



Australian Government



myagedcare

Assessor Portal User Guide 10 - Clinical Assessment Delegate Processes

This user guide is to assist Clinical Assessment Delegates in performing a range of functions in the My Aged Care assessor portal (assessor portal) that relate to the requirements set out in the *Aged Care Act 2024* as the role of System Governor. This includes viewing and actioning delegate decisions, as well as requesting corrections to care approval decisions and care extensions.

Clinical assessment delegates can approve an older person for all service groups, classification types and classification levels under the *Aged Care Act 2024*. Non-clinical assessment delegates are restricted to approving entry level home support, Assistive Technology or Home Modification services (i.e. with classification levels of CHSP class, AT CHSP or AT-HM).

! From 1 November 2025, there are changes to assessment delegations under the *Aged Care Act 2024*, for both Clinical and Non-clinical Assessment Delegates.

To understand **Assessment Delegate changes**, refer to 'Chapter 7: Delegations and Approvals under the Act' of [My Aged Care Assessment Manual](#).

For guidance on the interim process explaining **Manual Delegate Approval for CHSP only for comprehensive assessments**, and how it impacts Clinical Assessment Delegates, refer to *Manual Delegate Approval for CHSP – Standard Operating Procedure* and instructional videos for comprehensive assessments.

Note: This process was updated to align with recent changes effective from 23 February, the updated approach now applies.

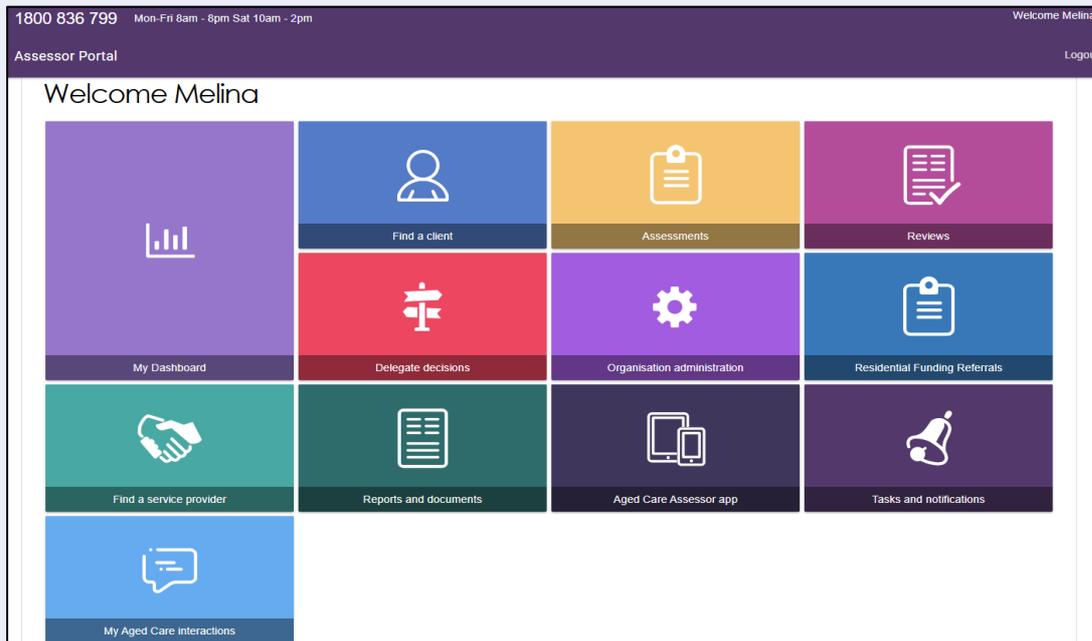


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The Clinical Assessment Delegate home screen

If you are both a clinical aged care needs assessor (clinical assessor) and a Clinical Assessment Delegate in the Assessor portal, your home screen will look like the following.



For more information regarding applying to be a Clinical Assessment Delegate please refer to the [My Aged Care Assessor Portal User Guide 12 – Managing Delegate Roles](#).

Assessment history

To assist Clinical Assessment Delegates with understanding and actioning delegate approvals, Clinical Assessment Delegates can view a client's assessment history via the **Plan** tab of the client record. Within the **Assessment history** section, it will outline key information such as if the assessment has been completed by a non-clinical needs assessor who then converted the assessment from a home support assessment to a comprehensive assessment, as well as the details of the clinical supervising assessor.

Comish HARRY
Male, 103 years old, 2 February 1922, AC54026745
Prefers to speak Assyrian, identifies as Aboriginal and Torres Strait Islander
Primary contact: Comish Harry (self)
No support relationships recorded

REFER THIS CLIENT FOR ASSESSMENT

Plans

Client summary | Client details | Support network | Approvals | **Plans** | Attachments | Services | My Aged Care interactions | Notes | Tasks and Notifications | Residential Funding Classifications

Current Episode
Episode ID: 2-21094NT9
30 April 2025 - Present

SUPPORT PLAN

Recommendations

- Allied health and therapy
- Support at Home
 - Home Support Ongoing - SaH Classification 7
 - Assistive Technology Short-term - AT Medium

SEE SERVICE DETAILS

Upcoming Review(s)
No upcoming reviews scheduled

Assessment history

Comprehensive Assessment 30 April 2025

COMPREHENSIVE ASSESSMENT 30 APRIL 2025 **PRINT**

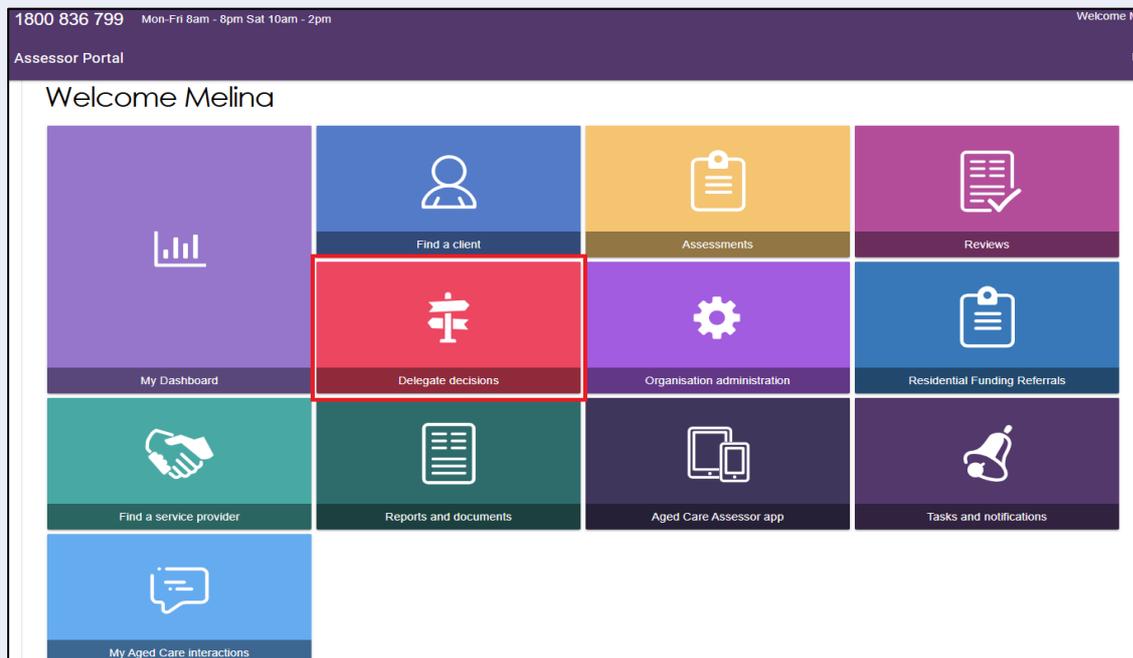
Date referral issued	30 January 2025
Referral issued by	GRAZIER AGED CARE Outlet ACAT-RAS
Assessment reason	Portal Referral
Status of referral	Accepted
Triage date	30 April 2025
Triage organisation	GRAZIER AGED CARE - ACA - ACT
Triage conducted by	Africa Green
Triage outcome	Comprehensive (clinical) assessment required
Assessment type	Comprehensive Assessment
Assessment type changed by	Africa Green
Date Assessment type changed	9 May 2025
Reason for change	High level care needs
Change comments	fdfd
Assessment organisation	GRAZIER AGED CARE - ACA - ACT
Assessment organisation contact number	07 7457 4574
Date referral accepted	30 January 2025
Date assessment commenced	30 April 2025
Date assessment completed	9 May 2025
Assessor	Africa Green



Viewing an item for decision

As a Clinical Assessment Delegate, follow the steps below to assign items for decision.

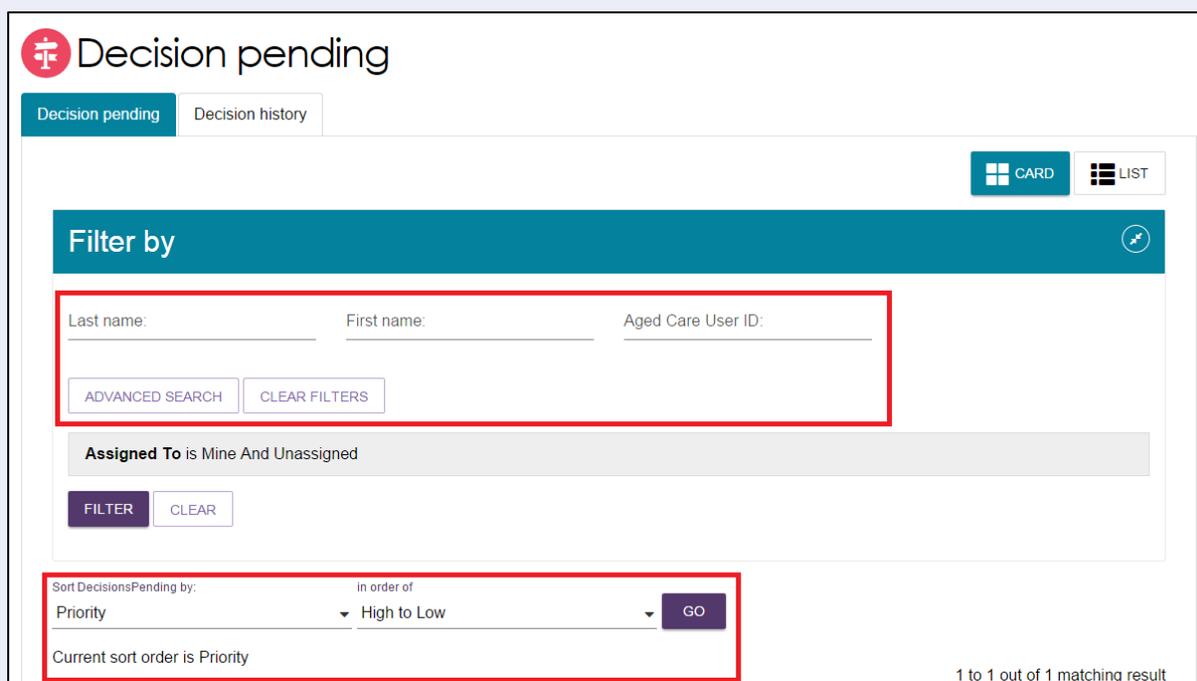
1. Select **Delegate decisions** from the homepage.



2. The queue containing assessments awaiting Clinical Assessment Delegate decision will be displayed in the **Decision pending** tab.

You can use the filter options (First Name, Last Name, and Aged Care User ID) to refine your results. To show additional filter options select **Advanced Search**.

You can also use the sort function to sort by assessment status, as well as other categories such as last name, first name, Aged Care ID, date submitted, priority (or urgency), assessor and delegate names and due date. The order in which the results are displayed can also be set.



The due date against each assessment waiting for delegate decision will be visible to the Clinical Assessment Delegate in both the Card and List View. The pending decisions can be sorted and filtered by date due.

Decision pending Currently viewing UAT CRB10C Assessment Outlet

Decision pending | Decision history

Filter by

Last name First name Aged care user ID

MODIFY FILTER OPTIONS CLEAR FILTERS

Assigned to is Mine & unassigned

FILTER CLEAR

1 to 9 out of 9 matching results

SHOW MORE UNASSIGNED

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
UATHANSENS	UATAUTOSHAYNEH	AC83515833	KERLUKEA Einj		Awaiting Delegate Decision	26/09/2025	High
WYMAINT	AUTOCHANEIV	AC56105158	OKUNEVAY Rasheedo		Awaiting Delegate Decision	04/09/2025	High
UAT	AG PG Two	AC83167205	OKUNEVAY Rasheedo		Awaiting Delegate Decision	20/09/2025	High

- On this page is also the **Decision history** tab, which will display decisions that you have made previously.

Decision history Currently viewing GRAZIER AGED CARE - ACA - ACT

Decision pending | **Decision history**

CARD LIST

Filter by

Sort DecisionsPending by: Date Submitted in order of Latest to Earliest GO

Current sort order is Date Submitted

1 to 20 out of 152 matching results

Kayla KIN

Assessor: GREEN Africa
 Delegate: GREEN Africa
 Aged care user ID: AC06205934
 Date submitted: 16 October 2025
 Assessment type: Comprehensive

Finalised Low

Tester TESTER

Assessor: GREEN Africa
 Delegate: GREEN Africa
 Aged care user ID: AC52738549
 Date submitted: 3 October 2025
 Assessment type: Comprehensive

Finalised Low

Dilan SMITH

Assessor: GREEN Africa
 Delegate: GREEN Africa
 Aged care user ID: AC64439078
 Date submitted: 3 October 2025
 Assessment type: Comprehensive

Finalised Low

- For both the **Decision Pending** and the **Decision History** tabs, you can toggle between the card view and the list view (shown below) to display the clients.

Decision pending Currently viewing GRAZIER AGED CARE - ACA - ACT

Decision pending | Decision history

CARD LIST

Filter by

1 to 12 out of 12 matching results

SHOW MORE UNASSIGNED

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
CARLILE	Sullivan	ACT78286218	GREEN Africa		Awaiting Delegate Decision	20/09/2025	High
OSULLIVAN	Chris	AC26980854	FLOWER Andy		Awaiting Delegate Decision	20/09/2025	Low
TINGLE	Brad	AC03793403	GREEN Africa		Awaiting Delegate Decision	31/08/2025	Low

Assigning an item for decision

To assign a client to yourself:

1. If using the card view, select the expand arrows on the Client card to display a summary of the client's information in a pop-up. Select **ASSIGN** to allocate that item to yourself or to another Clinical Assessment Delegate within the team.

Home | Delegate decisions

Decision pending

Currently viewing Aussie Healthcare

You have report(s) that are ready to be downloaded. To download, go to Reports page

Dick VAN DYKE

Aged 100 (13 December 1925), Male
Referred from Aussie Healthcare on 30 January 2026
Accepted on 30 January 2026
Delegate Decision due by: 1 February 2026

Assessor Andy Flower
Date submitted 30 January 2026

Assessment details
Assessment type Comprehensive Assessment
Assessment reason Self-Referral
Assessment setting Non-Hospital

Recommended care:
Home support Ongoing - SaH Classification 4

[VIEW SUPPORT PLAN](#) [VIEW FULL CLIENT RECORD](#) [VIEW CLIENT REPORT](#)

ASSIGN

Unassigned

Dick VAN DYKE

2. If using the list view, select the expand arrows for the client to display a summary of the client's information in an expanded view.

Decision pending

Currently viewing Aussie Healthcare

Decision pending | Decision history

CARD LIST

Filter by

1 to 1 out of 1 matching result

SHOW MORE UNASSIGNED

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
VAN DYKE	Dick	AC94286739	FLOWER Andy		Awaiting Delegate Decision	01/02/2026	Low



3. Select **ASSIGN** to allocate that item to yourself or to another Clinical Assessment Delegate within the team.

Decision pending Currently viewing Aussie Healthcare

Decision pending | Decision history

CARD LIST

Filter by 1 to 1 out of 1 matching result

SHOW MORE UNASSIGNED

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
VAN DYKE	Dick	AC94286739	FLOWER Andy		Awaiting Delegate Decision	01/02/2026	Low

Aged 100 (13 December 1925), Male
Referred from Aussie Healthcare on 30 January 2026
Accepted on 30 January 2026
Assessor Andy Flower
Date submitted 30 January 2026
Delegate Decision due by: 1 February 2026

Assessment details
Assessment type Comprehensive Assessment
Assessment reason Self-Referral
Assessment setting Non-Hospital

Recommended care:
Home support Ongoing - SaH Classification 4

VIEW SUPPORT PLAN | VIEW FULL CLIENT RECORD | VIEW CLIENT REPORT

ASSIGN

4. In the pop-up box, select a Clinical Assessment Delegate (or yourself – ‘me’), and select **ASSIGN**.

Assign delegate decision for Dick VAN DYKE

Assign to*

- Me
- Roderick GROVES
- Greysen WARFIELD
- Africa GREEN
- Veg KALE
- Laticia KASPER
- Cort RICCI
- Adria OTOOLE
- Phyliss CUPP

ASSIGN CANCEL

5. A confirmation message will appear. The client will appear in the queue of the Clinical Assessment Delegate they were assigned to, or under ‘My Decisions’ if assigned to yourself.



Decision pending Currently viewing Aussie Healthcare

Decision pending | Decision history

CARD | LIST

Filter by 1 to 1 out of 1 matching result

Sort Decisions Pending by: Last name | in order of: Alphabetical (A-Z) | GO

My decisions

Dick
VAN DYKE

Assessor: Andy Flower
 Delegate: Prospect Free
 Aged care user ID: AC94286739
 Delegate Decision due by: 1 February 2026

Due in 2 days | Low

Reassigning for Decision

Follow these steps to reassign an item for decision:

1. Select the expand arrow on the **Client card** to display a summary of the client's information. Select **REASSIGN**.

My decisions

Dick
VAN DYKE

Assessor: Andy Flower
 Delegate: Prospect Free
 Aged care user ID: AC94286739
 Delegate Decision due by: 1 February 2026

Due in 2 days

Dick VAN DYKE

Aged 100 (13 December 1925), Male | Referred from Aussie Healthcare on 30 January 2026
 Accepted on 30 January 2026

Assessor: Andy Flower | Delegate Decision due by: 1 February 2026
 Delegate: Prospect Free

Date submitted: 30 January 2026

Assessment details

Assessment type: Comprehensive Assessment
 Assessment reason: Self-Referral
 Assessment setting: Non-Hospital

Recommended care:

Home support Ongoing - SaH Classification 4

VIEW SUPPORT PLAN | VIEW FULL CLIENT RECORD | VIEW CLIENT REPORT

START DECISION PROCESS | **REASSIGN**



If using the list view, select the expand arrow next to the client's name to see more information, and select **REASSIGN**.

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date due	Priority
VAN DYKE	Dick	AC94286739	FLOWER Andy	FREE Prospect	Awaiting Delegate Decision	01/02/2026	Low

Aged 100 (13 December 1925), Male

Referred from Aussie Healthcare on 30 January 2026
Accepted on 30 January 2026

Assessor: Andy Flower
Delegate: Prospect Free
Date submitted: 30 January 2026

Delegate Decision due by: 1 February 2026

Assessment details

Assessment type: Comprehensive Assessment
Assessment reason: Self-Referral
Assessment setting: Non-Hospital

Recommended care:

Home support Ongoing - SaH Classification 4

VIEW SUPPORT PLAN | VIEW FULL CLIENT RECORD | VIEW CLIENT REPORT

START DECISION PROCESS | **REASSIGN**

- Nominate another Clinical Assessment Delegate to assign the item to or select the option **Place back in delegate queue** if you want to un-assign it. Select **REASSIGN**.

Re-assign delegate decision for Dick VAN DYKE

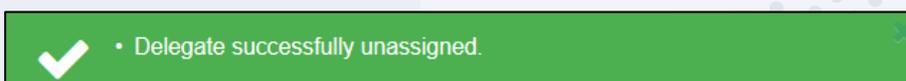
Delegate decision currently assigned to Prospect FREE

Re-assign to*

- Roderick GROVES
- Greysen WARFIELD
- Africa GREEN
- Veg KALE
- Laticia KASPER
- Cort RICCI
- Adria OTOOLE
- Phyliss CUPP
- Place back in delegate queue

RE-ASSIGN | CANCEL

- You will receive a confirmation message that you have either re-assigned or un-assigned the queue item.



Recording a delegate decision

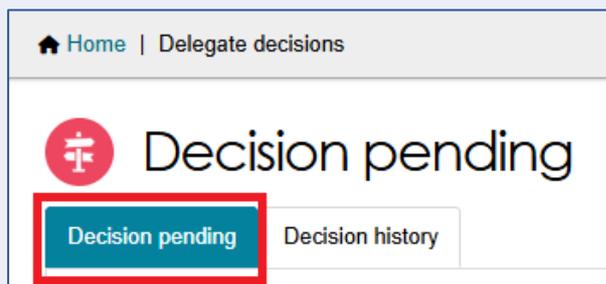
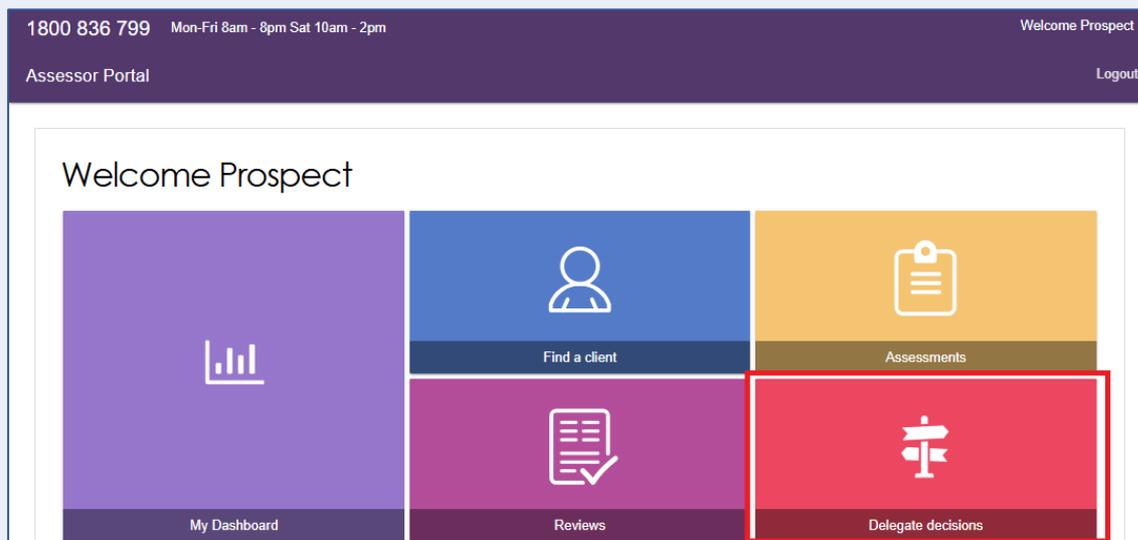
Prior to making any delegate decisions you must view the entire client record, assessment and support plan and attached information to ensure you have all the necessary evidence to support your decisions. The assessment summary prepared by the clinical assessor can be accessed through the **Identified needs** tab of the support plan.

Follow these steps to record your delegate decision:

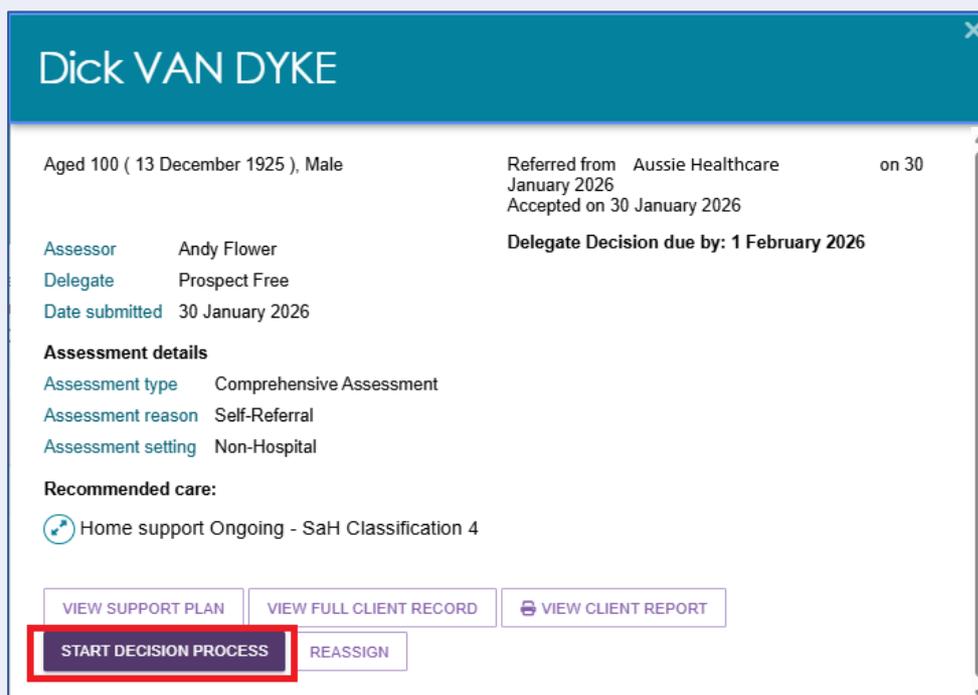


Viewing Decisions information

1. Go to the Delegate Decisions tile from the home page. Then, select the Decision Pending tab.



2. From the **Decision pending** tab, select the expand arrow on the Client card to display a summary of the client's information. Select **START DECISION PROCESS**. If using list view, this option is available from the expanded client information section. Select **START DECISION PROCESS** in the pop-up box.



- You will be taken to the **Decisions** tab on the client's support plan. The recommendations made by the clinical assessor will be displayed for your review.

Support plan and services PRINT COPY OF SUPPORT PLAN

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
 IAT Outcome: CHSP
 Recommended classification: SaH Classification 4 **AGREE**

Override reason: Higher level service needs
 Override reason description: Description goes here

Recommended care requiring delegate decision

Recommend that the client receive
 Home support

As a Clinical Assessment Delegate, you can:

- agree with a recommendation
- disagree with a recommendation
- edit a recommendation (edit and/or add Emergency Care Indicator and dates, priority and time-limitation of approval etc. Note that priority is not applicable for Support at Home.)
- add a care type for Delegate decision. These will be automatically agreed to.
- remove a care type
- change your decision prior to finalisation from agree to disagreed, or disagreed to agreed
- select to be notified of any home care correspondence for a client that you have approved for home care and may need monitoring going forward. Note that only one person from your outlet can receive these notifications.

Editing a Recommended Classification

- Go to the Delegate Decisions tile, and select the client's card or listing as per the process in [Viewing Decisions information](#).
- Select on the pencil icon next to the current recommended classification.

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
 IAT Outcome: CHSP
 Recommended classification: SaH Classification 4 **AGREE**

Override reason: Higher level service needs
 Override reason description: Description goes here



3. The **Edit Recommended Classification** pop up appears.

! An ongoing SaH classification outcome cannot be overridden to an ongoing lower or higher SaH classification outcome (in line with section 81-10 of the Aged Care Rules). Assessors must **not** undertake this action and delegates must not approve assessments where this occurs, or override and select a lower or higher classification.

Select the new recommended classification, along with the override reason and description.

Pay attention to any warning messages that may appear.

Complete any other mandatory fields that appear, for example the client's preference for seeking Home support services.

Finally, select **SAVE TO PLAN**.

Edit recommended classification

! Please contact the assessor before making any changes to the classification. Some recommendations may be removed as a result of this change. If you want to recommend a Restorative Care Pathway, End-of-Life Pathway or CHSP this will require the assessment to be returned to the assessor to add these services.

All fields marked with an asterisk (*) are required.

IAT outcome: CHSP

Recommended Classification: SaH Classification 4

Classification type: Ongoing

New recommended classification *

To override the result, please specify the reason for the override and describe it for the delegate.

Override reason *

Override reason description: * ?

0 / 150

SAVE TO PLAN **CANCEL**

4. For Support at Home classifications, the **Edit Home Support Services** Screen displays. A truncated version of this page is shown below.

The default services for your edited classification appear on this page. Confirm or change the service, frequency and intensity details. Then, select **SAVE TO PLAN** at the bottom of the page.

Edit Home Support Services

All fields marked with an asterisk (*) must be completed before submission

Recommended that the client receive: SaH Classification 4

Classification Type: Ongoing

Please select services within each service type*

Allied health and therapy

Service	Frequency	Intensity
<input type="checkbox"/> Aboriginal or Torres Strait Islander Health Practitioner assistance		▼
<input type="checkbox"/> Aboriginal or Torres Strait Islander Health Worker assistance		▼
<input type="checkbox"/> Allied health assistance		▼

5. The screen under the decisions tab will show the updated **Recommended classification** under **IAT Outcome and Classifications**. It is estimated to take up to 60 seconds for the update to take effect.

 Support plan and services

GO TO THE ASSESSMENT FLAG AS END-OF-LIFE PRINT COPY OF SUPPORT PLAN

Identified needs **Goals & recommendations** Decisions Manage services & referrals Associated People Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment

IAT Outcome: SaH Classification 2

Recommended classification: SaH Classification 4

Override reason: Higher level service needs

Override reason description: Override description goes here

6. For **High** priority Support at Home recommendations, you should review the reasoning provided by the clinical assessor and make an independent determination as to whether the priority given for the recommendation is appropriate.
7. For Residential Permanent recommendations, a Clinical Assessment Delegate can make corrections to their decisions within 43 days. During the correction you can:
- add a residential permanent recommendation
 - remove a residential permanent recommendation
 - update urgency
 - update approval expiry date
 - update emergency needs
 - update Delegate date (approval start date).



Viewing details about the Decision

1. To view details and status of the decision for a recommended service, navigate to the **Decisions** tab and scroll to the **Current care approvals** section. Select the expander icon next to the service and select the blue magnifier icon to view.

The screenshot shows the 'Support plan and services' interface. The 'Decisions' tab is highlighted. Below the tabs, there is a section for 'IAT Outcome and Classifications' with details on current assessment type and existing classification. The 'Current care approvals' section is highlighted, showing details for 'Residential Respite Care' and 'Home support'. The 'Home support' section includes a magnifier icon for further details.

Support plan and services [REQUEST ASSESSMENT] [PRINT COPY OF SUPPORT PLAN]

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment | Existing classification: Transitioned HCP Level 3 (Pending allocation)
IAT Outcome: HCP

Current care approvals

Residential Respite Care
Priority for this care type: Low
Approval starts: 30 May 2025
Reason for care: And I burrowed a hole in the glowing coal, and I stuffed in Sam McGee
5C296109600 There is never a democracy that did not commit suicide
John Adams There is never a democracy that
Source system: Gateway

Home support
Recommend that the client receive
Classification: Transitioned HCP Level 3
Classification type: Ongoing
Priority category: Standard
Home support services: Support at Home

2. A pop-up screen will open listing the classification and the type along with the list of all approved services.

The screenshot shows a pop-up window titled 'Home support services'. It displays the classification 'SaH Classification 4' and 'Ongoing'. Below this, there is a list of services including Care management, Domestic assistance, Home maintenance and repairs, Home or community general respite, Meals, Nursing care, Nutrition, Personal care, Social support and community engagement, and Transport. A 'CLOSE' button is visible at the bottom right.

Home support services

Classification: SaH Classification 4 | Classification Type: Ongoing

- Care management
- Domestic assistance
- Home maintenance and repairs
- Home or community general respite
- Meals
- Nursing care
- Nutrition
- Personal care
- Social support and community engagement
- Transport

CLOSE

3. Select the expander icon to view the details such as services included, approval start date and ceasing date.



Home support services

Classification: SaH Classification 2 Classification Type: Ongoing

- 🔄 Allied health and therapy
- 🔄 Care management
 - Home support care management:
Approval starts: 05/05/2025
● Agreed
- 🔄 Domestic assistance
- 🔄 Home or community general respite
 - Community and centre-based respite:
Approval starts: 05/05/2025
● Agreed
 - Flexible respite:
Approval starts: 05/05/2025
●

CLOSE

Return to a clinical assessor

There are circumstances in which you may wish to send the client's Decision workflow back to the clinical assessor. For example:

- more evidence is required
- the care level is not appropriate or sufficient
- amendments needed to be made (such as to correct spelling errors)

By selecting **RETURN TO ASSESSOR**, the original clinical assessor can then make necessary changes before re-submitting for decision.

Note that you only have the option to return the assessment to the clinical assessor prior to agreeing or disagreeing to any recommendations. If you select **RETURN TO CLIENT**, you will navigate back to the client's record.

ADD A CARE TYPE FOR DELEGATE DECISION

RETURN TO ASSESSOR RETURN TO CLIENT

No Decision

Clinical Assessment Delegates will not need to make decisions for clients where **No Care Approval** or **No Care Type Under the Act** is recommended.

A clinical assessor can recommend and match and refer a client for Support at Home services and finalise the support plan without needing to submit to the Delegate for decision if the client:

- Withdraws their application for care but is eligible for SaH services; or
- Does not wish to apply for care under the Act but would like to receive SaH services.



Recommend that the client receive
'No care type under the Act'

This recommendation does not require a delegate decision

Reason for care: Client withdrew application
Comment for care:

There are no service recommendations for this client

COMPLETE SUPPORT PLAN AND CONTINUE TO MATCH AND REFER REQUEST/CHANGE NOTIFICATION OF SAH CORRESPONDENCE RETURN TO CLIENT

! **For CHSP only:** From 1 November 2025, there are changes to how the 'No Care Approval' option is used under the interim Manual Delegate Approval process for CHSP only for comprehensive assessments.

For more information, please refer to *Manual Delegate Approval for CHSP – Standard Operating Procedure* and instructional videos for comprehensive assessments.

Note: This process was updated to align with recent changes effective from 23 February, the updated approach now applies.

Agreeing with recommendations

- To agree with the clinical assessor’s recommendation for a non Support at Home recommendation, select **AGREE** below the recommended care type. If multiple care types were recommended, you will need to repeat this process for each care type.

To agree with a Home support service recommendation, refer to [Agreeing or disagreeing with a Support at Home Recommendation](#).

Maria MANNING
Female, 88 years old, 1 July 1936, AC04710703
11 SMITH STREET BEVERLEY, WA, 6304
Prefers to speak Italian

Primary contact: Maria Manning (self)
No support relationships recorded

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SaH Classification 4
Recommended classification: SaH Classification 4 Agreed CHANGE
HM Medium

Recommended care requiring delegate decision

Residential Respite Care
Priority for this care type: High
Declaration: Yes
Reason DEMMI not completed: Information unavailable. Need to follow up in 1 week
This recommendation is awaiting delegate decision
 AGREE DISAGREE

Residential Permanent
Urgency for this care type: Medium
 Agreed
CHANGE

Recommend that the client receive Home support
 Recommended that the client receive Home modifications
This recommendation requires a delegate decision
Home Modification Tier: HM Medium
Classification type: Short-term
Home modifications services: **Home adjustments:** Home modification products, Home modifications prescription and clinical support
 AGREE DISAGREE

ADD A CARE TYPE FOR DELEGATE DECISION RECOMMEND AN ASSISTIVE TECHNOLOGY

- You will be asked to confirm that you agree with the recommendation in a pop-up box. If required, you can enter an approval cease date and add comments. Select **AGREE**. If required, you are now able to set an **approval cease date for Permanent Residential Care** through the assessor portal.

Agree with recommendation

You are about to agree with the recommendation for Maria MANNING for Residential Respite Care

All fields marked with an asterisk (*) are required.

Approval cease date: 
(e.g. dd/mm/yyyy)

Comments (optional)
🔔 Maximum 255 characters

3. A confirmation message will display, and the status of the recommendation will display as **Agreed**.

Residential Permanent  

Urgency for this care type Medium 

Approval starts 26 May 2025

Approval stops 30 September 2025

Agreed

Disagreeing with recommendations

Disagreeing with a recommendation will result in a non-approval of that recommended care type.

If a recommendation is mistakenly added by the clinical assessor, the Clinical Assessment Delegate can disagree with the clinical assessor's recommendation, and/or add their own recommendation.

Recommended care requiring delegate decision

Residential Respite Care  

Priority for this care type High 

Declaration Yes

Reason DEMMI not completed information unavailable. Need to follow up in 1 week

Delegate comment Not required

Disagreed

Residential Permanent  

Urgency for this care type Medium 

Agreed

Follow the steps below to disagree with a recommendation:



1. Select the expander button to show the recommended care type for approval.

Recommended care requiring delegate decision

Recommend that the client receive Home support

Recommend that the client receive Home modifications

ADD A CARE TYPE FOR DELEGATE DECISION RECOMMEND AN ASSISTIVE TECHNOLOGY

RETURN TO ASSESSOR RETURN TO CLIENT

2. Select **DISAGREE** below the recommended care type. You will need to repeat this process for each care type that you disagree with.

Support plan and services

Identified needs Goals and recommendations Decisions Manage services & referrals Associated People

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SAH Classification 5
Recommended classification: SAH Classification 5 Agreed CHANGE
Specified needs - Continence Products
HM Medium
Override reason: Other Aged Care Program/s
Override reason description: Needs to be overridden to propose services.

Recommended care requiring delegate decision

Recommend that the client receive Home support

Recommend that the client receive Home modifications

Recommend that the client receive Assistive technology

This recommendation requires a delegate decision

Specified Needs: Ongoing
Classification type: Ongoing
Assistive technology services: Equipment and products: Assistive technology prescription and clinical support, Communication and information management products, Domestic life products, Managing body functions, Mobility products, Self-care products

AGREE DISAGREE

ADD A CARE TYPE FOR DELEGATE DECISION RECOMMEND AN ASSISTIVE TECHNOLOGY

RETURN TO ASSESSOR RETURN TO CLIENT

3. You will need to provide a comment about your reason for disagreeing with the recommendation, then select **DISAGREE**.

Disagree with Assistive Technology

You are about to disagree with the Assistive Technology classification and all associated services.
All fields marked with an asterisk (*) are required.

Classification type: Ongoing
Specified needs: Specified needs - Continence Products
Service type: Equipment and products

Assistive technology prescription and clinical support
 Communication and information management products
 Domestic life products
 Mobility products
 Self-care products
 Managing body functions

Reason for disagreement: *
Recommendation was incorrectly applied by assessor|

DISAGREE CANCEL

4. A confirmation message will display, and the status of the recommendation will change to **Disagreed**.

5. If you need to change your decision, you can select **CHANGE**. This option will only be available prior to saving and completing the approval process by selecting **Save and Delegate**. Refer to the [Changing a Decision](#) section for more details.

6. If you disagree with all recommendations and you do not add any new approval decisions, you may be prompted to select “No Care Approval” as a service type during the **Save Decision and Delegate** pop-up in order to complete the delegate decision. Go to [Adding a Care Type](#) for more information.



Agreeing or disagreeing with a Support at Home Recommendation

1. For a client that has been recommended for an ongoing Support at Home classification, you will be required to select **APPLY DELEGATE DECISION**.

 Recommend that the client receive
Home support

This recommendation requires a delegate decision

Classification: SaH Classification 5
Classification type: Ongoing

Home support services: **Home or community general respite:** Community and centre-based respite, Flexible respite 
Nursing care: Enrolled nurse clinical care, Nursing assistant clinical care, Nursing care consumables, Registered nurse clinical care
Nutrition: Nutrition supports
Domestic assistance: General house cleaning, Laundry services, Shopping assistance
Home maintenance and repairs: Assistance with home maintenance and repairs, Expenses for home maintenance and repairs, Gardening
Meals: Meal delivery, Meal preparation
Social support and community engagement: Accompanied activities, Assistance to maintain personal affairs, Cultural support, Digital education and support, Expenses to maintain personal affairs, Group social support, Individual social support
Transport: Direct transport, Indirect transport
Care management: Home support care management
Personal care: Assistance with self-administration of medications, Assistance with self-care and activities of daily living, Continence management (non-clinical)

APPLY DELEGATE DECISION

2. You will be shown all the assessors' recommended service type/s, service/s, frequency and the intensity of the services. You can either agree or disagree by selecting individual service/s or selecting the **Select all** toggle.

1800 836 799 Mon-Fri 8am - 8pm Sat 10am - 2pm Welcome Felipe

Assessor Portal My Dashboard Find a client Delegate decisions Organisation administration Find a service provider Reports and documents Tasks and notifications My Aged Care interactors Logout

 **Apply delegate decision for home support services**

Recommended that the client receive: SaH Classification 5
Classification type: Ongoing

Select all

AGREE WITH SELECTED SERVICES DISAGREE WITH SELECTED SERVICES

Service type	Service	Frequency	Intensity	Recommended to	Decision	Select	
<input checked="" type="checkbox"/>	Home or community general respite	Community and centre-based respite	2	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Home or community general respite	Flexible respite	3	Days per week	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Nutrition	Nutrition supports	2	Time(s) per day	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Domestic assistance	General house cleaning	1	Time(s) per hour	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Domestic assistance	Laundry services	1	Days per month	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Domestic assistance	Shopping assistance	2	Time(s) per year	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Home maintenance and repairs	Gardening	1	Days per month	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Home maintenance and repairs	Assistance with home maintenance and repairs	3	Time(s) per year	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Home maintenance and repairs	Expenses for home maintenance and repairs	2	Days per week	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Meals	Meal delivery	1	Days per month	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Meals	Meal preparation	1	Time(s) per day	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Social support and community engagement	Group social support	3	Days per week	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Transport	Direct transport	1	Days per month	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Transport	Indirect transport		Add new service	Pending	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Care management	Home support care management		Add new service	Pending	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	Personal care	Assistance with self-care and activities of daily living	1	Days per week	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Personal care	Assistance with self-administration of medications	3	Days per month	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Personal care	Continence management (non-clinical)	2	Days per month	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Nursing care	Nursing assistant clinical care	1	Days per month	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Nursing care	Enrolled nurse clinical care	2	Days per week	Add new service	Pending	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Nursing care	Nursing care consumables	2	Days per month	Add new service	Pending	<input type="checkbox"/>



- If you disagree with the service/s that the assessor has recommended, you will be asked to provide the reason for your disagreement.

Then, select **DISAGREE**.

Disagree with selected services

All fields marked with an asterisk (*) are required.

You are about to disagree with the service recommendations listed below

- Home or community general respite
 - Community and centre-based respite: Recommended frequency is 2 days per month. Recommendation to: add service
- Nutrition
 - Nutrition supports: Recommended frequency is 2 time(s) per day. Recommendation to: add service
- Domestic assistance
 - Shopping assistance: Recommended frequency is 2 time(s) per year. Recommendation to: add service
- Home maintenance and repairs
 - Assistance with home maintenance and repairs: Recommended frequency is 3 time(s) per year. Recommendation to: add service
- Social support and community engagement
 - Group social support: Recommended frequency is 3 days per week. Recommendation to: add service

Reason for disagreement: *

Recommendation was incorrectly applied by assessor.

DISAGREE CANCEL

- If you are agreeing with the recommendations by the assessor, tick the services' checkbox and select **AGREE WITH SELECTED SERVICES** button. It should be noted that if you select a service that you have previously disagreed with, it will override your decision.

Apply delegate decision for home support services

Recommended that the client receive: SAH Classification 5
Classification type: Ongoing

Select all

AGREE WITH SELECTED SERVICES DISAGREE WITH SELECTED SERVICES

Service type	Service	Frequency	Intensity	Recommended to	Decision	Select	
<input checked="" type="checkbox"/>	Home or community general respite	Community and centre-based respite	2	Days per month	Add new service	Disagreed	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Home or community general respite	Flexible respite	3	Days per week	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Nutrition	Nutrition supports	2	Time(s) per day	Add new service	Disagreed	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Domestic assistance	General house cleaning	1	Time(s) per hour	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Domestic assistance	Laundry services	1	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Domestic assistance	Shopping assistance	2	Time(s) per year	Add new service	Disagreed	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Home maintenance and repairs	Gardening	1	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Home maintenance and repairs	Assistance with home maintenance and repairs	3	Time(s) per year	Add new service	Disagreed	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Home maintenance and repairs	Expenses for home maintenance and repairs	2	Days per week	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Meals	Meal delivery	1	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Meals	Meal preparation	1	Time(s) per day	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Social support and community engagement	Group social support	3	Days per week	Add new service	Disagreed	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Transport	Direct transport	1	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Transport	Indirect transport		Add new service	Pending	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	Care management	Home support care management		Add new service	Pending	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	Personal care	Assistance with self-care and activities of daily living	1	Days per week	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Personal care	Assistance with self-administration of medications	3	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Personal care	Continence management (non-clinical)	2	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Nursing care	Nursing assistant clinical care	1	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Nursing care	Enrolled nurse clinical care	2	Days per week	Add new service	Pending	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Nursing care	Nursing care consumables	2	Days per month	Add new service	Pending	<input checked="" type="checkbox"/>



Then, you will be asked to confirm by selecting the **AGREE** button.

Agree with selected services

You are about to agree with the service recommendations listed below

- Home or community general respite**
 - Flexible respite:** Recommended frequency is 3 days per week. Recommendation to: add service
- Domestic assistance**
 - General house cleaning:** Recommended frequency is 1 time(s) per hour. Recommendation to: add service
 - Laundry services:** Recommended frequency is 1 days per month. Recommendation to: add service
- Home maintenance and repairs**
 - Gardening:** Recommended frequency is 1 days per month. Recommendation to: add service
 - Expenses for home maintenance and repairs:** Recommended frequency is 2 days per week. Recommendation to: add service
- Meals**
 - Meal delivery:** Recommended frequency is 1 days per month. Recommendation to: add service
 - Meal preparation:** Recommended frequency is 1 time(s) per day. Recommendation to: add service
- Transport**
 - Direct transport:** Recommended frequency is 1 days per month. Recommendation to: add service
 - Indirect transport:** Recommendation to: add service
- Care management**
 - Home support care management:** Recommendation to: add service
- Personal care**
 - Assistance with self-care and activities of daily living:** Recommended frequency is 1 days per week. Recommendation to: add service
 - Assistance with self-administration of medications:** Recommended frequency is 3 days per month. Recommendation to: add service
 - Continence management (non-clinical):** Recommended frequency is 2 days per month. Recommendation to: add service
- Nursing care**
 - Nursing assistant clinical care:** Recommended frequency is 1 days per month. Recommendation to: add service
 - Enrolled nurse clinical care:** Recommended frequency is 2 days per week. Recommendation to: add service
 - Nursing care consumables:** Recommended frequency is 2 days per month. Recommendation to: add service
 - Registered nurse clinical care:** Recommended frequency is 2 days per week. Recommendation to: add service
- Social support and community engagement**
 - Individual social support:** Recommendation to: add service
 - Accompanied activities:** Recommendation to: add service

AGREE **CANCEL**

5. During this process, you can add additional Support at Home services by selecting the **ADD HOME SUPPORT SERVICES** button at the bottom of the page.

Social support and community engagement

FINISH **ADD HOME SUPPORT SERVICES** **CANCEL**

6. The **Add Home Support services** page appears, where you can add Support at Home Service/s, Frequency and Intensity. Add the additional service/s and select the **SAVE TO PLAN** button.



Service	Frequency	Intensity
<input type="checkbox"/> Podiatry		
<input checked="" type="checkbox"/> Social work	2	Time(s) per year
<input type="checkbox"/> Speech pathology		
<input type="checkbox"/> Physiotherapy		
<input type="checkbox"/> Psychology		
<input type="checkbox"/> Music therapy		
<input type="checkbox"/> Diet or nutrition		
<input checked="" type="checkbox"/> Allied health assistance	2	Days per month
<input type="checkbox"/> Aboriginal or Torres Strait Islander Health Practitioner assistance		
<input type="checkbox"/> Aboriginal or Torres Strait Islander Health Worker assistance		
<input type="checkbox"/> Exercise physiology		
<input checked="" type="checkbox"/> Occupational therapy	2	Days per week
<input type="checkbox"/> Counselling or psychotherapy		

SAVE TO PLAN CANCEL

7. Review the services you have added and select **FINISH** once you are ready to proceed to delegate.

Allied health and therapy Allied health assistance

FINISH ADD HOME SUPPORT SERVICES CANCEL

8. Once a decision has been recorded and finalised by the delegate, the recommendations will be displayed as below:

support plan and services

Identified needs **Goals & recommendations** Decisions Manage services & referrals Associated People Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
 IAT Outcome: CHSP
 Existing classification: SaH Classification 8 (Pending allocation)
 AT Medium (Pending allocation)
 HM Medium (Pending allocation)

Client concerns and goals
 No client concerns or goals.

Other recommendations

Home support
 (not yet in place)
 Delegate decision: **agreed**

Classification: SaH Classification 8
 Classification type: Ongoing
 Priority category: Standard
 Client's preference for Home support services: Seeking services
 Home support services: **Care management:** Home support care management
Domestic assistance: General house cleaning, Laundry services, Shopping assistance

Home modifications
 (not yet in place)
 Delegate decision: **agreed**

Home modifications tier: HM Medium
 Classification type: Short-term
 Priority category: Medium
 Client's preference for Home modifications services: Seeking services
 Home modifications services: **Home adjustments:** Home modification products, Home modifications prescription and clinical support



Editing a recommendation

1. To edit a care type or level of care recommended by a clinical assessor, select the **Edit** icon to the right of the recommendation.



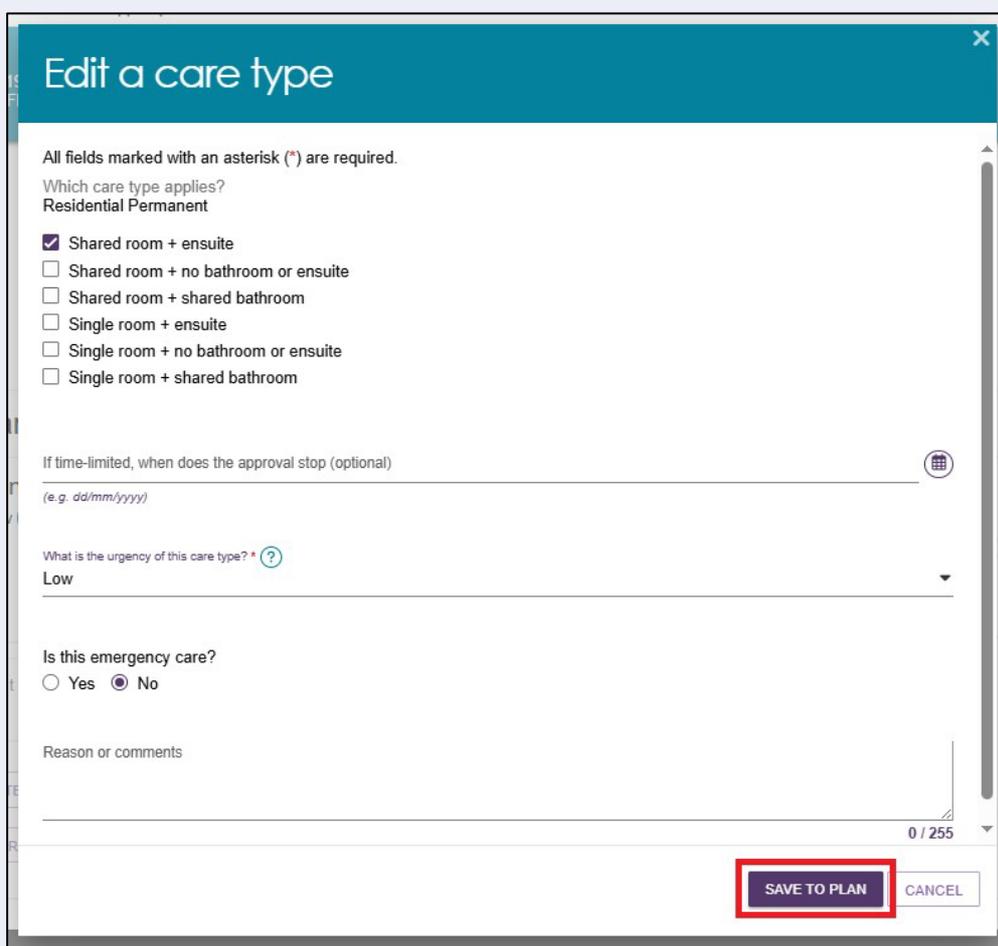
Recommended care requiring delegate decision

Residential Permanent  

Urgency for this care type Low 

Agreed

2. The **Edit a care type** pop up will be displayed, and you will be able to make any changes required. Select **SAVE TO PLAN** to save the changes.



Edit a care type 

All fields marked with an asterisk (*) are required.

Which care type applies?
Residential Permanent

Shared room + ensuite
 Shared room + no bathroom or ensuite
 Shared room + shared bathroom
 Single room + ensuite
 Single room + no bathroom or ensuite
 Single room + shared bathroom

If time-limited, when does the approval stop (optional) 
(e.g. dd/mm/yyyy)

What is the urgency of this care type? * 
Low

Is this emergency care?
 Yes No

Reason or comments
0 / 255

Adding a care type

Clinical Assessment Delegates can add another care type for delegate decision for the client, if required.

1. At the bottom of the client's Decisions tab of the Support Plan and Services page, select **ADD A CARE TYPE FOR DELEGATE DECISION**.



Master Bart SAMPSON
Male, 81 years old, 1 March 1944, ACD1907385
742 EVERGREEN TERRACE SPRINGFIELD, VIC, 3544

Primary contact: Bart Sampson (self)
No support relationships recorded

Support plan and services

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People

PRINT COPY OF SUPPORT PLAN

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SaH Classification 5
Recommended classification: SaH Classification 5 Agreed CHANGE
Specified needs - Continence Products
HM Medium
Override reason: Other Aged Care Program/s
Override reason description: Needs to be overridden to propose services.

Recommended care requiring delegate decision

Recommend that the client receive Home support

Recommend that the client receive Assistive technology

Recommend that the client receive Home modifications

ADD A CARE TYPE FOR DELEGATE DECISION | RECOMMEND AN ASSISTIVE TECHNOLOGY

SAVE AND DELEGATE | RETURN TO ASSESSOR | RETURN TO CLIENT

- In the pop-up box, select the care type that applies from the drop-down box. You will need to select the priority for the care type. Please note that there are historical care types in this section, which should only be used in prescribed situations.

Add care type for delegate decision

All fields marked with an asterisk (*) are required.

Which care type applies? *

Residential Permanent

Shared room + ensuite

Shared room + no bathroom or ensuite

Shared room + shared bathroom

Single room + no bathroom or ensuite

Single room + shared bathroom

Single room + ensuite

If time-limited, when does the approval stop (optional):
(e.g. dd/mm/yyyy)

What is the urgency of this care type? * ?
High

Is this emergency care?
 Yes No

Reason or comments

0 / 255

SAVE TO PLAN | CANCEL

- The care type will be added to the **Recommended care requiring delegate decision** list with a decision of **Agreed**.

Recommended care requiring delegate decision

Residential Permanent
• Single room + ensuite Agreed CHANGE
Urgency for this care type High ?

Recommend that the client receive Home modifications

Recommend that the client receive Assistive technology



Recommending a Home Modification Service

- ! When considering adding/editing Home modifications care recommendations, refer to:
- *Support Plan* section of [My Aged Care – Integrated Assessment Tool \(IAT\) User Guide](#)
 - *Approving AT and HM under Support at Home* and *Approving AT and HM under CHSP* sections under Chapter 8 of the [My Aged Care Assessment Manual](#)
 - Delegate training.

As a delegate you can recommend a Home modification (HM) service when the assessment identifies that changes to the client's living environment are necessary to support their safety, independence, or ability to remain at home.

1. From the Decisions tab, select the **RECOMMEND HOME MODIFICATIONS** button.

Support plan and services

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SaH Classification 3
Recommended classification: SaH Classification 3 **Agreed**

Recommended care requiring delegate decision

Recommend that the client receive
Home support

2. The **ADD HOME MODIFICATIONS RECOMMENDATION** screen appears. Select the home modification tier (Low, Medium, or High) from the drop-down list.

The Service Type section will be pre-filled and greyed out.

Choose whether the client want to seek Home modifications services through the Support at Home program.

Then, select **SAVE TO PLAN**.

Add Home modifications recommendation

 The client's preference for seeking Home modifications services determines whether they are active in the AT-HM Priority System. ✕

All fields marked with an asterisk (*) are required.

Home modifications tier*
HM Medium

Service Type*
Home adjustments

Home modification products
 Home modifications prescription and clinical support

The client's preference for seeking Home modifications services through the Support at Home program is:*
 Seeking services Not seeking services

Recommending an Assistive Technology Service

-  When considering adding/editing Assistive technology care recommendations, refer to:
- *Support Plan* section of [My Aged Care – Integrated Assessment Tool \(IAT\) User Guide](#)
 - *Approving AT and HM under Support at Home and Approving AT and HM under CHSP* sections under Chapter 8 of the [My Aged Care Assessment Manual](#)
 - Delegate training.

As an assessment delegate, you can recommend an Assistive technology service when the client's assessment indicates a need for equipment or devices that support daily living, safety, or independence to ensure the right equipment is provided to enhance the client's ability to live safely and independently at home.

Please note that Assistance dogs are classified under the Ongoing classification type of assistive technology. It is known as 'Specified Needs – Assistance Dogs'.

1. From the Decisions tab, select the **RECOMMEND AN ASSISTIVE TECHNOLOGY** button.

 Support plan and services

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SaH Classification 2
Recommended classification: SaH Restorative Care Pathway 

Override reason: Has restorative care goals
Override reason description: RCP needed

Recommended care requiring delegate decision

 Recommend that the client receive
Home support



2. The **Add Assistive technology recommendation** screen appears.

Select the classification type from the drop down list.

If the classification type is Short-term, select the technology tier from the drop-down list. If it is Ongoing, assistance dogs is available under the Specified Needs section.

Choose whether the client want to seek Assistive technology services through the Support at Home program.

Then, select **SAVE TO PLAN**.

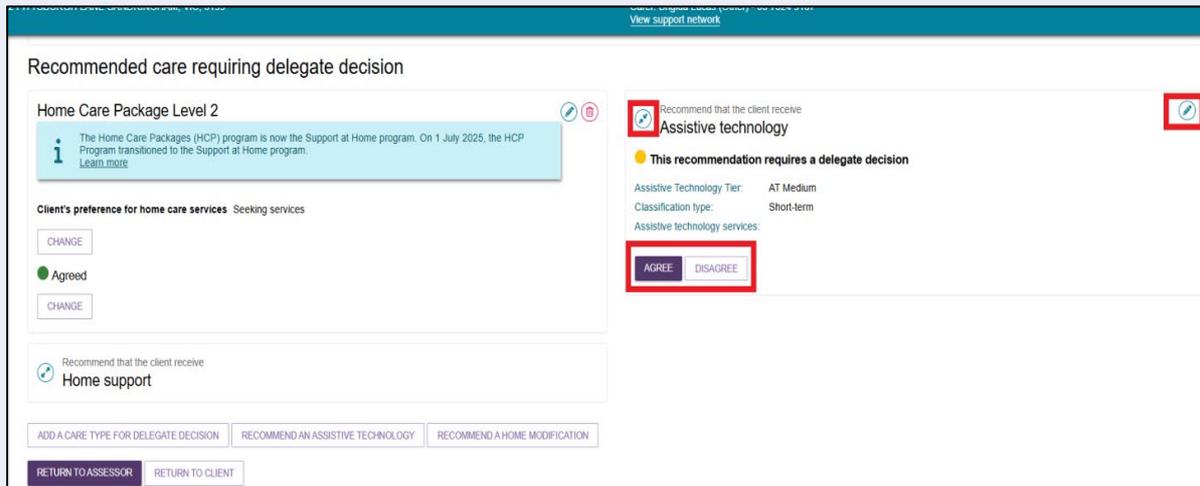
Assistive Technology Short Term example

The screenshot shows the 'Add Assistive technology recommendation' form. A red box highlights the 'Classification type' dropdown menu set to 'Short-term' and the 'Assistive technology tier' dropdown menu set to 'AT Medium'. Below these, the 'Service Type' dropdown is set to 'Equipment and products'. A list of service categories is shown with checkboxes: 'Assistive technology prescription and clinical support', 'Communication and information management products', 'Domestic life products', 'Managing body functions', 'Mobility products', and 'Self-care products', all of which are checked. At the bottom, the 'The client's preference for seeking Assistive technology services through the Support at Home program is:' section has 'Seeking services' selected. A red box also highlights the 'SAVE TO PLAN' button.

Assistive Technology Ongoing example

The screenshot shows the 'Add Assistive technology recommendation' form. A red box highlights the 'Classification type' dropdown menu set to 'Ongoing' and the 'Specified needs' dropdown menu set to 'Specified needs - Assistance Dogs'. Below these, the 'Service Type' dropdown is set to 'Equipment and products'. A list of service categories is shown with checkboxes: 'Assistive technology prescription and clinical support', 'Communication and information management products', 'Domestic life products', 'Managing body functions', 'Mobility products', and 'Self-care products', all of which are checked. At the bottom, the 'The client's preference for seeking Assistive technology services through the Support at Home program is:' section has 'Seeking services' selected. A red box also highlights the 'SAVE TO PLAN' button.

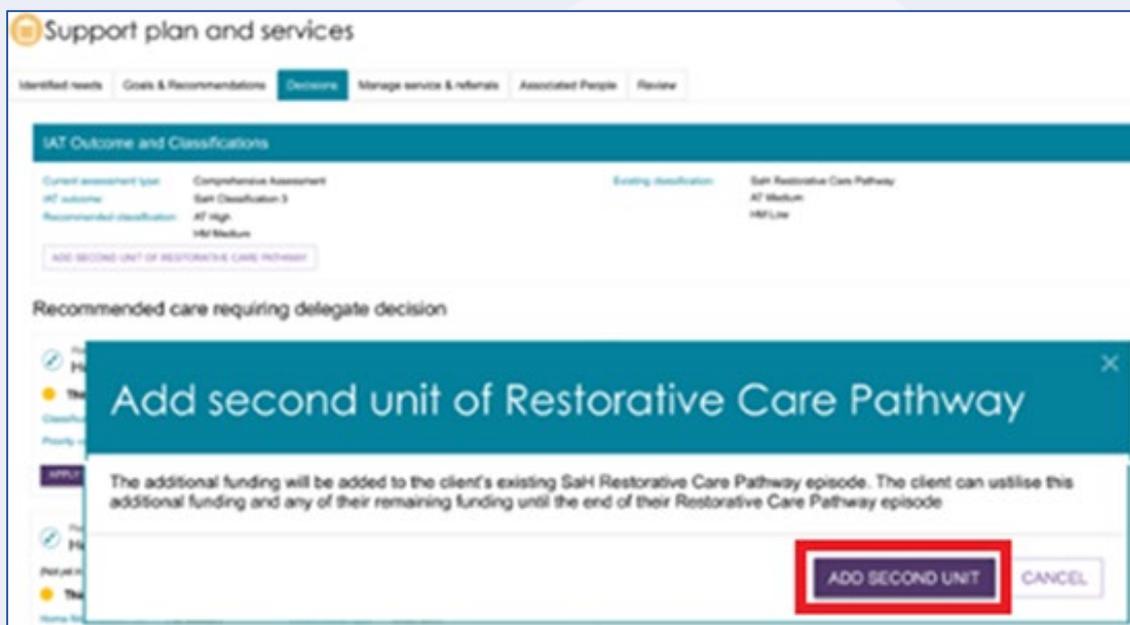
- The recommendation will be displayed within the Decisions tab under **Recommended care requiring delegate decision** section. Expand the item to view the details. Select **AGREE** or **DISAGREE**. You can also edit the recommendation using the **Edit** (Pencil) icon as shown in the example below.



Recommending a second Restorative Care Pathway unit

Delegates can add a second unit of Restorative Care Pathway (RCP) during the Decision process. This is subject to the number of places available during the financial quarter when the second unit is requested. If there are no RCP units available, the second unit cannot be added.

- Go to the Decision Tile from the assessor portal home page.
- Select the client to add the second unit. This client must already have RCP approved and active.
- Go to the client's support plan, then the Decision tab, then the IAT Outcome and Classification section.
- Select **ADD SECOND UNIT OF RESTORATIVE CARE PATHWAY**.
- The 'Add second unit of Restorative Care Pathway' pop up appears. Read the confirmation text, then select **ADD SECOND UNIT**.



Changing a decision

1. If you need to change your decision from Agreed to Disagreed, or Disagreed to Agreed, you can select the **CHANGE** button.

Support plan and services PRINT COPY OF SUPPORT PLAN

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SaH Classification 5
Recommended classification: SaH Classification 5 **Agreed**

Specified needs - Contenance Products
HM Medium

Override reason: Other Aged Care Program's
Override reason description: Needs to be overridden to propose services.

Recommended care requiring delegate decision

Recommend that the client receive Home support

Recommend that the client receive Home modifications

Recommend that the client receive Assistive technology

Specified Needs: Specified needs - Contenance Products
Classification type: Ongoing
Assistive technology services: Equipment and products: Assistive technology prescription and clinical support, Communication and information management products, Domestic life products, Managing body functions, Mobility products, Self-care products

Disagreed

2. You will be able to add approval cease dates and comments where appropriate in the pop-up.

Change decision

You are about to change the recommendation from agreed to disagreed for Bart SAMPSON for Residential Permanent

All fields marked with an asterisk (*) are required.

Comments or reason for disagreement *
Maximum 255 characters

3. If you are changing the decision from **Agreed** to **Disagreed**, you will need to provide a reason for the change. Please note, this option will only be available prior to saving and completing the approval process.
4. A confirmation message will display.

Recommendation successfully updated.

Finalising your decision

! **For CHSP only:** From 1 November 2025, there are interim and manual changes to the Delegate Approval process for CHSP only, and how it impacts the Notice of Decision letter generation, completion and upload. For more information on the **process** and **Notice of Decision letter generation**, please refer to *Support at Home – Manual Delegate Approval for CHSP – Standard Operating Procedure* and instructional videos for comprehensive and home support assessments. **Note:** This process was updated to align with recent changes effective from 23 February, the updated approach now applies.

1. Once the decision has been made, select **SAVE AND DELEGATE**.

Support plan and services

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SaH Classification 5
Recommended classification: SaH Classification 5 Agreed
Specified needs - Continence Products
HM Medium
Override reason: Other Aged Care Program/s
Override reason description: Needs to be overridden to propose services.

Recommended care requiring delegate decision

Residential Permanent
• Single room + ensuite
Urgency for this care type: High Agreed

2. A pop-up will display, confirming the care types that were agreed and not agreed. If you need to make any changes to your decision, select **CANCEL**. Ensure the date of the delegation is correct. For certain types of care, you can expand to see more information by using the expander button.

If you are satisfied with the decision and the date, select **SAVE DECISION**.



Save decision and delegate

All fields marked with an asterisk (*) are required.

You are about to save the delegate decision under the Aged Care Act 2024 for Bart Sampson.

The following care was agreed:

- Residential Permanent (High)
- Home Support Ongoing - SaH Classification 5
 - Home or community general respite:
 - Flexible respite : Recommended frequency is 3 days per week.
 - Domestic assistance:
 - General house cleaning : Recommended frequency is 1 time(s) per hour.
 - Laundry services : Recommended frequency is 1 days per month.
 - Home maintenance and repairs:
 - Gardening : Recommended frequency is 1 days per month.
 - Expenses for home maintenance and repairs : Recommended frequency is 2 days per week.
 - Meals:
 - Meal delivery : Recommended frequency is 1 days per month.
 - Meal preparation : Recommended frequency is 1 time(s) per day.
 - Transport:
 - Direct transport : Recommended frequency is 1 days per month.
 - Indirect transport
 - Care management: Home support care management
 - Personal care:
 - Assistance with self-care and activities of daily living : Recommended frequency is 1 days per week.
 - Assistance with self-administration of medications : Recommended frequency is 3 days per month.
 - Continence management (non-clinical) : Recommended frequency is 2 days per month.
 - Nursing care:
 - Nursing assistant clinical care : Recommended frequency is 1 days per month.
 - Enrolled nurse clinical care : Recommended frequency is 2 days per week.
 - Nursing care consumables : Recommended frequency is 2 days per month.
 - Registered nurse clinical care : Recommended frequency is 2 days per week.
 - Social support and community engagement: Individual social support, Accompanied activities, Cultural support, Digital education and support, Assistance to maintain personal affairs, Expenses to maintain personal affairs
 - Allied health and therapy:
 - Social work : Recommended frequency is 2 time(s) per year.
 - Allied health assistance : Recommended frequency is 2 days per month.
 - Occupational therapy : Recommended frequency is 2 days per week.
- Assistive Technology Ongoing - Specified needs - Continence Products
- Home Modifications Short-term - HM Medium

Delegation date *

08/05/2025

SAVE DECISION

CANCEL

! If the approval was actioned off-system earlier than the day that the delegation is completed via the portal, you can set the date of delegation to the earlier date as reflected on the Approval Form. It is available for download from the **Reports and Documents** tile of the assessor portal. This form is evidence that you made the approval decisions prior to the date you are making the entry on the system. You must attach the Approval Form to the **Attachments** tab.

Save decision and delegate

All fields marked with an asterisk (*) are required.

You are about to save the delegate decision under the Aged Care Act 2024 for Bart Sampson.

The following care was agreed:

- Residential Permanent (High)
- Home Support Ongoing - SaH Classification 5
- Assistive Technology Ongoing - Specified needs - Continence Products
- Home Modifications Short-term - HM Medium

Delegation date *

07/05/2025

Delegation time

(e.g. hh:mm AM/PM) 12:15 PM

I have made a decision for this client utilising other means before today

SAVE DECISION

CANCEL



3. A confirmation message will display stating that the approvals have been submitted to Services Australia to process, and that the decision has been recorded and sent to the clinical assessor to finalise the client's support plan and match and refer for service.



Correspondence Notifications

If you have approved a Support at Home Classification or a Residential Care classification, you can request to receive notifications of any Support at Home or Residential Care correspondence received by that client from the department.

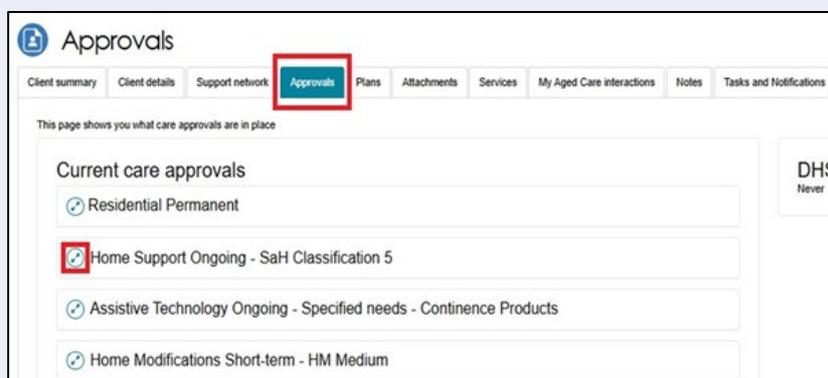
For Support At Home, this may be required in circumstances where the client is considered to be a vulnerable client that may require assistance from a clinical assessor to link to Home Support services.

Examples of Residential Care correspondence include:

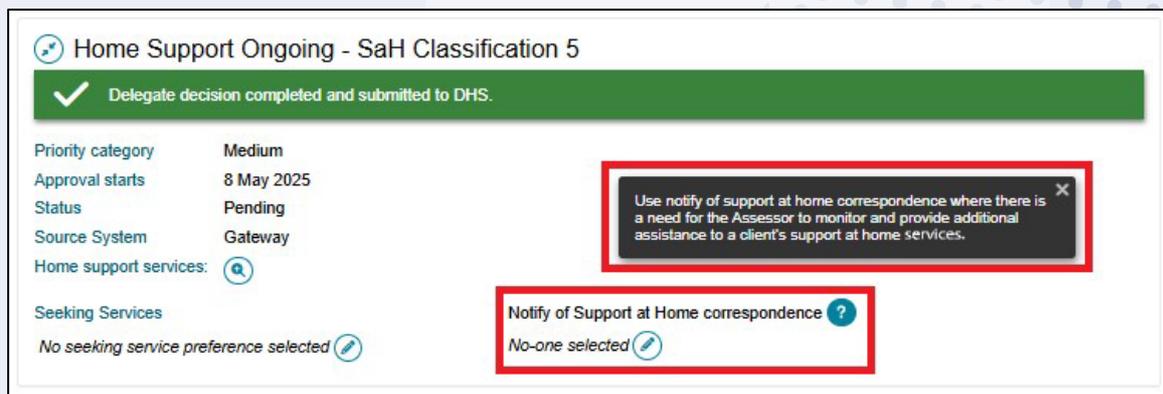
- permanent residential care is allocated
- approval about to expire.

For general information about notifications and tasks in the assessor portal, please refer to [My Aged Care – Assessor Portal User Guide 9 – Tasks and notifications](#).

1. To receive notifications, go to the **Approvals** tab in the client record under the Current care approvals section by selecting the **expand** button next to the Support at Home or Residential Care classification name. You can select one person from an outlet to receive this notification.



2. The below screenshot shows the expanded view – Select the **edit** button underneath **Notify of [Program] Correspondence** to specify the staff member and refer to the help text for guidance.



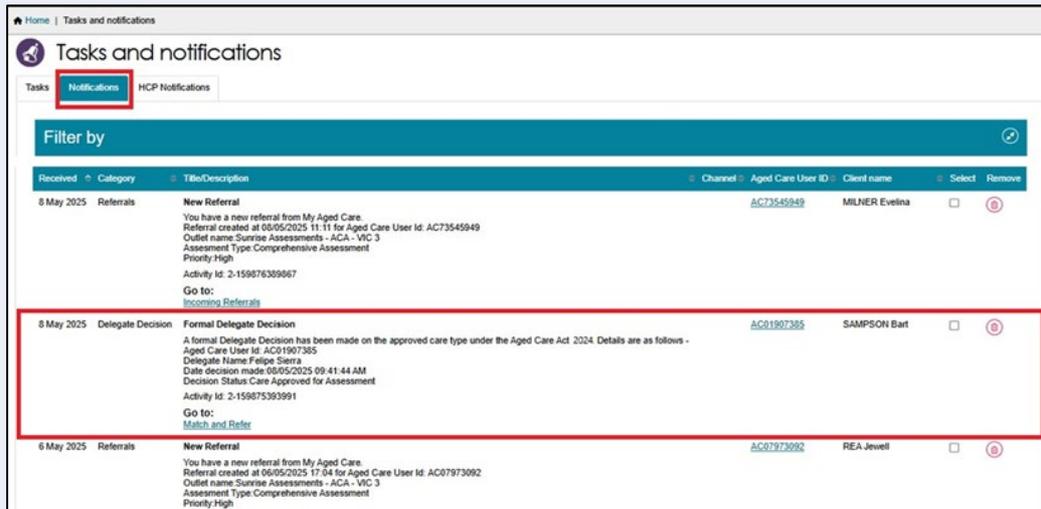
- Complete the information required and choose a Recipient from the list of staff members in the outlet. Select **SAVE** to return.

- You should be able to see your nominated Recipient of the notification on the **Approvals** tab.

- The clinical assessor will be able to see the client under the **Delegate decision complete** section of their **Current assessments** tab. The clinical assessor will then need to match and refer for services and finalise the support plan.



6. The clinical assessor will receive a notification in the **Task and notifications** page that the delegate has completed their decision, and they will be able to navigate to the client record and directly to match and refer for services from this page.



Notice of Decision (approval or non-approval) letter

The assessment delegate can generate and upload the Notice of Decision (NoD) letter, after the delegate decision is completed. This applies to both Approval letters and non-Approval letters.

To generate, print and upload approval or non-approval letters, navigate to the client's support plan, then the **Decisions** tab.

You can also upload NoD letters via the Attachments tab.

If you have agreed to more than one care type recommendation for the client, you only need to generate, upload and print one approval letter to send to the client. The information about all agreed care types will appear on this letter.

A person assigned the Delegate Support role will also be able to print and upload these letters.

! **For CHSP only approvals:** From 1 November 2025, there are manual changes introduced to the process for generating and uploading the Notice of Decision (Approval) letter for CHSP.

For more information, please refer to *Support at Home – Manual Delegate Approval for CHSP – Standard Operating Procedure* and instructional videos for comprehensive assessments.

Note: This process was updated to align with recent changes effective from 23 February, the updated approach now applies.

Approval Letters

! Any decision completed by a Clinical Assessment Delegate (System Governor) must contain the following in the Notice of Decision letter:

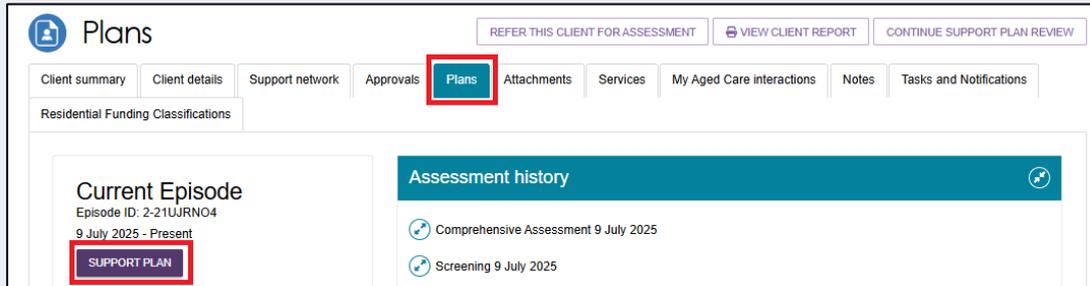
- i. the approved service groups (and service types and services, where applicable)
- ii. the approved classification type for each service group
- iii. the approved classification levels (which can indicate the level of funding)



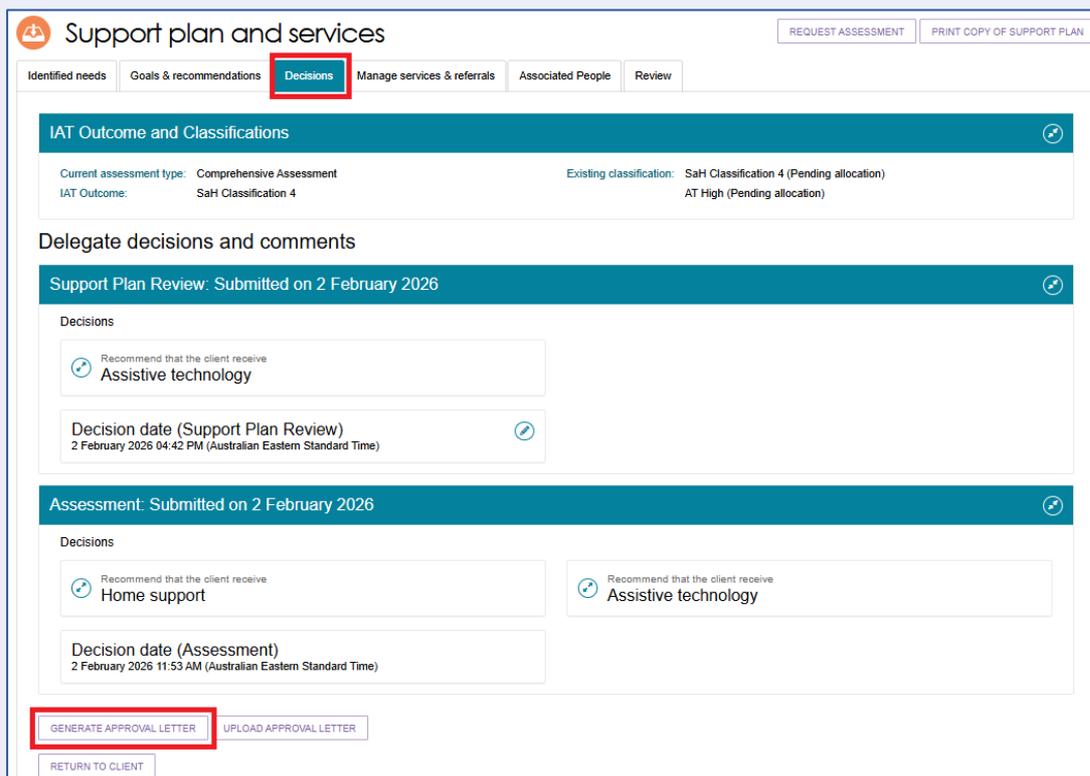
- iv. the approved priority category (where applicable)
- v. the reasons and evidence supporting the delegate's decision
- vi. the older person's rights of review, should they wish to query or dispute the decision.

This is to ensure high quality and consistency in letters that clients receive.

1. Go to the Client's profile and select the **Plans** tab. In the Plans page select the **Support Plan** button.



2. The Support Plan and Services page appears. Select the **Decisions** tab. At the bottom of the page, you will be able to select **GENERATE APPROVAL LETTER**.



3. The Generate Approval Letter pop up appears. Ensure you are generating the letter for the correct client, then select **GENERATE APPROVAL LETTER**.



- If the Approval letter takes too long to generate, you will be re-directed to the **Reports** tab where you will be able to select **View** to open a copy of the letter. Certain user generated documents, including NoD letters and Referral Code letters, will be retained in **Recently Requested Reports** for seven days, after which they will be cleared from this screen. They can be regenerated as per the original process.

Home | Reports and documents

Reports and documents

Reports Forms Links

My Reports

Name	Requested Date	Status
Bart Sampson Delegate Approval Letter Template 8 May 2025	8 May 2025	Ready - View

- When you have signed the letter, you can use the **UPLOAD APPROVAL LETTER** button in the **Decisions** tab of the support plan to upload the letter to the client's record. Alternatively you can upload it via the Attachments tab.

Decisions Tab

Support plan and services

Identified needs Goals & recommendations Decisions Manage services & referrals Associated People Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment Existing classification: SaH Classification 4 (Pending allocation)
IAT Outcome: SaH Classification 4 AT High (Pending allocation)

Delegate decisions and comments

Support Plan Review: Submitted on 2 February 2026

Assessment: Submitted on 2 February 2026

Document was last saved: Just now

Decisions

Recommend that the client receive Home support

Recommend that the client receive Assistive technology

Decision date (Assessment)
2 February 2026 11:53 AM (Australian Eastern Standard Time)

GENERATE APPROVAL LETTER UPLOAD APPROVAL LETTER

RETURN TO CLIENT

Attachments tab

Morgan FREEMAN

Male, 88 years old, 1 June 1937, AC36914539
56 WHITE TRAIL ROAD BREMER BAY, WA, 6338

Primary contact: Morgan Freeman (self)
No support relationships recorded

Attachments

REFER THIS CLIENT FOR ASSESSMENT VIEW CLIENT REPORT

Client summary Client details Support network Approvals Plans Attachments Services My Aged Care interactions Notes Tasks and Notifications

Residential Funding Classifications

Attachments

ADD AN ATTACHMENT

Assessment Attachments Other Attachments Correspondence

No attachments found to be displayed.



6. The Upload approval letter, or the Add an Attachment pop up appears. Choose the approval letter file to upload.

Acceptable file types are: .jpeg, .jpg, .bmp, .png, .docx, .xlsx, .pdf, or .txt. Please note that .rtf is not acceptable.

Enter the name of the attachment.

If you are attaching the letter, ensure the attachment type is **Approval letter sent to client**.

Optionally provide a short description about the contents of the attachment.

Finally, select **UPLOAD**.

UPLOAD APPROVAL LETTER EXAMPLE

Upload approval letter

All fields marked with an asterisk (*) are required.
You can upload files up to 5MB. The following file types are accepted: .jpeg, .jpg, .bmp, .png, .docx, .xlsx, .pdf, .txt

Approval letter to upload *

CHOOSE FILE Morgan Fr... 2026.pdf

Name of the attachment: *
Morgan Freeman Approval Letter

Please provide a short description about the contents of the attachment, e.g. assessment date and time
Details go here

UPLOAD CANCEL

ADD AN ATTACHMENT EXAMPLE

Add an attachment

Please note: Some attachments will be viewable by other people with authorised access to this client record. Please refer to your portal guide for details.

All fields marked with an asterisk (*) are required.
You can upload files up to 5 MB to this record. The following file types are accepted: .jpeg, .jpg, .bmp, .png, .docx, .xlsx, .pdf, .txt *

CHOOSE FILE Morgan Fr... 2026.pdf

Name of the attachment: *
Morgan Freeman Approval Letter

Type of attachment *
Approval Letter Sent to Client

Please provide a short description about the contents of the attachment, e.g. assessment date and time
Description about approval letter

UPLOAD CANCEL

7. The uploaded letter will display in the Attachments tab.

The screenshot shows the 'Attachments' tab for a client named Morgan Freeman. The client's details are visible at the top: Male, 88 years old, 1 June 1937, AC36914539, 56 WHITE TRAIL ROAD BREMER BAY, WA, 6338. The primary contact is Morgan Freeman (self), and there are no support relationships recorded. The 'Attachments' tab is selected, and a red box highlights the 'Approval Letter Sent to Client' attachment. The attachment details include the filename 'Morgan Freeman Approval Letter_260202191401 [pdf 300.71KB]' and a description 'Description about approval letter'. The date '2 February 2026' is also visible.

Non-approval Letters

Delegates can only generate non-approval letters when the delegate decision contains 'No care approval' or 'No change to existing care approvals'.

1. Go to the Client's profile and select the **Plans** tab. In the Plans page select the **Support Plan** button.

The screenshot shows the 'Plans' tab for the same client. The 'Plans' tab is selected, and a red box highlights the 'SUPPORT PLAN' button. The current episode is 'Current Episode' with ID '2-21UJRN04' and dates '9 July 2025 - Present'. The assessment history shows 'Comprehensive Assessment 9 July 2025' and 'Screening 9 July 2025'.

2. Navigate to the **Decisions** tab of the support plan.

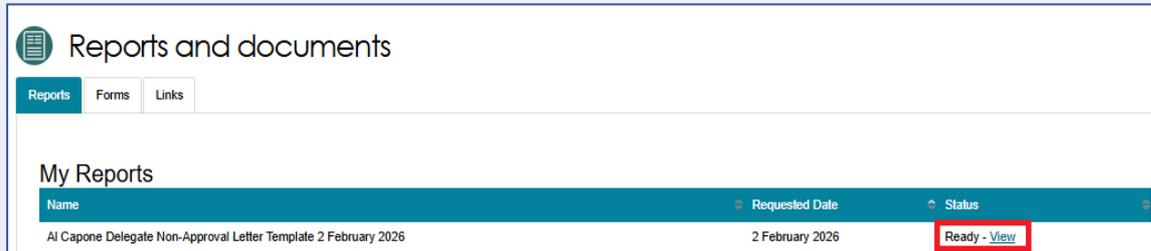
At the bottom of the page, you will be able to select **GENERATE NON-APPROVAL LETTER**.

The screenshot shows the 'Decisions' tab of the support plan. The 'Decisions' tab is selected, and a red box highlights the 'GENERATE NON-APPROVAL LETTER' button. The page displays 'IAT Outcome and Classifications' with 'Current assessment type: Comprehensive Assessment' and 'IAT Outcome: SaH Classification 3'. Under 'Delegate decisions and comments', there is an 'Assessment: Submitted on 2 February 2026' with a decision of 'No Care Approval'. The priority is 'Low', approval starts on '2 February 2026', and the status is 'Agreed'. A recommendation is to 'Recommend that the client receive Home support'. The decision date is '2 February 2026 12:00 AM (Australian Eastern Standard Time)'. Other buttons at the bottom include 'UPLOAD NON-APPROVAL LETTER', 'REQUEST/CHANGE NOTIFICATION OF SAH CORRESPONDENCE', and 'RETURN TO CLIENT'.



3. The Non-approval letter generates automatically with no confirmation pop ups. If the Non-Approval letter takes too long to generate, you will be re-directed to the **Reports** tab where you will be able to select **View** to open a copy of the letter.

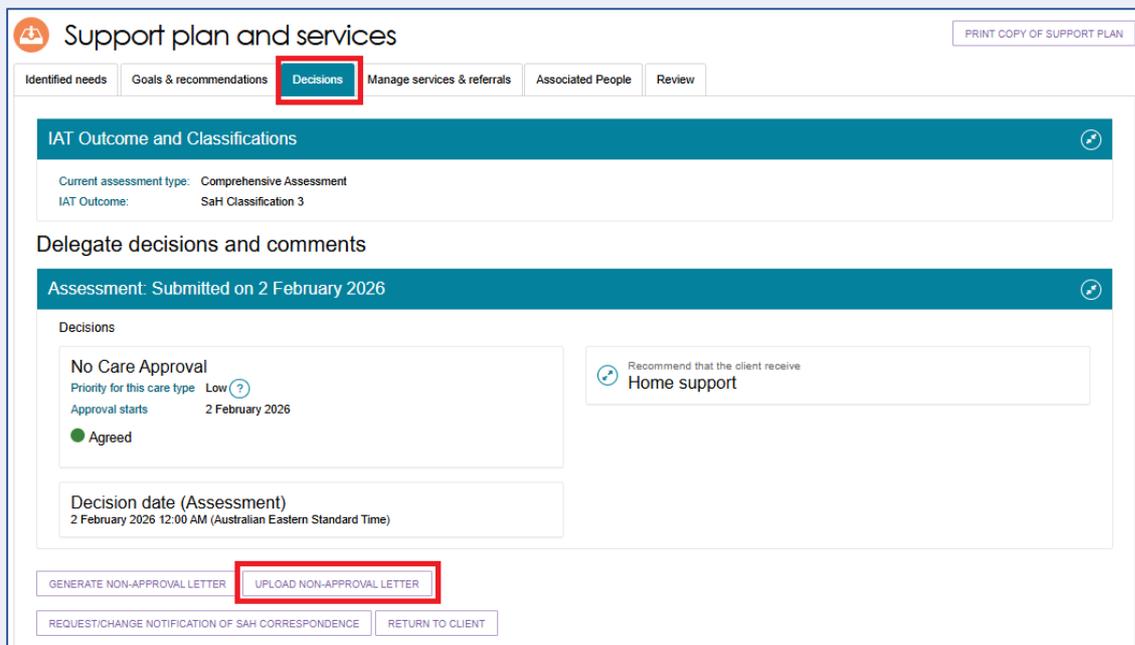
Certain user generated documents, including NoD letters and Referral Code letters, will be retained in **Recently Requested Reports** for seven days, after which they will be cleared from this screen. They can be regenerated as per the original process.



Name	Requested Date	Status
AI Capone Delegate Non-Approval Letter Template 2 February 2026	2 February 2026	Ready - View

4. When you have signed the letter, you can use the **UPLOAD NON-APPROVAL LETTER** button in the **Decisions** tab of the support plan to upload the letter to the client's record. Alternatively, you can upload this through the **Attachments** tab on the client record.

DECISIONS TAB OF THE SUPPORT PLAN



Support plan and services

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SAH Classification 3

Delegate decisions and comments

Assessment: Submitted on 2 February 2026

Decisions

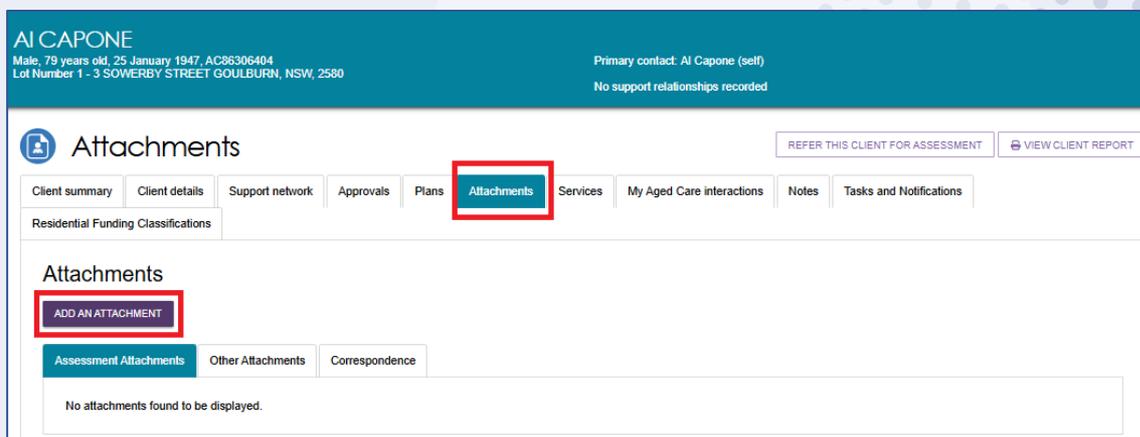
No Care Approval
Priority for this care type: Low
Approval starts: 2 February 2026
Agreed

Recommend that the client receive Home support

Decision date (Assessment)
2 February 2026 12:00 AM (Australian Eastern Standard Time)

GENERATE NON-APPROVAL LETTER | **UPLOAD NON-APPROVAL LETTER** | REQUEST/CHANGE NOTIFICATION OF SAH CORRESPONDENCE | RETURN TO CLIENT

ATTACHMENTS TAB OF CLIENT RECORD



AI CAPONE
Male, 79 years old, 25 January 1947, AC86306404
Lot Number 1 - 3 SOWERBY STREET GOULBURN, NSW, 2580

Primary contact: AI Capone (self)
No support relationships recorded

Attachments

Client summary | Client details | Support network | Approvals | Plans | **Attachments** | Services | My Aged Care interactions | Notes | Tasks and Notifications

Residential Funding Classifications

ADD AN ATTACHMENT

Assessment Attachments | Other Attachments | Correspondence

No attachments found to be displayed.



5. The Upload non-approval letter pop up, or the Add an attachment pop up appears. Choose the Non-approval letter file to upload or attach. Acceptable file types are: .jpeg, .jpg, .bmp, .png, .docx, .xlsx, .pdf, or .txt. Please note that .rtf is not acceptable.

Enter the name of the attachment.

If you are attaching the letter, ensure the attachment type is **Non-approval letter sent to client**.

Optionally provide a short description about the contents of the attachment.

Finally, select **UPLOAD**.

UPLOAD NON-APPROVAL LETTER EXAMPLE

Upload non-approval letter

All fields marked with an asterisk (*) are required.

You can upload files up to 5MB. The following file types are accepted: .jpeg, .jpg, .bmp, .png, .docx, .xlsx, .pdf, .txt

Non-Approval letter to upload *

CHOOSE FILE AI Capon...ry 2026.pdf

Name of the attachment: *

AI Capone Non-approval letter

Please provide a short description about the contents of the attachment, e.g. assessment date and time

Details go here

UPLOAD CANCEL

ADD AN ATTACHMENT EXAMPLE

Add an attachment

Please note: Some attachments will be viewable by other people with authorised access to this client record. Please refer to your portal guide for details.

All fields marked with an asterisk (*) are required.

You can upload files up to 5 MB to this record. The following file types are accepted: .jpeg, .jpg, .bmp, .png, .docx, .xlsx, .pdf, .txt *

CHOOSE FILE AI Capon...ry 2026.pdf

Name of the attachment: *

AI Capone Non-approval letter

Type of attachment *

Non-Approval Letter to Client

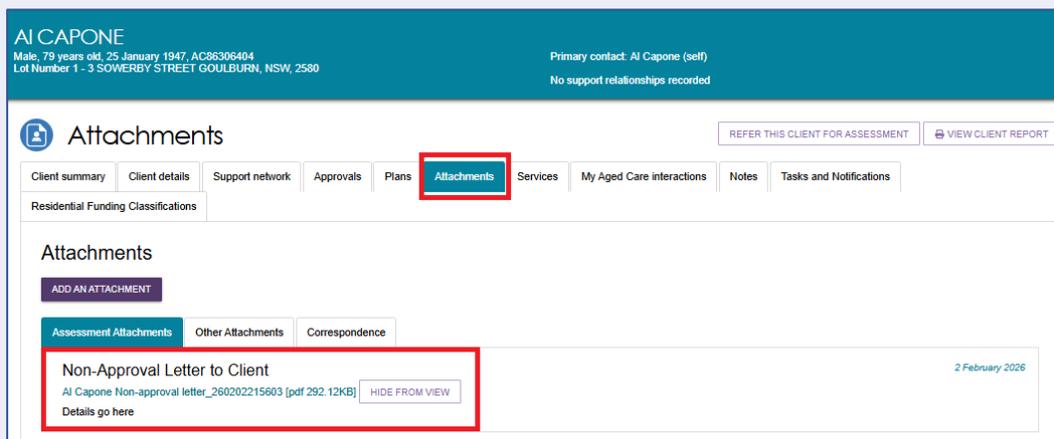
Please provide a short description about the contents of the attachment, e.g. assessment date and time

Details go here

UPLOAD CANCEL



6. The uploaded non-approval letter will display in the Attachments tab.



Requesting correction to care approval decision

A corrections process is available where you have made an error in recording a decision.

Correction requests can be submitted up to 42 days after initial delegation, where there are no active or commenced service referrals.

! From 1 November 2025, an interim process is in place to request correction to Support at Home decisions. For more information on the **process**, please refer to *Support at Home – Interim Request Correction Process – Standard Operating Procedure*.

Note: This process was updated to align with recent changes effective from 23 February, the updated approach now applies.

Follow these steps to request a correction to care approval decisions:

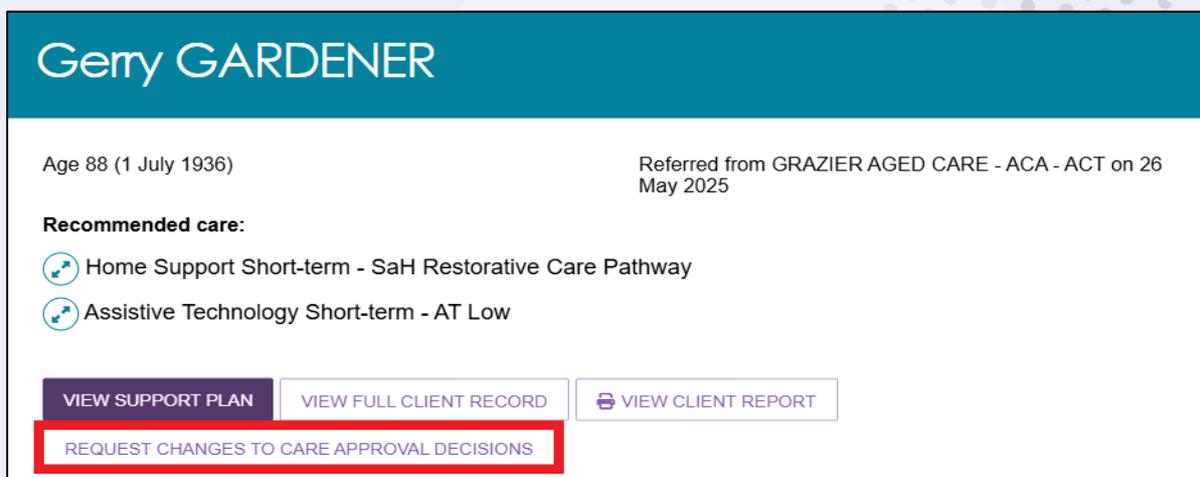
1. In the Delegate Decisions tab of the portal, navigate to the **Decision history** tab.

Select the expand arrow on the client card to display a summary of the client's information in the pop-up.

Select **REQUEST CHANGES TO CARE APPROVAL DECISION**.

If you are using list view, this option will be available from the expanded client information section.

Card View



List View

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date submitted	Priority
YINDI	Thomas KK	AC16332744	GREEN Africa	GREEN Africa	Delegate Decision Complete	26/05/2025	High
AUTORAIK	AUTOGenesisi	AC58367525	GREEN Africa	GREEN Africa	Finalised	26/05/2025	Medium
GARDENER	Gerry	AC97375885	GREEN Africa	FREE Prospect	Delegate Decision Complete	26/05/2025	Low

Age 88 (1 July 1936) Referred from GRAZIERAGED CARE - ACA - ACT on 26 May 2025

Recommended care:

- Home Support Short-term - SaH Restorative Care Pathway
- Assistive Technology Short-term - AT Low

[VIEW SUPPORT PLAN](#) [VIEW FULL CLIENT RECORD](#) [VIEW CLIENT REPORT](#) [REQUEST CHANGES TO CARE APPROVAL DECISIONS](#)

- Record a reason for the change and provide appropriate reasons for the request, then select **OK, START CHANGES**. Your reasons need to be consistent with the assessment information on the client record.

Request changes to care approval decisions

All fields marked with an asterisk (*) are required.

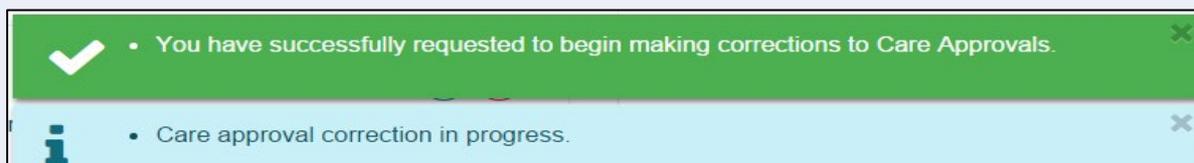
You are about to request changes to the care approval decisions for Gerry Gardener.

Please provide a comment for these changes? *

0 / 255

[OK, START CHANGES](#) [CANCEL](#)

- You will be redirected to the client's support plan and services page, where you will receive a confirmation message of your change request, and that the correction is in progress.



- While on the same screen, you will be able to make edits to, remove, and/or add care types, including:
 - [making changes to the commencement date of the delegate decision](#)
 - [requesting the removal and addition of different care classification within a care type within the same correction request.](#)

Making changes to the commencement date of the delegate decision

- Before making changes to the start date of the delegate decision, the declarations must be ticked and the Offline approval form must be attached.
- Go to Delegate Decisions and Comments and select the assessment listing, then select the **Edit** (pencil) button next to the Decision Date (Assessment) section.



Delegate decisions and comments

Assessment: Submitted on 11 August 2025

Decisions

Recommend that the client receive
Home support

Decision date (Assessment)
18 August 2025 10:11 AM (Australian Eastern Standard Time)

- A Pop-up screen prompting to **Edit delegation date** will appear. Enter all the required information and Select **SAVE TO PLAN**.

Edit delegation date

All fields marked with an asterisk (*) are required.
You are about to update the delegation date for Lyla SMITH.

Delegation date *

I have made a decision for this client utilising other means before today

SAVE TO PLAN CANCEL

- You will notice two banners (Green and Blue) confirming the action and status.

✓ You have successfully entered a correction for the delegation date.

i Care approval correction in progress.

- You can view the changes in the same screen where you get the above confirmation messages.

Recommend that the client receive
Assistive technology

Decision date (Assessment)
4 September 2025 12:00 AM (Australian Eastern Standard Time)

Decision date (Assessment)
5 August 2025 07:07 AM (Australian Eastern Standard Time)

ADD A CARE TYPE FOR DELEGATE DECISION

SUBMIT FOR AGED CARE ASSESSMENT PROGRAM (ACAP) DECISION RETURN TO CLIENT

✓ You have successfully entered a correction for the delegation date.

i Care approval correction in progress.



6. Select **SUBMIT FOR AGED CARE ASSESSMENT PROGRAM (ACAP) DECISION**.

Decision date (Assessment)
4 September 2025 12:00 AM (Australian Eastern Standard Time)

ADD A CARE TYPE FOR DELEGATE DECISION

SUBMIT FOR AGED CARE ASSESSMENT PROGRAM (ACAP) DECISION RETURN TO CLIENT

Requesting the removal and addition of different care classification within a care type within the same correction request

1. To request to remove a classification or service approval that you have entered incorrectly, select the remove (bin) button next to the decision.

Identified needs | Goals & recommendations | **Decisions** | Manage services & referrals | Associated People | Review

IAT Outcome and Classifications

Current assessment type: Comprehensive Assessment
IAT Outcome: SaH Classification 5

Delegate decisions and comments

Assessment: Submitted on 15 July 2025

Requested Changes
Requested date: 4 September 2025

Residential Respite Care  

Priority for this care type: High 

Approval starts: 23 July 2025

Declaration: Yes

Reason DEMMI not completed: fhgh

2. A pop-up will display. Confirm your request to remove the incorrect record by selecting **REMOVE RECOMMENDATION**.

Remove Residential Respite Care

Do you want to remove this recommendation?

REMOVE RECOMMENDATION CANCEL

3. A green banner will then display to confirm that the care approval has been successfully removed.



Requested Changes
Requested date: 4 September 2025

Residential Respite Care ✕
Residential Respite Care has been removed as part of this Care Approval Correction

✓ You have successfully removed a Care Approval.

i Care approval correction in progress.

Decision date (Assessment)

4. To then add the correct program or service approval as intended by the clinical assessor and the Clinical Assessment Delegate, select **ADD A CARE TYPE FOR DELEGATE DECISION**.

Residential Respite Care ✕
Residential Respite Care has been removed as part of this Care Approval Correction

Decision date (Assessment) ✎ ✕
4 September 2025 12:00 AM (Australian Eastern Standard Time)

ADD A CARE TYPE FOR DELEGATE DECISION

SUBMIT FOR AGED CARE ASSESSMENT PROGRAM (ACAP) DECISION

RETURN TO CLIENT

i Care approval correction in progress.

5. In the pop-up, add the care type, including the correct service level and priority for the Clinical Assessment Delegate decision. Once you have successfully completed the required fields (marked by an red asterisk *) select **SAVE TO PLAN**.

Add care type for delegate decision

All fields marked with an asterisk (*) are required.

Which care type applies? *

Select one

Select one

- No Change to Existing Care Approvals
- Residential Permanent
- Residential Respite Care
- Residential Respite High Care
- Residential Respite Low Care
- Transition Care

SAVE TO PLAN

CANCEL

- After successfully saving the changes to the approval, a blue banner will apply outlining that the care approval correction is in progress.

Delegate decisions and comments

Assessed on 20 May 2025

Requested Changes

Requested date: 26 May 2025

Current decisions

Decision date: 20 May 2025 12:00 AM (

No Change to Existing Care Approvals

Priority for this care type Low ?

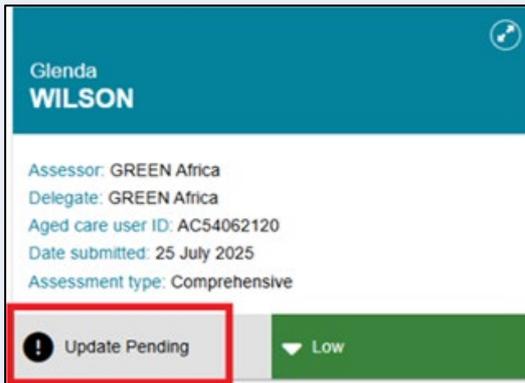
Approval starts 20 May 2025

 Care approval correction in progress.

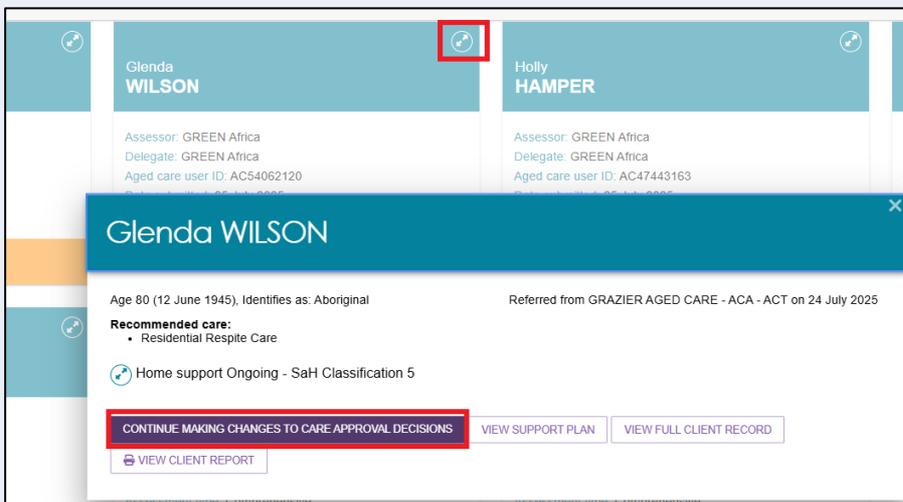
No Change to Existing Care Approvals



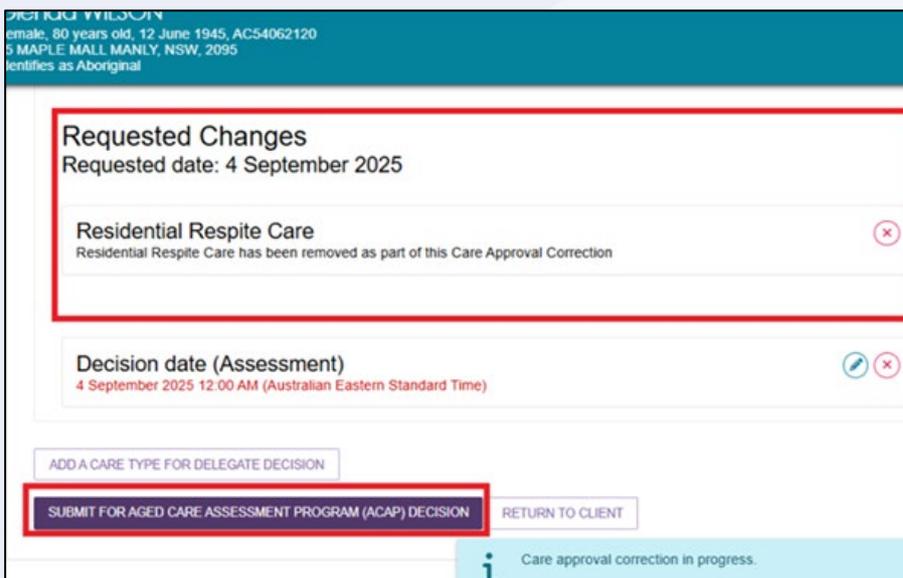
- If you had to exit the correction screen before submitting for decision, you can navigate back to the **DECISION HISTORY** tab under **Delegate Decisions** and select the client. The client will have an **UPDATE PENDING** status.



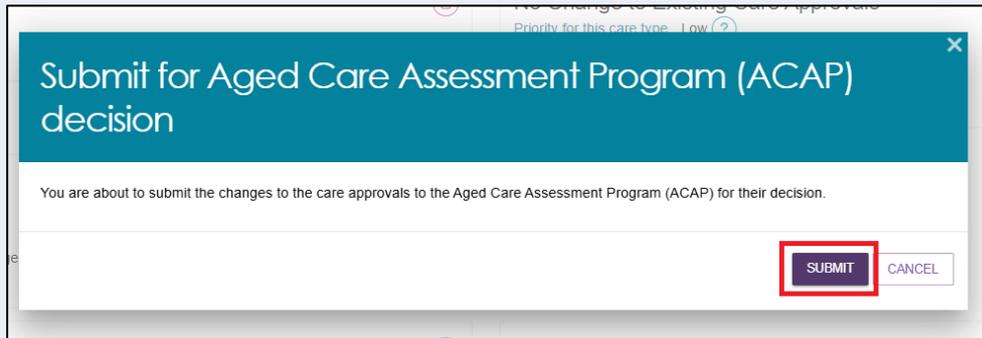
- Select **CONTINUE MAKING CHANGES TO CARE APPROVAL DECISIONS** button in the expanded client card on the Decision History page.



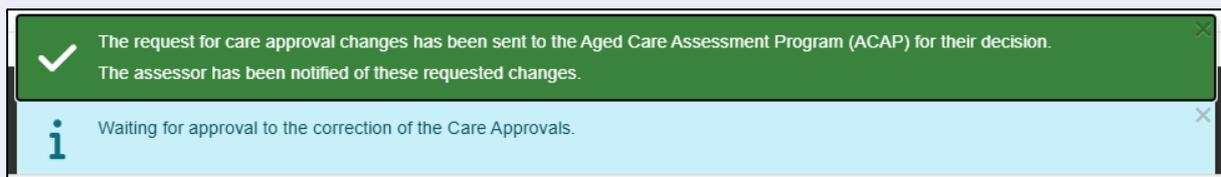
- You will be able to see the requested changes displayed. When you have made the required changes to the care approval decisions, select **SUBMIT FOR AGED CARE ASSESSMENT PROGRAM (ACAP) DECISION**.



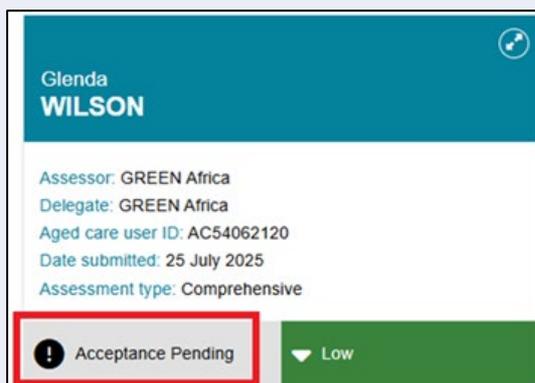
A pop-up message will display requesting confirmation to proceed. Select **SUBMIT**.



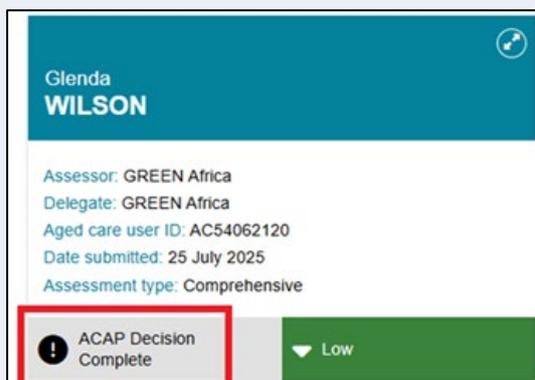
10. You will receive a confirmation message that the correction of the request will be received by the Department's Aged Care Assessment Program (ACAP) delegate.



11. The client will be displayed in the **Decision history** tab with a status of **ACCEPTANCE PENDING**.



12. Once the **AGED CARE ASSESSMENT PROGRAM (ACAP)** decision has been actioned and finalised by the delegate (in staff portal), the status will be updated accordingly.



13. There will also be a notification advising of the decision in your **Tasks and notifications** page. You will be able to filter by last name, first name and Aged Care User ID as well as use **Advanced Search** functionality to help you find notifications for certain clients. The notification itself will contain links back to the client record and the correction request. It will also allow you to remove the notification from the page.

Tasks and notifications

Tasks **Notifications** HCP Notifications Maximum wait times

Filter by

Last name _____ First name _____ Aged Care user ID _____

ADVANCED SEARCH CLEAR FILTERS

Date received is after 25 November 2024 and Outlet name is GRAZIER AGED CARE - ACA - ACT

FILTER CLEAR

Select all

Received	Category	Title/Description	Channel	Aged Care User ID	Client name
26 May 2025	Delegate Decision	Correction of Care Approval A request for correction to care approvals has been submitted. Details are as follows - Aged Care User Id: AC16332744 Correction Details: Remove Home Care Package Level 2Add Home Care Package Level 3 Activity Id: 2-160144606399 Go to: Decisions		AC16332744	YINDI Thomas

- Once the Clinical Assessment Delegate has made their decision on the correction, you will receive another notification advising that the correction has been completed.
- You will also be able to see the assessment status reflect this when it changes to **ACAP Decision Complete** in your **Decision history** tab. Additional information regarding the correction decision will be visible by selecting the expand arrow, including the date and details of the correction.

Last name	First name	Aged care user ID	Assessor full name	Delegate full name	Assessment status	Date submitted	Priority
Donnelly	Ian	AC62171095	HAMILTON Halle	HAMILTON Halle	ACAP Decision Complete	20/07/2017	Medium
Age 85 (1 July 1932)		Decision on changes to care approvals on 20 July 2017			Recommended care Residential Respite Low Care Residential Permanent Home Care Package Level 4		
Transmission status to DHS: ● FAILED							
VIEW SUPPORT PLAN		VIEW CLIENT RECORD		VIEW PDF OF CLIENT RECORD		REQUEST CHANGES TO CARE APPROVAL DECISIONS	
VIEW CORRECTIONS HISTORY							

- A record of the corrections history for the client can be viewed by selecting **VIEW CORRECTIONS HISTORY**.

View corrections history

Decision history for Ian Donnelly

Home Care Package Level 4 (Update Accepted) 20 July 2017

CLOSE

Requesting and Approving Care Extensions

Care extensions can be requested by clinical assessors or service providers as follows:

- For Residential Respite Care and Transition Care approvals, service providers can request care extensions on behalf of the client through the My Aged Care Services and Support Portal.
- For Residential Respite Care, clinical assessors can also generate a care extension for a person living in the community who requires additional respite through the assessor portal.

In cases where a client has a valid Residential Respite Care approval and requires additional Residential Respite days but is currently living at home and not currently receiving residential aged care services, a service provider will not be able to request an extension on behalf of the client. The Clinical Assessment Delegate will instead be able to initiate the care extension on behalf of the client.

If you are unable to complete a care extension request for a client via the assessor portal, you should call the Aged Care Service Provider and assessor Helpline on 1800 836 799.

To make a decision about care extensions, follow the steps below.

1. The extension request will appear in the **Decision pending** tab under **unassigned**. It will have a status of **Acceptance Pending**. Open the client's card in card or list view by selecting the Expand icon.

Home | Delegate decisions

Decision history

Decision pending | Decision history

Filter by

Sort Decisions Pending by: Assessment Status | In order of: In Order | GO

Current sort order is Assessment Status

Janees CITIZEN Assessor: FLOWER Emily Aged care user ID: AC60163045 Date submitted: 7 September 2022 Assessment type: Comprehensive Acceptance Pending Medium	Eddy EXTENSION Assessor: FLOWER Emily Delegate: FLOWER Emily Aged care user ID: AC39121652 Date submitted: 31 January 2022 Assessment type: Comprehensive Acceptance Pending Low
---	---

Assign the client to yourself if not already done, then the client will now appear under **My Decisions**. Select **START DECISION PROCESS**.

Eddy EXTENSION

Age 89 (15 February 1933)
Referred from Suncorp ACAT Outlet on 31 January 2022
Recommended care
• Residential Respite Care
Transmission status to DHS: Submitted

START DECISION PROCESS | VIEW SUPPORT PLAN | VIEW FULL CLIENT RECORD | VIEW CLIENT REPORT



- You will see the care extension request. Review the information and select **MAKE EXTENSION DECISION**.

The screenshot shows a web interface titled "Support plan and services". At the top right, there is a button labeled "PRINT COPY OF SUPPORT PLAN". Below the title, there are several tabs: "Identified needs", "Goals & recommendations", "Decisions" (which is active), "Manage services & referrals", "Associated People", and "Review".

The main content area is divided into two sections:

- Current care approvals:** A card for "Residential Respite Care" with the following details:
 - Priority for this care type: Low (?)
 - Approval starts: 31 January 2022
 - Reason for care: zddsad
 - Source system: Gateway
- Recommended care requiring delegate decision:** A card for "Care extension: Residential Respite Care" with the following details:
 - Service provider: ABC Health Care
 - Proposed extension start date: 23 June 2022
 - Proposed number of extension days: 21
 - Reason for extension: Carer stress

At the bottom of the second card, there is a button labeled "MAKE EXTENSION DECISION" which is highlighted with a red box. Below the card, a message states: "This extension request is awaiting delegate decision".

In the pop-up, select **Yes** or **No** with regards to granting the extension, and fill out the other fields.

The screenshot shows a pop-up window titled "Make a care extension decision" with a close button (X) in the top right corner. The window contains the following fields and options:

- A note: "All fields marked with an asterisk (*) are required."
- A question: "Do you want to grant the **21 day extension for Residential respite?**"
- Radio buttons for "Yes" (selected) and "No".
- A date field: "When does the extension start? *" with the value "20/07/2017" and a calendar icon.
- A text area: "Rationale *" with a note "Maximum 255 characters".
- At the bottom right, there are two buttons: "MAKE DECISION" and "CANCEL".

- A notification will be displayed, and the extension request will show with a status of **Granted** or **Not Granted**.



Support plan and services

Identified needs Goals & recommendations **Decisions** Manage services & referrals Associated People Review

Current care approvals

Residential Respite Care

Priority for this care type: Medium 
 Approval starts: 7 September 2022
 Source system: Gateway

Care extension: Residential Respite Care

Extension start date: 7 September 2022
 Extension stop date: 27 September 2022
 Number of extension days: 21
 Reason for extension: Severity of the care recipient's condition

 **Granted**

4. If the service provider requested the extension, they will receive a notification advising them of the decision in their **Tasks and Notifications** in the Services and Support Portal.

Type	Due Date	Received Date	Category	Title/Description	Activity Id	Portal
Notification	20/07/2017		Client Services	Care Extension Request A formal Delegate Decision has been made for a care extension request. Details are as follows - Aged Care User Id: AC91417612 Service : Residential Respite High Care Requested By : Requested by Outlet name : Decision : Update Accepted Delegate Name :	1-20851939775	Service Provider Portal

