



Australian Government

Department of Health, Disability and Ageing

24/7 Registered Nurse (RN) Requirement

Policy guidelines for the Multi-Purpose Service Program (MPSP)

March 2026: Version 1.1

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1. Introduction

In response to Recommendation 86 of the Royal Commission into Aged Care Quality and Safety, the Australian Government recognised adequate staffing levels are critical to the quality and safety of residential aged care. As a result, the Government introduced a 24/7 registered nurse (RN) requirement for mainstream residential aged care to strengthen access to clinical care and improve resident safety.

From 1 July 2023, approved providers of mainstream residential aged care were required to have at least one RN on site and on duty at each residential care home, at all times. This requirement ensured residents have timely access to clinical expertise and supported the delivery of safe and high-quality care.

Consistent with this reform, the 24/7 RN requirement was trialled in the Multi-Purpose Service Program (MPSP) from 1 July 2024. Initial arrangements applied to a limited number of multi-purpose services (MPS), followed by broader application across all MPS from 1 January 2025, to support implementation in regional and remote settings.

Trial arrangements were extended to 30 June 2026 to allow further monitoring and analysis and to support sector readiness. During this period, all MPS will submit 24/7 RN coverage information using reporting spreadsheets for the reporting months of September 2025, February 2026 and April 2026.

Trial arrangements will end on 30 June 2026. Formal implementation of the 24/7 RN requirement will be noted in legislation from 1 April 2026 and take effect from 1 July 2026. To support implementation, essential ICT enhancements are being delivered, including the introduction of online 24/7 RN reporting through the Government Provider Management System (GPMS). Reporting obligations in GPMS will start from 1 October 2026 (October reporting due in November 2026)

1.1 Purpose

This document provides guidance to MPSP providers on meeting the 24/7 RN requirement during the trial period ending on 30 June 2026.

It outlines provider obligations and reporting arrangements that apply during this period, ahead of formal implementation of the 24/7 RN requirement from 1 July 2026.

Note: Guidance on the 24/7 RN requirement is already in place for mainstream residential aged care. This guidance will be updated to incorporate the MPSP in advance of formal implementation starting on 1 July 2026.

1.2 Further information and support

Visit the [MPSP website](#) or email mpsreforms@health.gov.au.

1 What is the 24/7 RN requirement for MPSP providers?

2.1 What does on site mean for the MPSP?

MPS are registered as a single, formally combined residential care home for the purposes of the 24/7 RN requirement, regardless of the number of buildings or the physical location of those buildings within the service.

For the purposes of this requirement, “on site” means a RN must be physically present within the approved residential care home, rather than being assigned to, or restricted to, individual buildings or locations within the service.

2.2 What does on duty mean?

On duty means that an RN is available to provide care to residents and to provide clinical oversight of care delivered by other staff, as required:

- an RN is considered to be on duty when they are working on site and able to respond in person, or provide clinical oversight, to the care needs of residents at the residential care home as required
- an RN remains on duty during breaks taken as part of a continuous period of work, where those breaks are provided for under the RN’s employment conditions
- if an RN leaves the site during a break, they are not considered to be on site or on duty for the purposes of the 24/7 RN requirement
- an RN must be engaged by the provider with the primary purpose of providing care to residents and must not be undertaking duties unrelated to resident care (for example, being offline in a training only role)
- an RN may be employed to work across both aged care and health services delivered through the MPS. However, the RN’s employment arrangements must not restrict their ability to provide care or clinical oversight for aged care service delivery when required.

2 Exemptions from the 24/7 RN requirement

Work undertaken through the 24/7 trials has identified only a small number of MPSP providers may be unable to meet the 24/7 RN requirement. In these limited circumstances, and where eligibility criteria is met, exemption arrangements that apply to mainstream residential aged care may be used.

From 1 April 2026, MPS may apply for an exemption from the 24/7 RN requirement under subsection 175(1) of the *Aged Care Act 2024*. Approved exemptions will take effect from 1 July 2026, in readiness for the formal implementation of the requirement.

Note:

- Current mainstream 24/7 RN requirement exemptions are outlined on the Department of Health, Disability and Ageing's [website](#).
- Residential care homes with 30 or fewer operational places in [Modified Monash Model \(MMM\)](#) 5-7 locations may be eligible for an exemption from the 24/7 RN requirement.
- To be granted an exemption, the MPSP provider must demonstrate it has taken reasonable steps to ensure that the clinical care needs of the aged care residents will be met during the exemption period.
- Exemptions may be granted for up to 12 months at a time.
- MPS with an exemption are still required to submit a report.
- MPSP providers can use the [application form](#) available on the department's website to apply for an exemption.
- A list of [registered providers with an exemption from the 24/7 RN requirement](#) is available on the department's website.

3 24/7 RN requirement reporting for the MPSP

Providers will report monthly through the Government Provider Management System (GPMS).

MPS will need to continue to report the following:

- whether or not an RN was on site and on duty at all times
- every period of 30 minutes or more (e.g., 45 minutes, 2 hours) on a day that there was not at least one RN on site and on duty at MPS and the reason for this for each such period
- alternative arrangements that were made to ensure the clinical care needs of residents at the MPS was met while an RN was not on site and on duty (or that alternative arrangements were not made) for each such period.

4 Regulation of the 24/7 RN requirement

Compliance and regulatory activities will start from 1 July 2026, following the formal implementation of the 24/7 RN requirement for the MPSP.

Note:

- From 1 July 2026, the regulator will adopt a consistent approach to regulating the 24/7 RN requirement for MPSP providers, aligned with the approach currently applied to mainstream residential aged care.
- The Aged Care Quality and Safety Commission (the ACQSC) has published [Regulatory Bulletin 2023-19](#), which explains how they regulate the 24/7 RN requirement.
- The Bulletin notes that the ACQSC is unlikely to take escalated compliance action where a provider is making genuine and ongoing efforts to meet the 24/7 RN requirement, is delivering safe and quality care to consumers, and where there are no other concerns regarding the provider's compliance or performance.

Appendix A: Policy Statements - 24/7 RN requirement scenarios (on site and on duty)

Policy statement: definition of multi-purpose services (MPS)

For the purposes of the *Aged Care Act 2024*, multi-purpose services (MPS) are recognised as a single approved residential care home, regardless of the number of buildings that make up the service or the physical location of those buildings.

Accordingly, the 24/7 RN requirement applies at the level of the approved residential care home, rather than to individual buildings or locations within the service.

Example 1:

Happy Haven MPS operates across 2 buildings:

- the main building provides acute health services and has an RN on site and on duty 24 hours a day, 7 days a week
- the second building provides residential aged care and has part time RN coverage.

As the 24/7 RN requirement applies to the approved residential care home as a whole, Happy Haven MPS, as a single approved residential care home, meets the 24/7 RN requirement, despite only one of its buildings having a continuous RN presence.

Policy statement: 24/7 RN coverage in multi-purpose services (MPS)

RNs employed to work across both residential aged care and health services within a multi-purpose service (MPS) may be considered “on site and on duty” for the purposes of meeting the 24/7 RN requirement, provided the following criteria is met:

- the RN is physically present on site for the duration of their rostered shift
- the RN is employed to work flexibly across both aged care and health service components of the MPS
- the RN is available at all times during their shift to provide care to aged care residents and to provide clinical oversight of care delivered by other staff, regardless of the proportion of time spent on aged care specific or health service specific activities.

Example 2

Amanda is an RN employed to support MPS. She spends about 40 per cent of her shift supporting residential aged care services, and 60 per cent supporting health service activities. Throughout her rostered shift, Amanda remains on site and available to respond to the care needs of aged care residents and to provide clinical oversight when required.

In these circumstances, Amanda is considered to be on site and on duty for the purposes of meeting the 24/7 RN requirement.

Policy statement: Temporary gaps in RN coverage

Where a RN is rostered to be on site but is temporarily unavailable due to unforeseen circumstances (for example, transport delays, illness or emergencies), and no other RN is present on site to provide care to aged care recipients during that period, the provider must:

- record the duration of the gap in RN coverage in the 24/7 RN report submitted to the Department of Health, Disability and Ageing and
- accurately document the absence, including the start and end time of the gap in RN coverage and any alternative arrangements put in place, where applicable.

Example 3

Jo, an RN, is rostered to on MPS. On her way to work, Jo experiences a vehicle breakdown and is delayed by 45 minutes, during which time no other RN is available on site.

In these circumstances, the provider must record the 45 minute gap in RN coverage in the relevant monthly 24/7 RN report.

Policy statement: Approved off-site RN absences and reporting requirements

Where an RN is rostered to be on site but takes an approved off-site absence (for example, to attend a personal matter), and no other RN is present on site during that period, the provider must:

- record the duration of the absence in the monthly 24/7 RN report submitted to the Department of Health, Disability and Ageing
- ensure the absence is accurately documented, including the start and end time of the gap in RN coverage and any alternative arrangements put in place, where applicable.

Example 4

Simone is the RN rostered for the morning shift and has approval to attend her child's school assembly for 1 hour, during which time she is off site and no other RN is present.

In these circumstances, the provider must record the 1 hour gap in RN coverage in the relevant monthly 24/7 RN report.

Policy Statement: RN training absences and 24/7 RN reporting requirements

Where an RN is rostered to be on site but is engaged in training or study activities (for example, online workshops or study modules) that prevents them from providing care to aged care residents or from providing clinical oversight, and no other RN is present on site during that period, the provider must:

- record the duration of the gap in RN coverage in the monthly 24/7 RN report submitted to the Department of Health, Disability and Ageing
- accurately document the absence, including the start and end time of the gap in RN coverage and any alternative arrangements put in place, where applicable.

Example 5

Michael is a RN rostered on site who is completing an online training workshop as part of his study requirements. During this time, Michael is unable to provide care to aged care residents or clinical oversight, and no other RN is present on site.

In these circumstances, the provider must record the training related gap in RN coverage in the relevant monthly 24/7 RN report.

Policy Statement: RN coverage and EN limitations under the 24/7 RN Requirement

Where an RN is rostered to be on site but is unable to attend their shift, and an enrolled nurse (EN) covers the shift in their place, including an EN who is nearing completion of RN training, the provider must:

- record the absence of a RN in the monthly 24/7 RN report submitted to the Department of Health, Disability and Ageing
- accurately document the absence, including the start and end time of the gap in RN coverage and any alternative arrangements put in place, where applicable.

An enrolled nurse does not meet the criteria for 24/7 RN coverage, as ENs are not authorised to perform duties that are restricted to RNs.

Example 6

A RN is unavailable to attend a rostered shift, and Gloria, an enrolled nurse who is close to completing her RN training, covers the shift.

In these circumstances, the provider must record the RN's absence in the monthly 24/7 RN report. The presence of an enrolled nurse, regardless of proximity to RN qualification, does not satisfy the 24/7 RN requirement.