



Australian Government

Department of Health, Disability and Ageing

# People who are financially or socially disadvantaged

## Specialisation Verification Application Form

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# People who are financially or socially disadvantaged

## How to apply

To complete this application:

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

## Purpose of the Form

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

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

# Evidence Requirement

## General

- Each application requires evidence for each applicable criterion
- Evidence must relate to the individual outlet referenced in the application
- Evidence may be used for multiple criteria.

## Uploading Attachments as Evidence

- Attachment names should reference the relevant criteria they apply to
- Attachment names are limited to 150 characters
- Example: People who are financially or socially disadvantaged, Criterion F2.1
- Attachments must be provided in PDF format
- Each attachment must not exceed 10MB in size.

## Guidance on Evidence Descriptions

Certain evidence may require supporting description if the relation to the criterion is not immediately clear (e.g. images, video). Any evidence may be supported by a description if necessary.

In describing evidence, include:

- what the evidence represents, and
- how it relates to the selected criterion.

Some criteria require evidence specific to the outlet, while others require provider-level evidence. When uploading evidence, please include a brief description explaining how it applies either to the outlet or to the provider.

## Identification details

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

Outlet ID	<input type="text"/>
	<small>Found on your Service and Support Portal</small>
Outlet name	<input type="text"/>
Organisation ID	<input type="text"/>
	<small>Found on your Service and Support Portal – this is not your NAPS ID</small>
Organisation name	<input type="text"/>

*Contact details provided in this application will be used by the department for all future communications related to this application.*

*Please ensure details are accurate and keep them up to date by notifying us of any changes via email to [MACspecialisation@health.gov.au](mailto:MACspecialisation@health.gov.au).*

Primary point of contact	<input type="text"/>
Phone number	<input type="text"/>
Email address	<input type="text"/>
Secondary point of contact	<input type="text"/>
Phone number	<input type="text"/>
Email address	<input type="text"/>

## Criteria selection and completion checklist

You must meet all **3 of the Tier 2** criteria listed below, or meet **2 of the Tier 2** criteria if your outlet does not provide residential aged care services.

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

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

**Tier 2** *(you must meet all 3 criteria, or 2 if your outlet does not provide residential aged care services)*

### **Criterion F2.1**

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

### **Criterion F2.2**

*Policies and procedures are in place to support and promote the delivery of specialised aged care to financially or socially disadvantaged aged care recipients.*

### **Criterion F2.3**

*The outlet offers services which are specifically targeted towards financially or socially disadvantaged people.*

*Disclaimer and Privacy Completed (p10)*

*Signature Given (p10)*

## Criteria evidence

**Tier 2** *(you must meet all 3 criteria, or 2 if your outlet does not provide residential aged care services)*

### **Criterion F2.1**

*The outlet supports residents to access the same activities as those residents who are able to pay.*

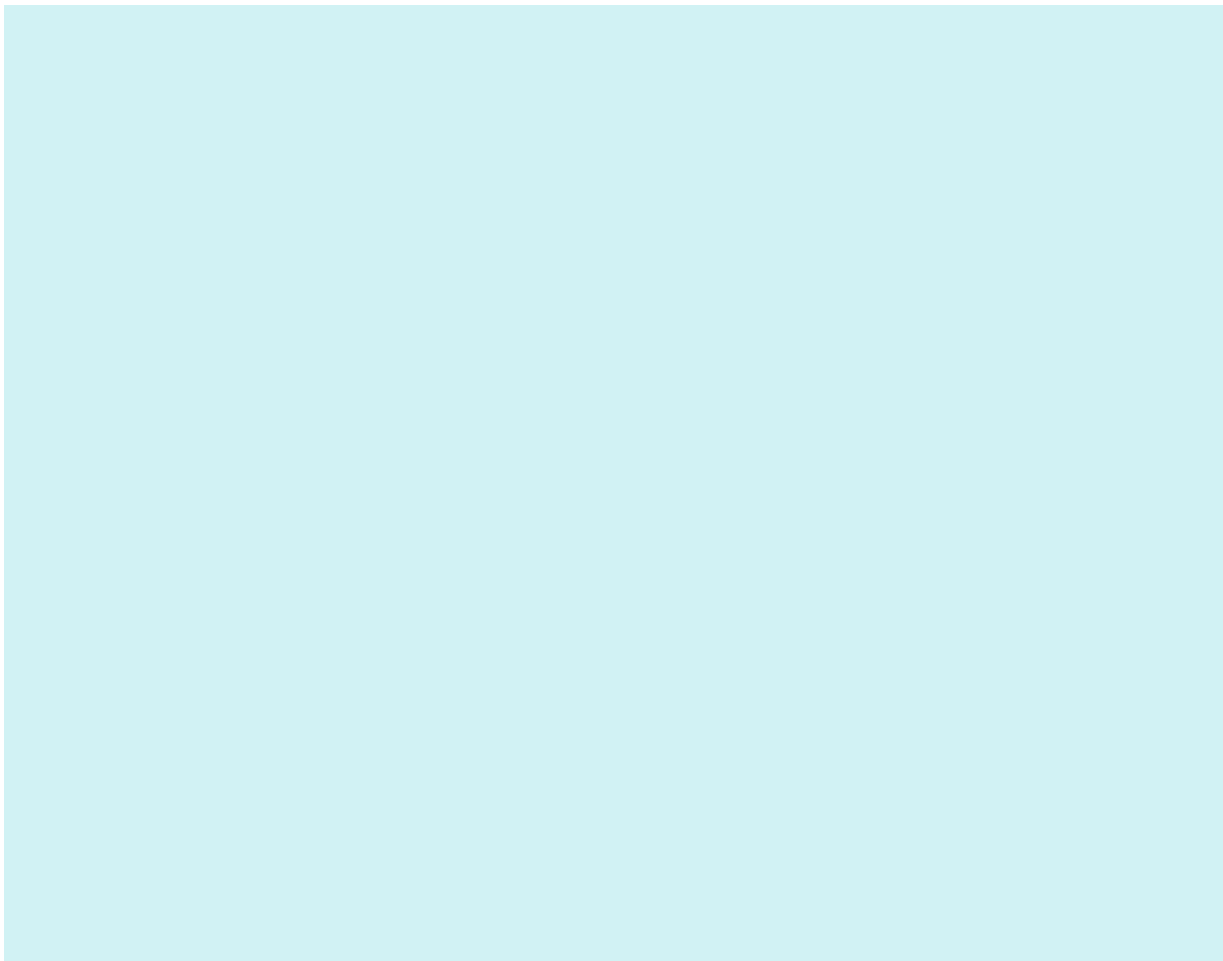
*\*Applies to residential aged care only.*

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

- waivers
- subsidies
- inclusive planning strategies.

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

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



**Criterion F2.2**

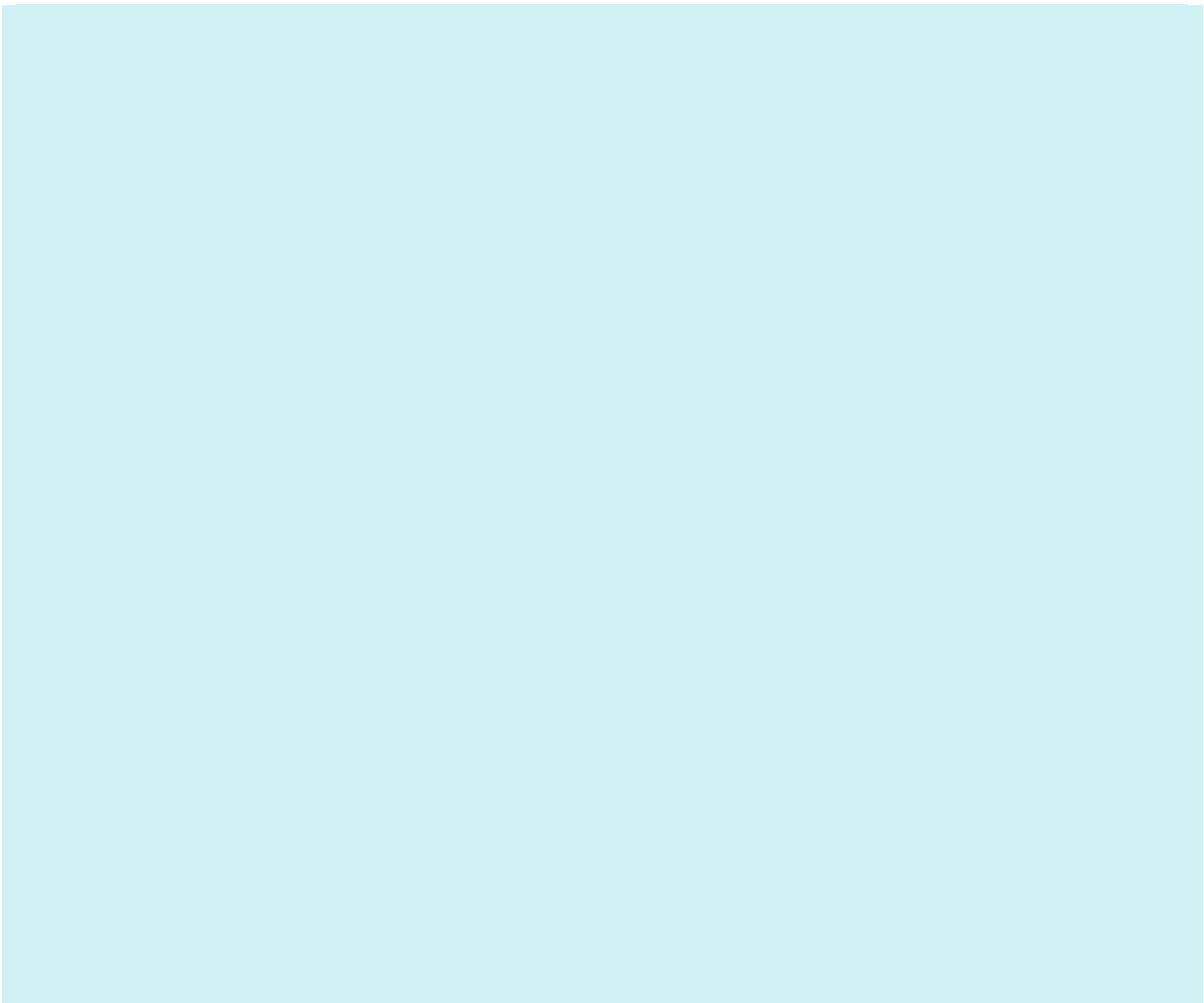
*Policies and procedures are in place to support and promote the delivery of specialised aged care to financially or socially disadvantaged care recipients.*

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

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

If the evidence does not clearly demonstrate how the policy or procedure relates to the specialised care you provide at the outlet, include a short explanation describing how it helps you meet the needs of financially or socially disadvantaged people.

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



### Criterion F2.3

*The outlet offers services which are specifically targeted towards financially or socially disadvantaged people.*

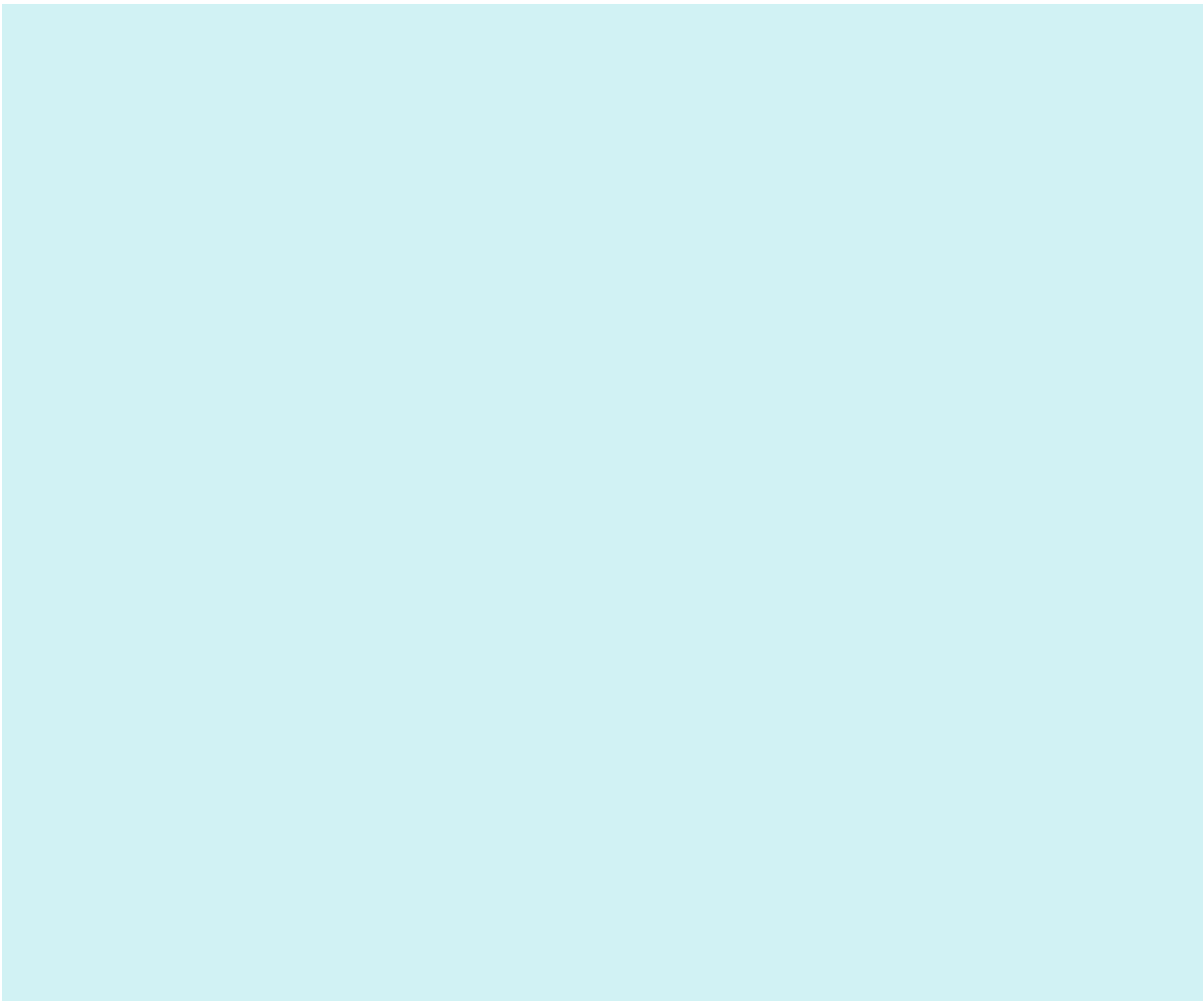
Describe the services offered which are specifically targeted towards financially or socially disadvantaged people by the outlet. Examples of this may include:

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

Provide the following:

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

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



## Disclaimer and privacy

### Privacy Obligation and Consent for Collection of Information

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

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

You can get more information about the way in which the department will manage your personal information, including our privacy policy found in the [Specialisation Verification Framework](#).

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

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

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

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

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

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

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

**Signature** - *The Department accepts digital signatures*

**Full Name**

**Date**

## Submission

### Instructions on how to submit this form via email

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

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

## Need help?

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

Email: [MACspecialisation@health.gov.au](mailto:MACspecialisation@health.gov.au)