



Australian Government

Department of Health, Disability and Ageing



Webinar series: Home matters – Rethinking aged care design Questions & Answers

Webinar 8: Transforming aged care homes

11 June 2026

Thank you to everyone who attended and submitted their questions. This document provides answers to questions that were not addressed by the panel during the live session. If you have any further questions please contact: design.dementiasupport@health.gov.au

Design

Where should we start if our building needs a lot of improvements? How can older buildings be improved without major redevelopment?

Aged care homes vary in age and design and many existing buildings can be improved to better support the needs and expectations of older people. The [National Aged Care Design Principles and Guidelines](#) encourage practical changes to existing homes, as well as more substantial design strategies better suited to new builds. Even small, low-cost improvements can make a meaningful difference.

Principle 1 – Enable the Person is among the easiest to apply retrospectively. Many actions are low-cost and non-structural, such as decluttering programs, upgrading furniture, or incorporating improvements into routine maintenance, like renewing flooring. For example, minimising visual clutter, particularly excessive signage, can help reduce physical or cognitive stress. Guideline 1.1 encourages decluttering resident areas to create calmer, more supportive environments.

The department encourages providers to use the Principles and Guidelines to identify practical, achievable ways to improve existing environments over time. The [third webinar](#) in this series explores Principle 1 in more detail.

The Care Home Assessment Tool (CHAT) can also help providers to assess existing environments against the Principles and Guidelines. It guides users through each principle and generates a report to support improvement planning across part or all of a site. To access the CHAT and more information and resources, visit Dementia Training Australia's [Environments Hub](#).

What are some common mistakes when trying to change both environment and the care model?

The [National Aged Care Design Principles and Guidelines](#) support providers to shift towards small household models in a practical and flexible way. These models work best when supported by an aligned model of care including governance, operations, staff training, daily activities and cultural needs. Even small changes to the built environment, combined with a well-defined and implemented model of care, can make a meaningful difference.

Changing both the physical environment of an aged care home and its model of care can be difficult. Some common mistakes may include:

- A lack of co-design with staff, residents and families
 - Co-designing solutions with older people, their families and staff helps ensure homes reflect people's needs, interests or cultural traditions.
 - Involving residents, families and staff in the design process helps build a shared vision and ensures design solutions are suitably adapted for local contexts.
- Minimal staff training and support
 - Adequate training and support from managers helps staff understand the benefits of change. It also helps ensure staff feel valued, supported and empowered to implement changes and address any safety concerns.

- A poorly defined model of care
 - Environmental improvements are most effective when supported by clear operational practices. For example, if daily access to the outdoors is not encouraged by managers due to safety concerns, staff will be less likely to support residents to spend time outside.
 - An aligned model of care that is clearly articulated to staff and supported by management, is essential for effective change.

Potentially off topic, however with a push to 'open outdoor areas' to residents living with dementia, would a fenced garden area with non-restrictive access from inside the building still constitute an environmental restraint? Noting that residents have free and easy access to a garden area, but like our own gardens at home, are fenced off from our neighbours?

There are different types of restrictive practices, including environmental restraints. Providers of funded residential aged care homes have specific requirements they must comply with when using a restrictive practice.

A restrictive practice is a practice or intervention that has the primary effect of influencing the older person's behaviour. A practice or intervention in one case may not be a restrictive practice in another case. The Aged Care Quality and Safety Commission (the Commission) has a dedicated Behaviour Support and Restrictive Practices Unit to support providers in managing their responsibilities and obligations relating to restrictive practices.

For further information, we recommend you contact the Commission via email at: info@agedcarequality.gov.au or phone: 1800 951 822 (free between 9am–5pm Monday to Friday).

Staffing and training

How does a small household model change day-to-day routines for staff? And how can we support our staff through that?

The *Aged Care Act 2024* and the new rights-based aged care legislative framework place older people and their needs at the centre of the aged care system. Under the strengthened [Aged Care Quality Standards](#), providers are expected to deliver person-centred care ([Outcome 1.1](#)). Shifting to a small household approach often involves a move away from schedule-driven, task-based routines towards more flexible, person-centred ways of working.

Daily routines centre around the needs and preferences of individual residents in the household, with staff supporting them to wake, eat, and take part in activities when and how they choose. Staff and residents may also participate in everyday domestic activities together, such as folding laundry, preparing meals and setting the table. Smaller, home-like spaces support quieter, familiar, domestic routines rather than large-scale programmed activities.

Clearly articulating the model of care, and supporting staff to implement it, is critical to success. This includes building staff knowledge and confidence in delivering person-centred approaches such as working flexibly, supporting autonomy, and understanding and responding to the individual needs of older people, including those living with dementia.

A range of [education and training](#) resources are available on the department's website to support the delivery of person-centred care, including new *Aged Care Act 2024* eLearning modules and information about dementia care training. The Aged Care Quality and Safety Commission also provides education and training for aged care [providers](#) and [workers](#), including online learning, live workshops, and a resource library.

What training makes the biggest difference in helping staff use spaces differently?

The Principles and Guidelines highlight that staff training, ongoing support from managers and a clearly defined model of care are all essential to help staff feel confident using spaces differently. The training that makes the biggest difference is practical and connected to the real day-to-day care environment. It helps staff understand how the design of a space supports the way care is delivered, and how changes to the physical environment can improve residents' wellbeing, independence and daily quality of life.

Training is most effective when it supports behaviour change over time, rather than being delivered as a one-off session. Staff need opportunities to practise new ways of working, build confidence, and work through practical concerns, particularly around safety. Involving staff in co-design, implementation and continuous improvement also helps build shared ownership of the change.

Several organisations offer training, education and consultancy services to help aged care providers and design professionals design environments aligned with the [National Aged Care Design Principles and Guidelines](#). These include [HammondInnovations](#), [Dementia Training Australia](#), and [Dementia Australia](#).

Funding

Available funding for Providers and impact on grants/awards, timing and stages of the awards

There are a range of funding arrangements in place to help providers improve their aged care homes. The [Aged Care Capital Assistance Program \(ACCAP\)](#) provides grants to build, extend or upgrade aged care homes or to build staff accommodation where older Australians have limited access. Eligible activities are determined on a round-by-round basis and clarified through grant opportunity guidelines. [GrantConnect](#) is the Australian Government's centralised publication of forecast and current grant opportunities. To register visit www.grants.gov.au.

The Australian Government has also announced its initial response to the independent [Residential Aged Care Accommodation Pricing Review](#). This includes new capital subsidies from 2027 for supported residents in newly constructed or significantly expanded homes (not already receiving ACCAP funding). It also includes changes to the Accommodation Supplement to increase payment rates and introduce new tiers. The government will also consult with the sector on other capital assistance options recommended by the review, including an interest-free or low-interest loans scheme, increased accommodation pricing flexibility for higher means residents and an expanded ACCAP.