People who are financially or socially disadvantaged

Specialisation Verification Application Form

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People who are financially or socially disadvantaged

How to apply

To complete this application:

- 1. Enter details of the outlet the application relates to.
- 2. Select the criteria you wish to apply for.
- 3. Provide required information for each selected criterion, including any necessary attachments.
- 4. Remove individual names from the responses and attachments unless specifically requested.
- 5. Leave sections for unselected criteria blank.
- 6. Submit the completed form and all attachments to MAC Specialisation inbox, MACspecialisation@health.gov.au

Purpose of the Form

The purpose of this application form is to demonstrate how an individual outlet meets the criteria under the <u>Specialisation Verification Framework</u>. It provides opportunity for an aged care provider to demonstrate how their outlet tailors their service delivery for people who are financially or socially disadvantaged. Strong, practical evidence in both operational service delivery and outlet governance and administration practices will be required to substantiate the delivery of specialised services.

An outlet refers to a specific service location or site where aged care services are delivered under the governance of the registered aged care provider.

Identification details

The Department of Health, Disability and Ageing will use the contact information provided below as the primary means of communication for all future updates, requests, and notifications related to this application.

Outlet ID	
	Found on your Service and Support Portal
Outlet name	
Organisation ID	
	Found on your Service and Support Portal – this is not your NAPS ID
Organisation name	
Contact details provided in the future communications related	his application will be used by the department for all ed to this application.
_, , , ,	
Please ensure details are acceptanges via email to MACsp	ccurate and keep them up to date by notifying us of any pecialisation@health.gov.au.
changes via email to MACsp	
Changes via email to MACsp Primary point of contact	
Primary point of contact Phone number	
Primary point of contact Phone number	
Primary point of contact Phone number Email address	

Criteria selection and completion checklist

You must meet 3 of the Tier 2 criteria listed below.

The table below serves as a completion checklist to help you:

- Track which criteria you have selected and addressed in your application
- Ensure your application is completed in full.

Tier 2 (you must meet all 3 criterion)

Criterion F2.1

Provider supports residents to access the same activities as those residents who are able to pay. Applies to residential aged care only.

Criterion F2.2

Provider has policies and procedures in place to support and promote the delivery of specialised aged care to financially or socially disadvantaged aged care recipients.

Criterion F2.3

Provider offers services which are specifically targeted towards financially or socially disadvantaged people.

Disclaimer and Privacy Completed (p9)

Signature Given (p9)

Criterion evidence

Tier 2 (you must meet all 3 criterion)

Criterion F2.1

Provider supports residents to access the same activities as those residents who are able to pay.

*Applies to residential aged care only.

Describe how the outlet approaches supporting and enabling residents who are financially or socially disadvantaged to access the same activities as those residents who are able to pay (this applies to residential aged care recipients only). This may include:

- waivers
- subsidies
- inclusive planning strategies.

Further, provide general information on how activity-related costs are managed, and how cost does not become a barrier to participation for residents.

Title of attachment(s) you are submitting as evidence for this criterion.

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Criterion F2.2

Provider has policies and procedures in place to support and promote the delivery of specialised aged care to financially or socially disadvantaged aged care recipients.

Attach at least one policy and one procedure that the outlet has in place which details how specialised care for financially or socially disadvantaged individuals is delivered or supported. Examples of policies and procedures which promote the delivery of specialised care may include:

• Trauma Aware and Healing Informed Care Policy and Procedure

Title of attachment(s) you are submitting as evidence for this criterion.

- Access and Equity Policy
- Fee Management and Financial Hardship Procedure
- Assessment and Care Planning Procedure
- Staff Training and Development Procedure.

If it's not clear in the policy or procedure how it relates to the specialised care you provide at the outlet, include a short explanation about the policy and procedure describing how it helps you meet the needs of financially or socially disadvantaged people.

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Criterion F2.3

Provider offers services which are specifically targeted towards financially or socially disadvantaged people.

Describe the services offered which are specifically targeted towards financially or socially disadvantaged people by the outlet. Examples of this may include:

- connecting care recipients with other service providers (e.g. mental health supports)
- being a point of contact for a care recipient during a crisis

Title of attachment(s) you are submitting as evidence for this criterion.

- providing welfare checks
- · offering technology packages.

Provide the following:

- Attach evidence from an external organisation(s) or aged care recipient(s) confirming the appropriateness of services:
 - feedback must be clearly authored by the care recipient and/or their representative(s) supporting documentation from a relevant community organisation, this can be a letter or statement on an official letterhead.

Disclaimer and privacy

Privacy Obligation and Consent for Collection of Information

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

The department will not disclose your personal information to any overseas recipients. If you do not provide this information the department will be unable to verify the eligibility of your application.

You can get more information about the way in which the department will manage your personal information, including our privacy policy found in the <u>Specialisation Verification Framework</u>.

I accept and consent to all privacy requirements and information that needs to be collected.

I confirm that the information provided is accurate to the best of my knowledge.

I declare that the information provided as part of this application is true and correct to the best of my knowledge.

I understand that once the claims to specialisation in the delivery of care made in this form have been verified by the assessor my organisation will make best efforts to maintain the specialisations through adherence to the requirements set out by the Specialisation Verification Framework.

I understand that if my organisation is not able to produce the required evidence, my organisation will not be able to claim to provide specialised services on its My Aged Care provider profile.

In the event that this specialisation cannot be maintained, a representative of my organisation will inform the department (via email to MACspecialisation@health.gov.au) to remove the specialisation from My Aged Care. I understand that if I wish to reinstate this specialisation, I will need to re-apply for verification by the assessor.

I understand that representative contact information may be used by the department where further evidence or clarifications are required to progress the application.

further evidence or clarifications are required to progress the application.	
Signature - The Department <u>accepts</u> digital signatures	
Full Name	
Date	

Submission

Instructions on how to submit this form via email

- The subject for the email must be as follows:
 Outlet Name Outlet ID Specialisation Type
- 2. This form **must** be attached to the email.
- 3. All attachments listed in this form **must** be attached individually to the email.
- 4. Email to MACspecialisation@health.gov.au

Please note, emails received missing relevant attachments cannot be assessed. You will be informed of this and asked to resubmit the required information.

Need help?

For queries about the framework or the application process, please contact the Specialisation Verification assessment team.

Email: MACspecialisation@health.gov.au