supporters or family members, aged care workers and others to provide feedback and make complaints.

View the Aged Care Quality and Safety Commission's website or more information on resolving complaints.

Providers have a responsibility to remain observant of any risks and report or seek advice if there are risks to the participant's health, safety and wellbeing. This includes identifying and reporting elder abuse.

Providers will need to ensure care and services are delivered in a way that:

- is free from all forms of abuse
- ensures the participants are treated with dignity and respect.

Learn more about delivering Support at Home services

Image of a magnifying glass

- View Chapter 5 of the Support at Home program manual

NEXT LESSON: ASSESSMENT AND ACCESS

Assessment and access

Older people must register or be referred for an aged care assessment. Supporters can also register an older person on their behalf.

Eligibility for Support at Home

Government-funded aged care services under the Support at Home program are available to older people who meet the following criteria:

- persons over the age of 65, or
- Aboriginal and Torres Strait Islander persons over the age of 50, or
- persons at risk of, or experiencing, homelessness and over the age of 50,

And

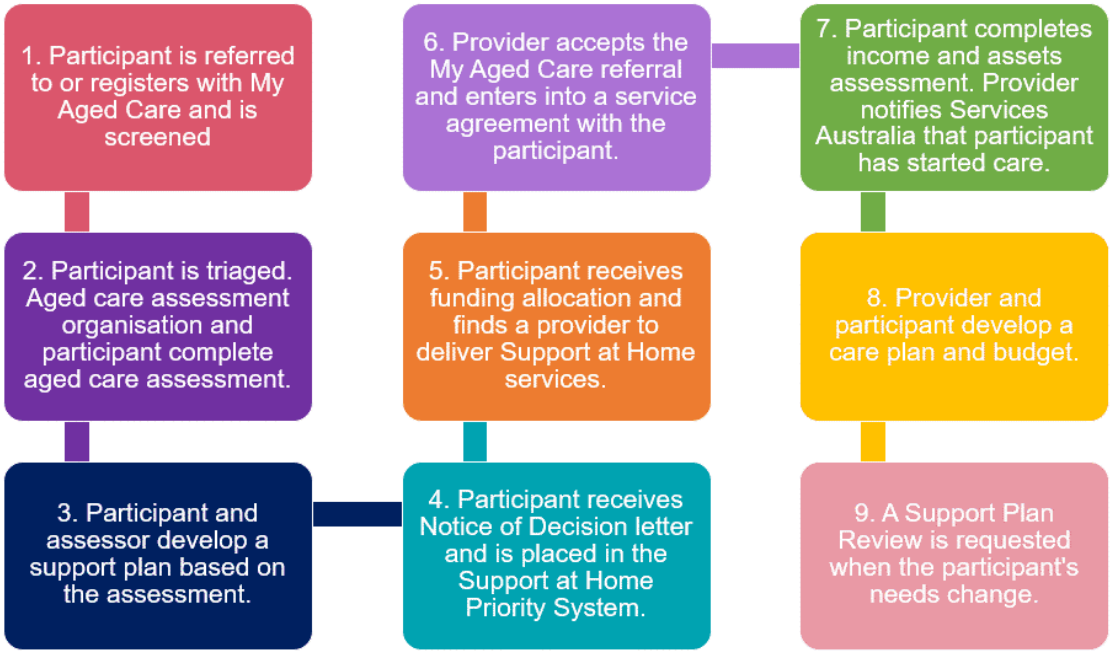
- have eligible care needs. This means that they:
    - experience physical, mental or social difficulty with daily living activities, and/or
    - need help from another person to use an aid to stay physically, mentally or socially able to function independently.

The aged care assessor, in discussion with the older person and using the Integrated Assessment Tool (IAT) determines what aged care services the older person will need to achieve their care goals.

Aged care assessments

Older people should first register with My Aged Care. They can then register to be assessed for aged care services. The detailed steps are outlined below.

Assessment and access to Support at Home



Click **start** to begin

Step 2

Participant is referred to or registers with My Aged Care and is screened.

Older people who wish to access funded aged care services need to register with My Aged Care and be screened.

They can do this by:

- calling My Aged Care on 1800 200 422
- using the Apply for an Assessment Online form on the My Aged Care website
- referral from their GP, health professional or hospital
- booking a face-to-face appointment with an Aged Care Specialist Officer (ACSO) at Services Australia

Screening involves the older person answering questions about their situation and needs. This will help determine the best pathway to the right services.

During the screening process, older Aboriginal and/or Torres Strait Islander people will be able to indicate a preference for their assessment to be conducted by an Aboriginal and Torres Strait Islander assessment organisation.

Step 3

Participant is triaged. Aged care assessment organisation and participant complete aged care assessment.

After completing the screening, the My Aged Care Contact Centre or an Aged Care Specialist Officer (ACSO) will refer the older person to an aged care assessment organisation. A Triage Delegate at the organisation will review the referral and speak with the older person.

Once the triage process is complete, referrals are assigned to an aged care assessor who will carry out the needs assessment using the Integrated Assessment Tool (IAT).

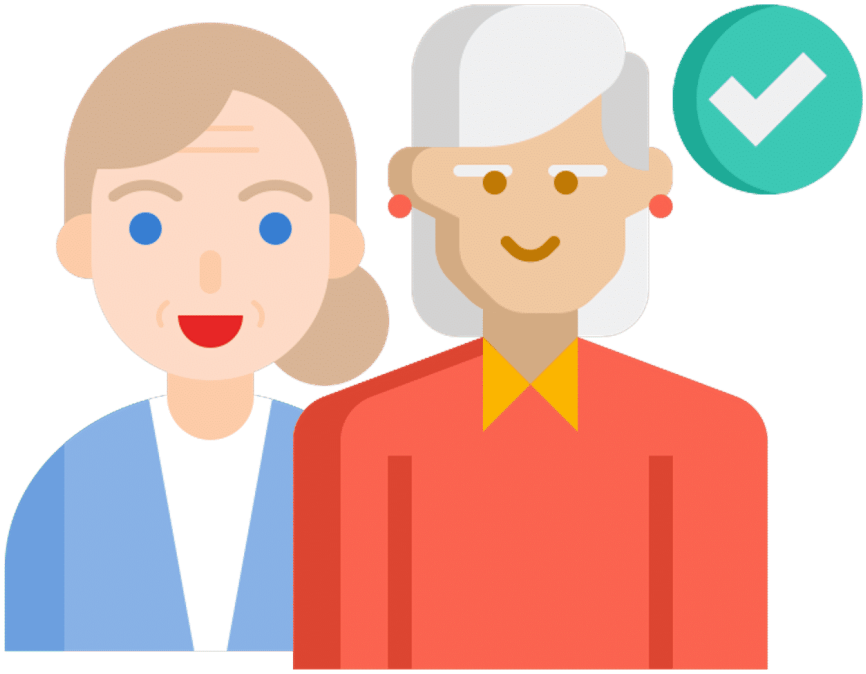
The IAT is a needs-based assessment tool that determines:

- If the person is eligible for an assessment.

- The type of assessment needed, such as whether they require a home support or a comprehensive assessment.
- The urgency and priority of the assessment.

Step 4

Participant and assessor develop a support plan based on the assessment.



Once an older person is assessed as eligible for Support at Home, they will develop a support plan with their assessor. This plan summarises the findings of the aged care assessment and includes details about the participant's needs, goals, and recommendations.

The support plan that is provided with the notice of assessment contains the following information:

- A summary of the older person’s assessed needs and the reason for the referral for aged care assessment
- A summary of the findings from the assessment

- The older person's goals, which are developed in partnership with them. These goals are supported by evidence-based strategies and solutions
- The approved **Support at Home funding classification** and **priority category**
- The services the older person can access from the Support at Home service list
- If applicable, approval for funding of short-term supports, such as the **AT-HM scheme**, the **Restorative Care Pathway**, or the **End-of-Life Pathway**

This plan ensures that the older person understands the services and support they may access.

Step 5

Participant receives a Notice of Decision letter and is placed in the Support at Home Priority System.

In addition to the support plan, a **Notice of Decision** document is sent to the older person outlining their eligibility and approval from the Assessment Delegate to access Commonwealth funded aged care services.

The Notice of Decision includes:

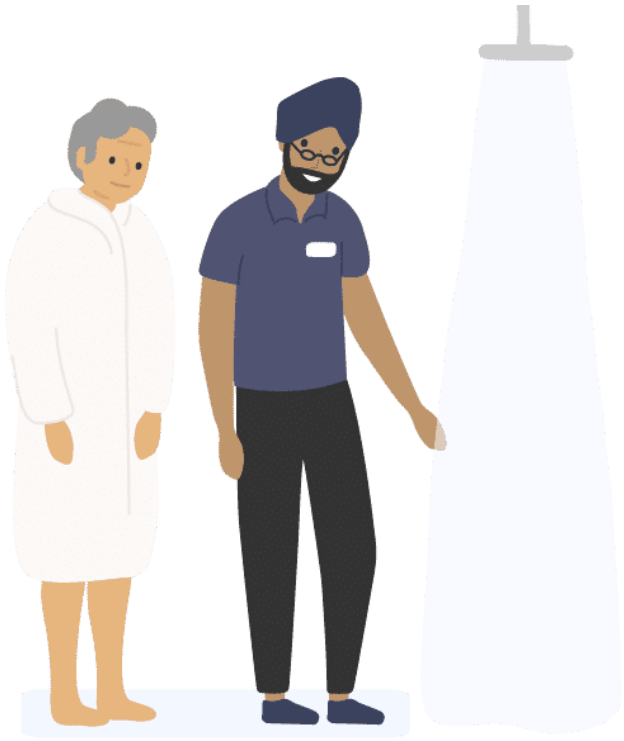
- The approved services the older person is eligible for
- The reasons and evidence supporting the Assessment Delegate's decision
- The older person's right to question or appeal the decision if they don't agree with it

- The approved short-term pathways and funding tiers.

The older person is then placed in the Support at Home priority system and waits until a funded place in the program is available. The older person will not be able to access services until funding has been allocated. The amount of time they wait for services will depend on the priority group they are in.

Step 6

Participant receives funding allocation and finds a provider to deliver Support at Home services.



Once funding for ongoing services is allocated, participants have **56 calendar days** to choose a provider and **enter into a service agreement.**

Participants can also request an **additional 28-day extension** through MAC if they need more time to find a suitable provider.

After a participant selects their provider, the provider will receive a referral in the **My Aged Care Service and Support Portal.** Providers can view the referral details and the participant's record to decide if they can offer the required services and when to start.

A single provider will manage all the services for the participant, including care management and AT-HM services. The provider can hire a third party to

help deliver some services, but they are still responsible for making sure the third party complies with relevant obligations.

Step 7

Participant and provider enter into a service agreement. Participant completes income and assets assessment.

When a participant selects a provider, the provider needs to **accept the referral** in [My Aged Care Service and Support Portal].

Both parties then must enter into a **service agreement.** This needs to occur before services can be delivered.

The service agreement outlines the rights and responsibilities of both the participant and the provider, including what services will be provided.

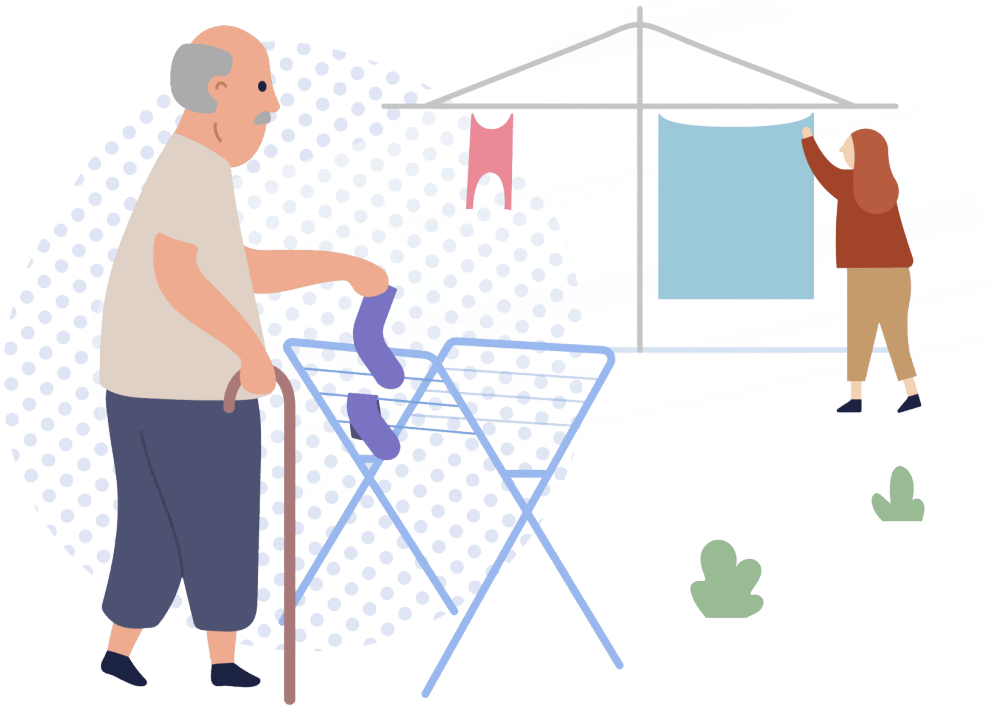
Important points to note:

- The service agreement must be clear, accessible, and written in plain English, avoiding legal jargon. It must also respect the participant's rights, ensuring there are no unfair contract terms.

- Providers cannot charge fees for entering or exiting the service.
- The agreement must provide enough time for participants to consider the terms, ask questions, and seek advice if needed.

Step 8

Provider accepts the My Aged Care referral and notifies Services Australia that the participant has started care.



Providers need to submit the **start notification** to Service Australia **within 28 calendar days of the** service agreement being entered into.

If a provider does not advise Services Australia of entry information, they will not be paid any applicable subsidy or supplements.

At the same time as notifying Services Australia, the provider should also contact the department if their participant also receives a compensation entitlement.

Note: All transitioning HCP care recipients will continue to have a valid Support at Home start notification when Support at Home commences. Providers will not need to submit a new start notification.

Step 9

Provider and participant develop a care plan and budget.

Providers will need to undertake care planning and budget planning within 28 calendar days of service commencing.

Step 10

A Support Plan Review is requested when the participant's needs change.

A participant or a provider can ask for a Support Plan Review when:

- there is a change to the participant’s needs or goals
- additional services or time-limited services have ended
- informal care arrangements have changed or ceased
- additional AT-HM funding is required.

A request can be made through My Aged Care or from a Services Australia Aged Care Specialist Officer.

A Support Plan Review may lead to:

no changes to the support plan

updates to the support plan

a new assessment

Summary

The assessment process details the steps that participants need to take to access Support at Home services, and the steps that providers need to take after participants are assigned funding, and before the provider can start providing in-home aged care services.

Learn more about the assessment process

Image of a magnifying glass

Providers can refer to the My Aged Care website to find out how to help older people access aged care.

Image of handshake

A registered supporter can assist an older person during the assessment process

The Aged Care Act 2024 allows an older person to nominate a **registered supporter**. Support persons must be registered with My Aged Care and the older person must give consent for this role to be activated.

The role of the registered supporter is to support the older person however they need. It can be assistance in communicating their

decisions, assistance with making decisions as well as support in engaging with their provider.

Providers will confirm the registration of the supporter and include them in discussions as agreed with the older person.

In addition to registered supporters, older Aboriginal and Torres Strait Islander people are also able to access the following arrangements:

> The **Elder Care Support program** can assist older Aboriginal and Torres Strait Islander people to access aged care services across urban, regional and remote parts of Australia. More information is on the department's website at Elder Care Support.
>
> The **Care Finder program** helps **vulnerable older people who require intensive support** to interact with My Aged Care and connect them to other relevant supports in the community. Contact information for care finder services in each region is on the My Aged Care website at Help from a care finder.

An older person may appoint a guardian.

If an older person does not have capacity to make their own decisions, a guardian can be appointed.

Guardians (as outlined under section 28 of the Act) can make decisions, on behalf of the older person, that are authorised under the relevant state or territory legal arrangement.

Priority ratings

Support at Home will introduce a new **prioritisation system** to replace the National Priority System for Home Care Packages.

This system will ensure that access to services is based on a participant's **assessed needs**, rather than their location.

A participant's priority rating will be determined during their **aged care needs assessment** and assigned one of four levels as shown in the image.

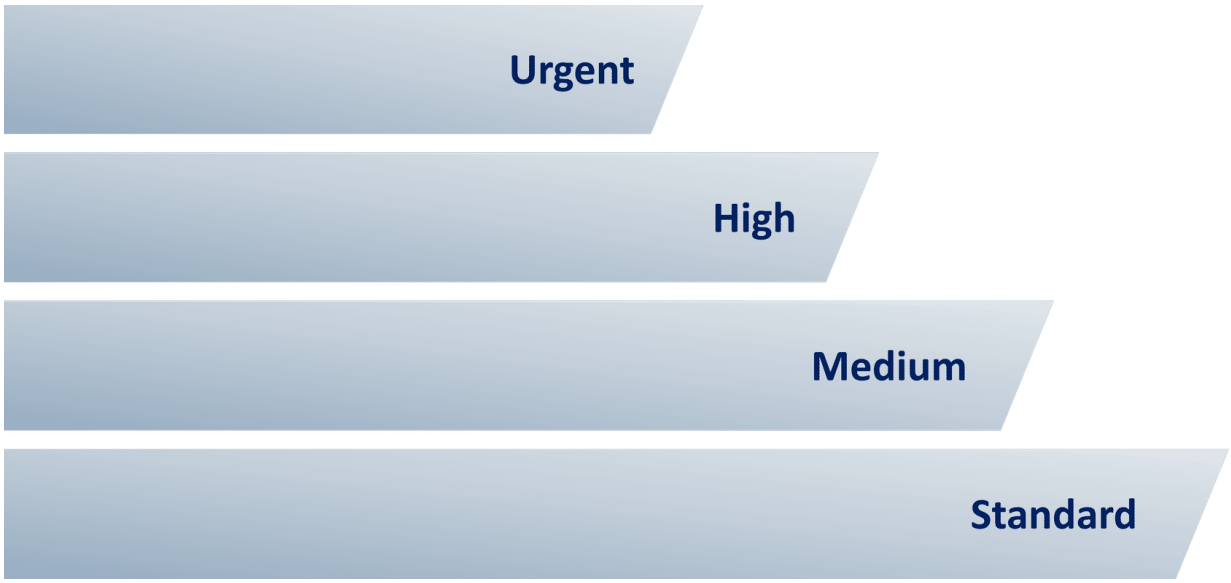


Figure of the four priority ratings for aged care assessments

Two key factors influence prioritisation:

1. Information collected by the aged care assessor using the Integrated Assessment Tool (IAT)
2. The date of approval for home care

Participants on the Restorative Care Pathway, End-of-Life Pathway or AT-HM scheme will access immediate funding on approval. Additionally, CHSP services will remain available for emergencies, providing support before budget allocation if needed.

Learn more about assessments and access to Support at Home

Image of a magnifying glass

View Chapter 6 of the Support at Home program manual

NEXT LESSON: FUNDING CLASSIFICATIONS FOR ONGOING SERVICES

Funding classifications for ongoing services

On commencement of the Support at Home program, there will be 8 ongoing classifications available to new participants with assessed needs.

These classifications are structured to provide increasing levels of funding as care needs increase for the older person to continue to live independently.

Categories of care are assigned at the assessment stage. When care needs increase, the participant will need to request a reassessment to seek higher categories of care funding.

The table below outlines the funding amounts for each of the 8 ongoing service classifications, giving the quarterly amount and the annual funding limit.

Funding amounts are indicative and are subject to indexation revisions.

Classification	Quarterly Budget	Annual Amount
1	$2,674.18	$10,696.72
2	$3,995.42	$15,981.68
3	$5,479.94	$21,919.77
4	$7,386.33	$29,545.33
5	$9,883.76	$39,535.04
6	$11,989.35	$47,957.41
7	$14,530.53	$58,122.13
8	$19,427.25	$77,709.00

In addition to the 8 ongoing classifications for new participants, there are 4 transitional Home Care Package (HCP) classifications for transitioning HCP participants.

When Support at Home commences, HCP participants will be transitioned to a Support at Home transitioned HCP classification.

HCP Classification	Support at Home Classification
HCP Level 1	Transitioned HCP Level 1
HCP Level 2	Transitioned HCP Level 2
HCP Level 3	Transitioned HCP Level 3
HCP Level 4	Transitioned HCP Level 4

Learn more about the funding classifications for ongoing services

Image of a magnifying glass

View Chapter 6 of the Support at Home program manual

Refer to section 6.7.2 for more information on arrangements for Transitioned participants.

NEXT LESSON: THE SERVICE LIST AND SERVICE CATEGORIES

Lesson 5 of 10

The service list and service categories

The Support at Home service list

The service list outlines what government-funded services are available to participants and what services are out of scope for the Support at Home program.

The services that the older person has been assessed as eligible for will be listed in the Notice of Decision and accompanying support plan.

Providers should review the Support at Home service list thoroughly to understand the services that are in and out of scope when delivering Support at Home services to older people.

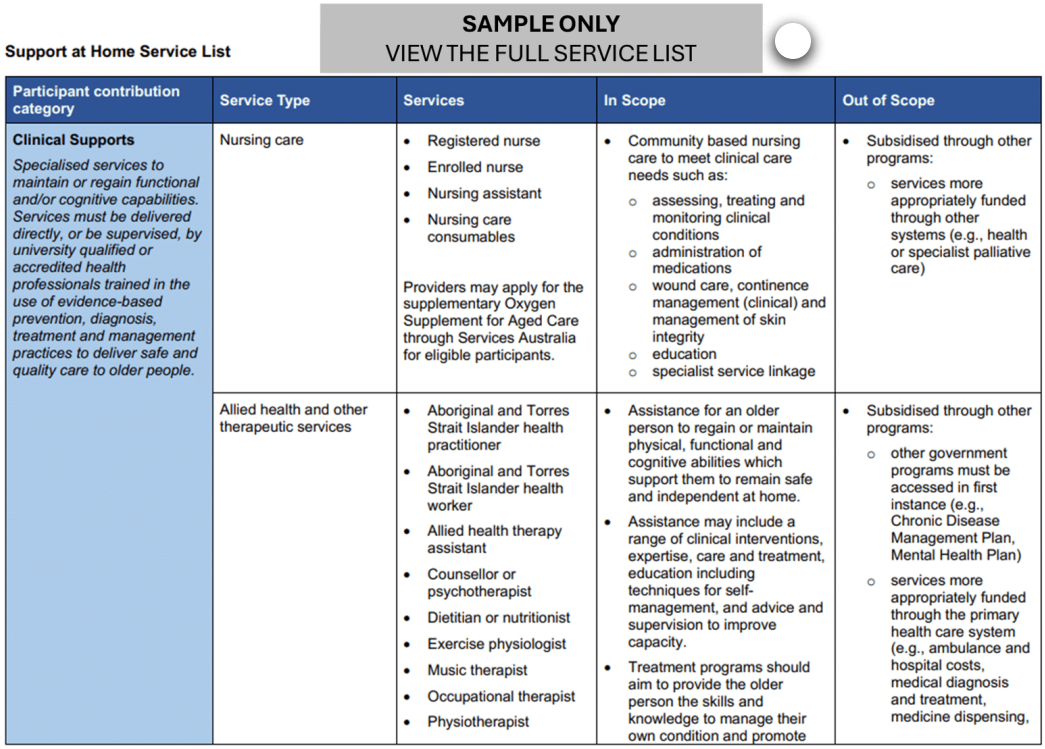
Support at Home Service List

SAMPLE ONLY
VIEW THE FULL SERVICE LIST

Participant contribution category	Service Type	Services	In Scope	Out of Scope

Clinical Supports
Specialised services to maintain or regain functional and/or cognitive capabilities. Services must be delivered directly, or be supervised, by university qualified or accredited health professionals trained in the use of evidence-based prevention, diagnosis, treatment and management practices to deliver safe and quality care to older people.
	Nursing care	• Registered nurse
		• Enrolled nurse
		• Nursing assistant
		• Nursing care consumables
		
		Providers may apply for the supplementary Oxygen Supplement for Aged Care through Services Australia for eligible participants.
			• Community based nursing care to meet clinical care needs such as:
			  ○ assessing, treating and monitoring clinical conditions
			  ○ administration of medications
			  ○ wound care, continence management (clinical) and management of skin integrity
			  ○ education
			  ○ specialist service linkage
				• Subsidised through other programs:
				  ○ services more appropriately funded through other systems (e.g., health or specialist palliative care)

	Allied health and other therapeutic services	• Aboriginal and Torres Strait Islander health practitioner
		• Aboriginal and Torres Strait Islander health worker
		• Allied health therapy assistant
		• Counsellor or psychotherapist
		• Dietitian or nutritionist
		• Exercise physiologist
		• Music therapist
		• Occupational therapist
		• Physiotherapist
			• Assistance for an older person to regain or maintain physical, functional and cognitive abilities which support them to remain safe and independent at home.
			• Assistance may include a range of clinical interventions, expertise, care and treatment, education including techniques for self-management, and advice and supervision to improve capacity.
			• Treatment programs should aim to provide the older person the skills and knowledge to manage their own condition and promote
				• Subsidised through other programs:
				  ○ other government programs must be accessed in first instance (e.g., Chronic Disease Management Plan, Mental Health Plan)
				  ○ services more appropriately funded through the primary health care system (e.g., ambulance and hospital costs, medical diagnosis and treatment, medicine dispensing,



Support at Home Service List

SAMPLE ONLY
VIEW THE FULL SERVICE LIST

Participant contribution category	Service Type	Services	In Scope	Out of Scope
Clinical Supports *Specialised services to maintain or regain functional and/or cognitive capabilities. Services must be delivered directly, or be supervised, by university qualified or accredited health professionals trained in the use of evidence-based prevention, diagnosis, treatment and management practices to deliver safe and quality care to older people.*	Nursing care	• Registered nurse • Enrolled nurse • Nursing assistant • Nursing care consumables Providers may apply for the supplementary Oxygen Supplement for Aged Care through Services Australia for eligible participants.	• Community based nursing care to meet clinical care needs such as: ○ assessing, treating and monitoring clinical conditions ○ administration of medications ○ wound care, continence management (clinical) and management of skin integrity ○ education ○ specialist service linkage	• Subsidised through other programs: ○ services more appropriately funded through other systems (e.g., health or specialist palliative care)
	Allied health and other therapeutic services	• Aboriginal and Torres Strait Islander health practitioner • Aboriginal and Torres Strait Islander health worker • Allied health therapy assistant • Counsellor or psychotherapist • Dietitian or nutritionist • Exercise physiologist • Music therapist • Occupational therapist • Physiotherapist	• Assistance for an older person to regain or maintain physical, functional and cognitive abilities which support them to remain safe and independent at home. • Assistance may include a range of clinical interventions, expertise, care and treatment, education including techniques for self-management, and advice and supervision to improve capacity. • Treatment programs should aim to provide the older person the skills and knowledge to manage their own condition and promote	• Subsidised through other programs: ○ other government programs must be accessed in first instance (e.g., Chronic Disease Management Plan, Mental Health Plan) ○ services more appropriately funded through the primary health care system (e.g., ambulance and hospital costs, medical diagnosis and treatment, medicine dispensing,

Support at Home Service List

This is an extract of the Support at Home service list which outlines the government-funded services available to participants. For further information, view the full Service List.

Services are arranged under 3 categories in the Support at Home service list.

Click the below boxes to explore information on each category:


Clinical Supports
Independence
Everyday living

Image of people in networks

Third-party service delivery

Providers can deliver Support at Home services directly or can engage a third-party worker or organisation (associated provider) to deliver services on their behalf.

This includes where a provider:

- sources and coordinates services and supports through a third-party (including subcontractors, labour hire or brokered services)

purchases products and equipment from a third-party.

Providers may engage third-parties on an ad-hoc or ongoing basis to meet the needs of participants or their requests for specific workers. However, services delivered must be drawn from the Support at Home service list.

Record keeping for delivering services

Providers will need to keep records that confirm the delivery of care and services to all Support at Home participants. This ensures transparency, accountability, and participant satisfaction.

Acceptable evidence of service delivery may include:

Care notes or reports detailing service episodes, such as photos (where privacy allows) for delivered equipment or completed tasks like gardening or home maintenance.

Records of worker sign-in and out, either electronic or handwritten.

Sign-in book or QR code used at the participant's home.

Image of a report and an information icon

Learn more about the Support at Home service list

Image of a magnifying glass

View Chapter 10 of the Support at Home program manual

NEXT LESSON: CEASING AND TEMPORARILY STOPPING SERVICES

Ceasing and temporarily stopping services

The Support at Home program offers flexibility. Participants can cease or temporarily stop Support at Home services at any time for any reason.

Temporarily stopping services

Participants should inform their provider if they plan to pause services or need to access another aged care program.

Care management services should continue to be carried out on a monthly basis, even if services are stopped.

Participants may pause Support at Home services for several reasons, including:

Hospital Stay – When an older person is admitted for treatment or surgery.

Transition Care – After a hospital stay, an older person may need short-term recovery support through the Transition Care Program.

Residential Respite Care – An older person may require planned or emergency respite due to personal circumstances.

Other Reasons – This includes social leave, holidays, or other personal situations.

Image of hands holding a hospital

Participants have the flexibility to change providers if they need different services or are moving to a new location. They can do so at any time.

If a participant decides to make a change, their approval for services and budget will move with them to their new provider.

> Participants can change providers for a variety of different reasons. This includes if they need different services or are moving to a new location. Providers will need to maintain their obligations to participants when ceasing and commencing services.
>
> When changing providers, the participant and provider should agree to the exit date to ensure that there are no overlapping service provision dates with a new provider.
>
> Providers then have 60 days from the date of exit to finalise all claims.

View Chapter 12 of the Support at Home program manual for detailed provider obligations.

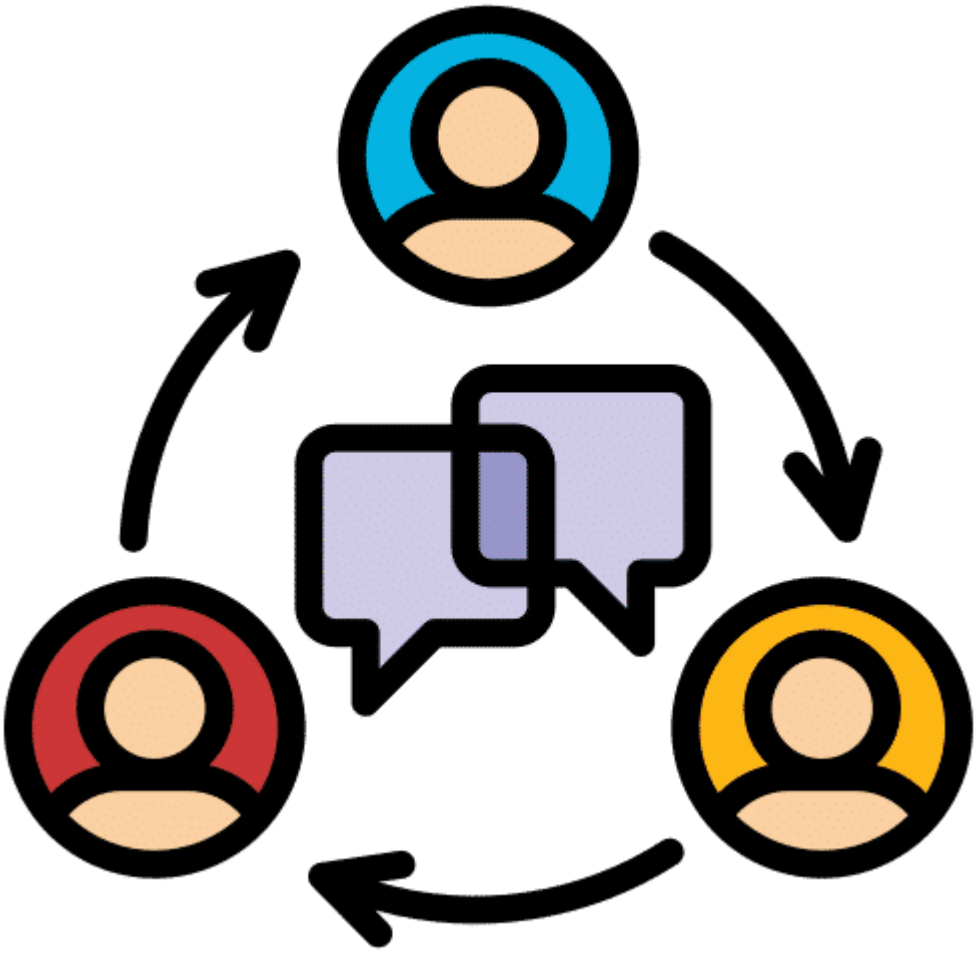


Image of different people communicating with each other

Ceasing and commencing providers have obligations towards their participants.

Ceasing Provider Obligations

The below diagram outlines the obligations of the ceasing provider.

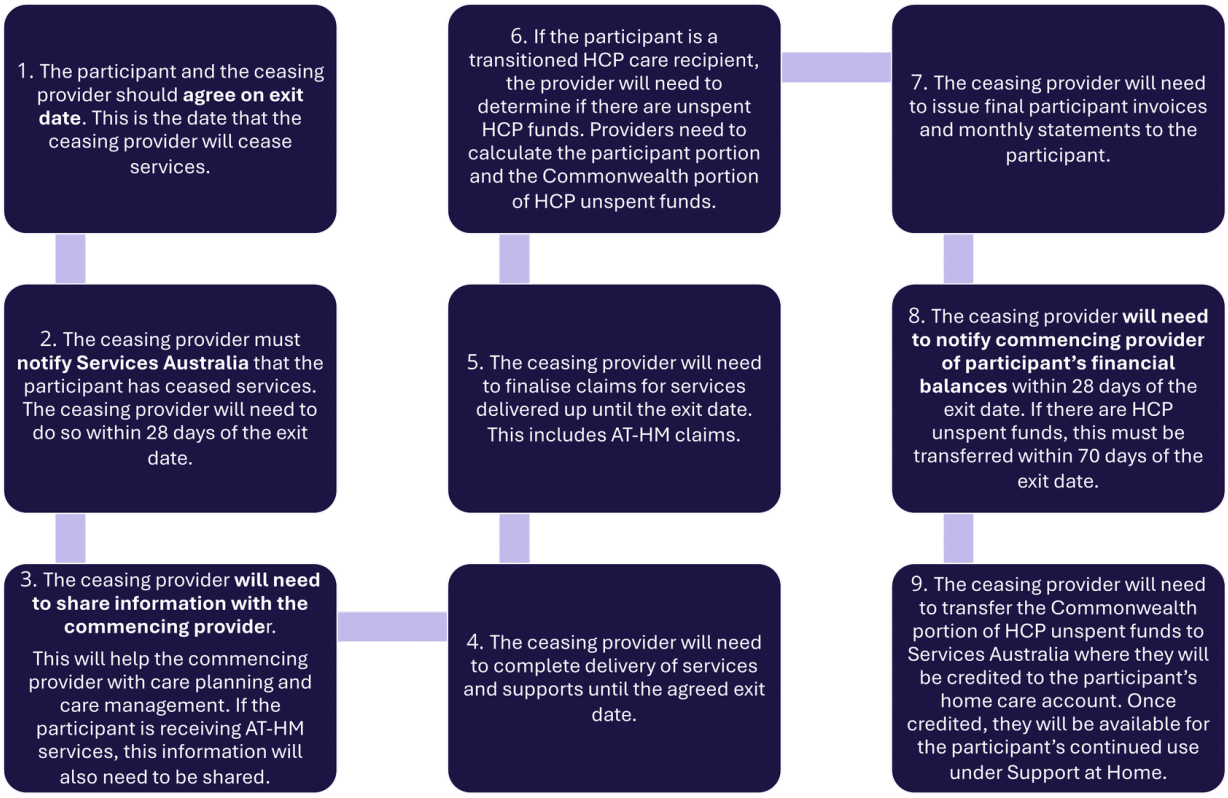


Image of the obligations and process for the ceasing provider

Commencing Provider Obligations

When approached by a Support at Home participant that is seeking to change providers, the steps below outline the expectations and obligations on the commencing provider.

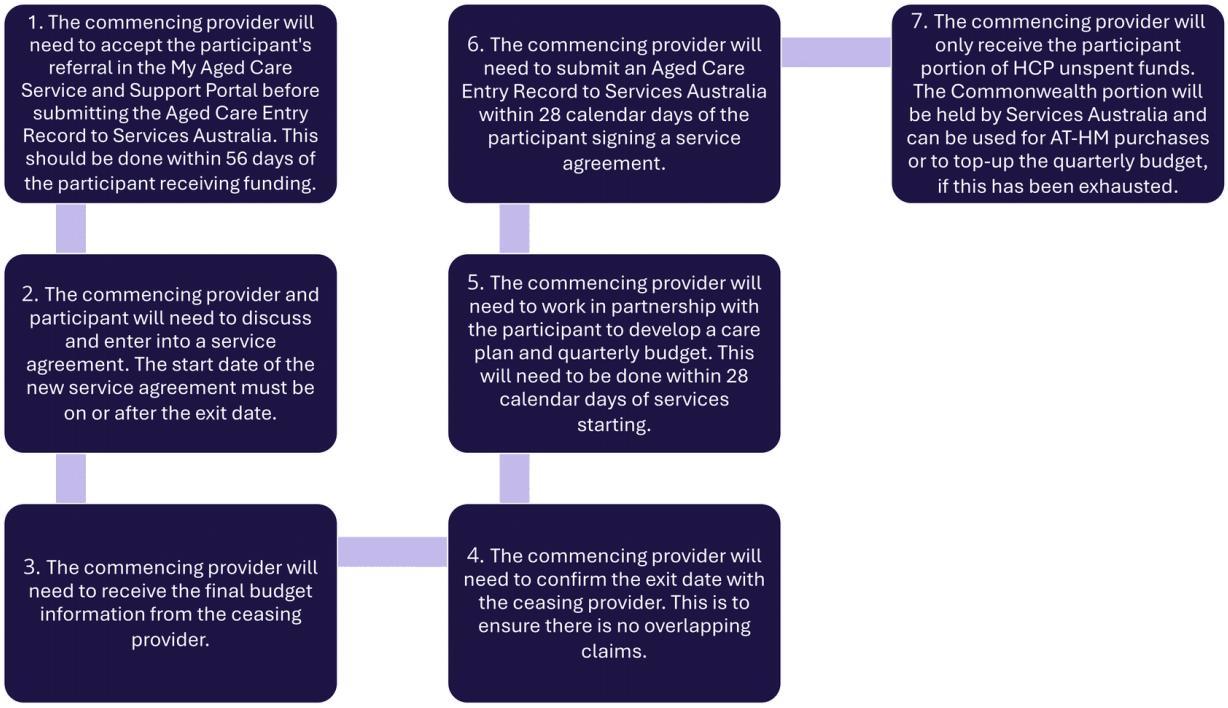


Image of the obligations and process for the commencing provider

Exiting Support at Home

When participants permanently leave the Support at Home program, this is called an **Exit**. This can occur when a participant moves into residential aged care or passes away.

Whenever possible, the participant or their supporter should **notify the provider in writing** as soon as possible, confirming that they will no longer receive in-home services and provide an exit date.

If a participant moves into permanent residential aged care, their entry date into residential care will be considered their exit date from Support at Home.

If a participant passes away, their date of death becomes their exit date. In this case, **providers will need to update the My Aged Care Service and Support Portal and call My Aged Care to update the participant's record**.

Providers have **60 days** from the day after a participant's death to finalise all claims.

Learn more about ceasing and temporarily stopping services or exiting

Image of a magnifying glass

View Chapter 12 of the Support at Home program manual

NEXT: OTHER PROGRAMS FOR OLDER PEOPLE

Other programs for older people

In addition to the Support at Home program, the Commonwealth aged care system involves other key programs.

Australia's aged care system offers various services to help older people, depending on their needs. Other programs include:

Residential Care

Residential care supports older people who are no longer able to live independently at home. Residential care provides accommodation and a range of care options in an approved residential aged care home.

This includes both long-term care and short-term or emergency care.

Commonwealth Home Support Programme (CHSP)

CHSP is designed for older people who need basic support to remain at home. This program offers services like help with cleaning, meals, and personal care.

Transition Care Programme (TCP)

TCP provides short-term, therapy-focused care for older people after they have been in the hospital.

TCP helps older people recover and regain independence, and it can take place at home, in a community setting or a residential aged care setting.

Multi-Purpose Services (MPS) program

MPS supports smaller, rural and remote communities by offering both health and aged care services.

This program is a joint initiative between the Australian Government and state and territory governments, aimed at meeting the needs of people in these areas.

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

NATSIFAC provides culturally appropriate aged care services for older Aboriginal and Torres Strait Islander people. These services are delivered close to home and mainly in rural and remote areas, ensuring they meet the specific needs of these communities.

More information on the NATSIFAC program is on the department's website at National Aboriginal and Torres Strait Islander Flexible Aged Care Program

Learn more about other aged care programs

Image of a magnifying glass

View Part F of the Support at Home program manual

NEXT LESSON: KNOWLEDGE CHECK

Knowledge check

Test your knowledge by answering the questions below.

Question

01/05

Once funding has been approved, what do older people need to do with providers to access services?
(Select 1 option)

- ◯ Complete a support plan review
- ◯ Register with My Aged Care
- ◯ Enter into a service agreement
- ◯ Manually select their funding classification

Question

02/05

A participant's priority rating can be 1 of 4 levels: standard, medium, high, or urgent. What are the two key factors that influence prioritisation?
(Select 2 options)

- [ ] Information collected by the aged care assessor using the Integrated Assessment Tool (IAT)
- [ ] Year of birth
- [ ] The date of approval for home care
- [ ] Whether the participant is a HCP transitioned care recipient

Question

03/05

Match the ongoing funding categories with an example of the aged care service. (Match the cards on the left-hand side to the cards on the right-hand side)

Everyday Living	Nursing care
Independence	Shopping support
Clinical Support	Group social support

Question

04/05

Which of the following will the ceasing provider need to do if a participant is changing providers?

- ◯ The ceasing provider and participant should agree on exit date
- ◯ The ceasing provider will need to share information with the commencing provider
- ◯ The ceasing provider will need to issue final participant invoices and month statements
- ◯ All of the above

Question

05/05

How many ongoing funding classifications are there in the Support at Home program?
(Select 1 option)

- ○ 2
- ○ 4
- ○ 6
- ○ 8

Helpful resources

The links below will open in a new window. Links are regularly reviewed, however if a link is not working, please search for the information directly within the department's website.

Webpages

1. Support at Home program webpage
2. Support at Home provider training webpage
3. My Aged Care webpage
4. New Aged Care Act webpage

Guidelines and procedures

1. Support at Home program manual – A guide for registered providers
2. Support at Home Program Provider Transition Guide
3. Support at Home: Claims and Payments Business Rules Guidance
4. Support at Home service list
5. Assistive Technology and Home Modifications List (AT-HM List)

Fact Sheets

1. Guidance for setting Support at Home prices – fact sheet for providers
2. Summary of indicative Support at Home prices

Existing Home Care Package care recipients

Existing Home Care Package (HCP) and Short-Term Restorative Care (STRC) care recipients will transition to the Support at Home program.

Providers will continue to support and deliver services to these transitioned care recipients.

Refer to the Support at Home provider transition guide for detailed information on supporting transitioning existing HCP and STRC care recipients.

NEXT: COURSE WRAP-UP

Lesson 10 of 10

Course wrap-up

Thank you for completing the Support at Home assessment process and service delivery module.

We appreciate the time and effort you dedicated to completing this training, engaging with the information, and applying your knowledge.

We'd love your feedback!

To help us continue improving this training, please take a moment to complete a short survey about your experience in completing the Support at Home assessment process and service delivery module. This survey will take no more than 1-2 minutes to complete.