



Australian Government

Department of Health, Disability and Ageing

Aged Care Act 2024 Wait Times Report: **Residential care and Support at Home**

Second report

Quarter 4: 1 April 2026 to 30 June 2026

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1. Introduction

This is the second report compiled by the System Governor to meet the reporting requirement under section 342A of the *Aged Care Act 2024* (the Act), which mandates quarterly reporting on waiting periods for certain funded aged care services. The report presents information on the time it typically takes for older people to commence non-specialist, Commonwealth-funded aged care services after applying through My Aged Care. The report supports transparency and system monitoring in accordance with the Act (see Section 3). For the purposes of this report, non-specialist aged care services include:

- **Support at Home services** delivered on an ongoing basis
- **Short-term pathways** delivered under the Support at Home program, including:
 - the Assistive Technology and Home Modifications Scheme
 - the End-of-Life Pathway
 - the Restorative Care Pathway
- **Residential aged care services** delivered on either an ongoing or short-term basis.

This measure reflects elapsed time across the entire aged care access pathway (from initial application through to service commencement) and includes periods that do not constitute system-managed waiting time.

This elapsed time measure is not directly comparable to other published waiting time or entry period measures (for example, those reported in the *Report on Government Services*), as it incorporates different service types and uses a different starting point in the pathway. This measure is also not compatible with Support at Home wait time reporting on My Aged Care, as instead the metric on [My Aged Care](#) covers assessment approval to funding allocation. Consequently, differences observed in this report should not be interpreted as equivalent to published Support at Home waiting times.

The distribution of elapsed times is highly skewed, meaning median values better represent typical experience than averages. Further context on the aged care access pathway and factors influencing timing is provided in **Section 5** and **Appendix B**.

The report focuses on people who commenced aged care services between 1 April 2026 and 30 June 2026 (Quarter 4 2025-26). It presents the elapsed time for this cohort from applying through *My Aged Care* to assessment, allocation of funded services, and commencement of care. By examining the experience of this cohort, the report compares and contrasts by service type, state and territory, and local region.

This report is not directly comparable with the inaugural report. Following a departmental review, it was determined that elapsed times associated with reassessment and Support Plan Review pathways fell outside the intended scope of the legislation impacting every table in the previous report. The Department has also addressed the data quality limitations identified in the *Disclaimer* of the inaugural report, including updates to commencement data to capture start notifications submitted after the extraction date (15 April 2026). To support comparability and transparency, **Appendix C** provides revised results for the period from 1 November 2025 to 31 March 2026 using the methodology adopted for this report.

As the analysis is based on retrospective data, the findings may not reflect current system pressures or wait times experienced by people entering aged care services at the time of publication.

The future statutory review of the operation of the Act will consider the future expansion of reporting on the duration of waiting periods for funded aged care services to cover specialist programs such as Multi-Purpose Services, Transition Care, and the Commonwealth Home Support Program.

2. Executive summary

- This report fulfils the quarterly reporting requirements set out in section 342A of the Aged Care Act 2024 for waiting periods for residential care and Support at Home.
- This report presents median and average measurements of the time elapsed between application through My Aged Care to commencement of aged care services for the 1 April 2026 – 30 June 2026 (Quarter 4 of 2025-26) reporting period.
- The national median elapsed time from application to service commencement was **255 days**.
- Western Australia recorded the shortest median time at **229 days**, while Queensland had the longest at **266 days**.
- The End-of-Life Pathway had the shortest median time by service type (14 days), whereas Support at Home (ongoing) had the longest (297 days).

3. Reporting Requirements

Provision	Legislative requirement	Report section		Commentary
s342A(2)(a)	The number of applications for funded aged care services made under subsection 56(1) for which a decision under subsection 57(1) has not been made, including applications made during that quarter and previous quarters	6.	Applications awaiting a decision	Reports count of applications awaiting an eligibility (triage) decision in Quarter 4 2025–26.
s342A(2)(b)	The average number of days between the date of an application for funded aged care services being made under subsection 56(1) and the commencement of the provision of non-specialist funded aged care services, where those services commenced in the quarter	7.1	Average and median waiting period (342A(2)(b) and (c))	Reports on the average number of days for non-specialist care.
s342A(2)(c)	The median number of days between the date of an application for funded aged care services being made under subsection 56(1) and the commencement of the provision of non-specialist funded aged care services, where those services commenced in the quarter	7.1	Average and median waiting period (342A(2)(b) and (c))	Reports on the median number of days for non-specialist care.
s342A(2)(d)	An assessment of the differences in the time taken between application and the commencement of services as a result of whether the non-specialist funded aged care service was delivered in an approved residential care home or a home or community setting	8.	Assessment of differences by service setting	Reports on median and average days/months by service type and provides commentary to meet the requirement for the assessment of differences.
s342A(2)(e)	An assessment of the differences in the time taken between application and the commencement of services as a result of the State or Territory in which the non-specialist funded aged care service was delivered	9.	Assessment of differences by State or Territory	Reports on median and average days/months by jurisdiction and provides commentary to meet the requirement for the assessment of differences.

Provision	Legislative requirement	Report section	Commentary
s342A(2)(f)	An assessment of the differences in the time taken between application and the commencement of services as a result of the local region in which the non-specialist funded aged care service was delivered	10. Assessment of differences by local region	Reports on median and average days/months by Aged Care Planning Region, as per the Aged Care Rules 2025, and provides commentary to meet the requirement for the assessment of differences.
342A(2A)	A report may include corrections or updates to information included in a previous report.	Disclaimer and Introduction Appendix C	A methodological change has been made in the second report to exclude reassessment and Support Plan Review data to better ensure compliance with the requirements under the meaning of subsection 56(1). This methodology has also been run on commencement data from the preceding reporting period. In addition, the re-extraction of the data for the period 1 November 2025 to 31 March 2026 on 20 July 2026 resulted in the inclusion of more service commencement records for analysis. As a result, revised statistics for the preceding reporting period covering all sections and tables of the report is at Appendix C.

4. Methodology

Reporting period

This report covers people who commenced **residential aged care** or **Support at Home** services between **1 April 2026 and 30 June 2026**.

Scope

The report presents retrospective elapsed-time data for Commonwealth-funded aged care services for people commencing care between 1 April 2026 and 30 June 2026, covering the following care types:

- Support at Home (ongoing)
- Assistive Technology
- Home Modifications
- End-of-Life Pathway
- Restorative Care Pathway
- Residential Care (ongoing) and
- Residential (short-term).

Wait time measure

Wait time is calculated as the number of days between:

- the application start date, and
- the service commencement date based on the start notification submitted to Services Australia by the provider.
- Wait time in this report is expressed as the elapsed number of days between:
 - the application start date, and
 - the service commencement date recorded by the provider.
- This elapsed time includes a range of events across the aged care access pathway, not all of which represent time spent waiting for services to be delivered. For this reason, the report deliberately uses the term 'elapsed time' rather than 'waiting time'.
- Further information on factors influencing timing across the pathway is provided in **Appendix B**.

Key dates

- **Application start date:**
 - For new applicants, the date the person applied through *My Aged Care*.
- **Service commencement date:**
 - The service entry date recorded by the provider in the Services Australia payment system.

Counting rules

- The report counts first applications made under subsection 56(1) through My Aged Care for residential aged care or Support at Home services.
- Each service type commenced by a person in the reporting period is counted as a separate entry.
- If a person commenced the same service type more than once in the reporting period, only one entry per person, per service type, per reporting period is included.

- Reassessments and Support Plan Reviews are excluded, as they are not counted as first applications for the purposes of section 342A reporting.

Outlier exclusions

People who opted out of receiving services under either the Home Care Packages Program or Support at Home at any point in their care journey are excluded from the calculations. These exclusions prevent the inclusion of outliers which would affect the average given a portion of this cohort hold historic assessment referrals, with some pre-dating the introduction of the Home Care Packages Program in 2013.

In addition, transitioned Home Care Package and Short-Term Restorative Care clients who were subsequently approved for Assistive Technology–Home Modifications funding, either through the data collection process or a Support Plan Review, were excluded. These clients already held an approved place, and the system should have recorded no break in care. They were also able to draw on Commonwealth unspent funds, meaning any subsequent approvals reflected an increase in funding only. Including these records would have skewed the AT-HM median and average to zero days.

Summary statistics

The report presents both:

- average (mean) wait times, and
- median wait times.

Median and average values are suppressed where fewer than 10 relevant commencements are included in a group. This is illustrated by dash (-) in affected tables.

Location data

Location is based on the address of the person receiving care at the time of service commencement. This may be a private residential address or the location of a residential aged care home.

Interpretation

While referred to as a wait time report, the measures reflect elapsed time between stages of the aged care pathway, including application, allocation, and commencement of care. Time from application to allocation is generally managed by the department. Time from allocation to service commencement may be influenced by individual choice, provider availability, and system-level factors.

Disclaimer

All data is sourced from departmental systems and reflects information available at the time of extraction:

- Support at Home service group commencement data was extracted on 20 July 2026
- Residential care service group commencement data was extracted on 20 July 2026

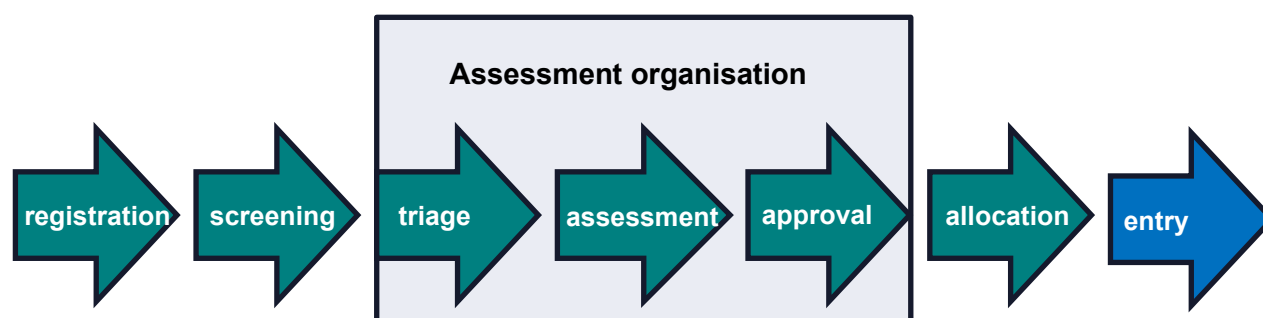
The measures presented in this report are not directly comparable with wait time or entry-period measures published elsewhere, including performance reporting in the Report on Government Services.

Some data may be incomplete or subject to later updates due to provider reporting schedules and administrative processes. Revised data may be published as an appendix to future reports.

Furthermore, not all start notifications may have been received by the Services Australia payment system at the time of reporting. As a result, some commencements have not been captured in this report due to the strict statutory timeframes that apply. Providers have up to 28 days to lodge a start notification for residential care and Support at Home.

For people who commenced services between 1 April 2026 and 30 June 2026, application, assessment or allocation dates may have occurred at any time prior to service commencement, including several years earlier. This contributes to longer elapsed time measures at the national level and reinforces the importance of interpreting results in the context of the full aged care access pathway.

5. The aged care access pathway



The process for starting aged care services for new participants

Stage	Description
Registration	An older person's details (like name and date of birth) are entered into the My Aged Care System to start the process.
Screening	After an older person has registered with My Aged Care, a screening process takes place. The older person answers a short questionnaire either: • online • via phone with the My Aged Care contact centre • through a GP, or • at a Services Australia service centre. Based on the responses, they are then referred to an assessment organisation for triage.
Triage	A Triage Delegate at an assessment organisation undertakes a phone call with an older person using the triage component of the Integrated Assessment Tool to confirm: • eligibility for an assessment • assessment type (home support or comprehensive) • assessment priority • whether urgent services/linking supports are required.
Assessment	A trained aged care needs assessor (clinical or non-clinical) meets with the older person and uses the Integrated Assessment Tool to understand their care needs and make recommendations. An assessment can either be a Home Support Assessment (entry-level services) or Comprehensive Assessment (Support at Home and residential care services), depending on the older person's needs. Aboriginal and Torres Strait Islander people have tailored options.
Approval	The assessor's recommendations are reviewed and approved by an assessment delegate. This step confirms what services the person is eligible for. The assessment delegate helps ensure the services the assessor has recommended meets the individual's needs, are evidence based, align with the

	goals and concerns identified during the assessment, are legally sound and meet all the eligibility criteria under the Act.
Method for allocation	If applicable, based on the person's needs and urgency, they are placed in a priority category. This affects how quickly they receive funding or a care place. For example; individuals are assigned to one of four priority categories if approved for Support at Home care services, based on a needs assessment: Urgent, High, Medium or Standard. This prioritisation determines how quickly funding is released.
Allocation	The person receives a formal letter called the 'Notice of Decision' confirming their care type and funding. They then choose a registered provider to deliver the services.
Service commencement	The provider begins delivering care. The start date is recorded in the system via a start notification and triggers payments to the provider. A provider has 28 days to lodge a start notification.
Support Plan Review	If the person awaiting or receiving care believes their aged care needs have changed since their assessment, they can apply for a 'Support Plan Review'. An assessor will speak with the person about their care needs and determine whether they can make changes to the person's existing Support Plan or refer them for a full reassessment (this will typically occur where there has been a significant change in their care needs).

6. Applications awaiting a decision

6.1 Number of undecided applications (342A(2)(a))

This section shows the number of applications made during the reporting period for which no decision has been made. For the purposes of section 342A(2)(a), applications awaiting a triage decision represent applications for which a decision under subsection 57(1) has not yet been made.

Table 1 below presents the number of applications that were still awaiting a triage decision at the end of the quarter. This count includes only first applications received through My Aged Care and excludes reassessments. Not all applications will lead to an approval for Support at Home or residential care.

Table 1: Triage count at end of the reporting period*

	Q4 2025-26
Applications awaiting triage decision	14,382

*Triage count is a snapshot as at the last day of each quarter.

7. Waiting periods for services commencing during the quarter

7.1 Average and median waiting period (342A(2)(b) and (c))

This section shows:

- Average number of days between application and commencement of services.
- Median number of days between application and commencement of services.

The data below presents the elapsed time for this cohort from applying through My Aged Care to assessment, allocation of funded services and commencement of care.

Please note: Time from allocation to service commencement may be influenced by individual choice, provider availability and system-level factors.

Table 2: Average and median number of days/months between application and commencement of all non-specialist services

Service Type	Measurement	Days	Months
All non-specialist services	Average	296	10
	Median	255	8

8. Assessment of differences by service setting

8.1 Residential care compared with home and community settings (342A(2)(d))

This section shows the assessment of differences in waiting times based on whether services were delivered in:

- Residential care (short-term and ongoing)
- Home or community settings (Support at Home, End-of-Life Pathway, Restorative Care Pathway, Assistive Technology and Home Modifications).

The data below presents the elapsed time for this cohort from applying through My Aged Care to assessment, allocation of funded services, and commencement of care.

Please note: Time from allocation to service commencement may be influenced by individual choice, provider availability, and system-level factors.

Table 3: Average and median number of days/months between application and commencement of services in a residential setting

Service Type	Measurement	Days	Months
Residential care (ongoing)	Average	356	12
	Median	138	5
Residential care (short-term)	Average	329	11
	Median	100	3

Table 4: Average and median number of days/months between application and commencement of services in a community setting

Service Type	Measurement	Days	Months
Support at Home (ongoing)	Average	306	10
	Median	297	10
Assistive technology	Average	203	7
	Median	193	6
Home modifications	Average	207	7
	Median	193	6
End-of-Life Pathway	Average	32	1
	Median	14	<1
Restorative Care Pathway	Average	79	3
	Median	64	2

Key points

- The End-of-Life Pathway continues to demonstrate the fastest access, with a median commencement time of 14 days, reflecting the urgent nature of the pathway.
- Support at Home (ongoing) recorded the longest median elapsed time at 297 days (10 months), indicating that ongoing home-based services continue to have the longest pathway from application to service commencement.
- Restorative Care Pathway also demonstrated relatively timely access, with a median elapsed time of 64 days (2 months). In comparison, Assistive Technology and Home Modifications had median elapsed times of 193 days (6 months), substantially longer than End-of-Life and Restorative Care Pathways but shorter than ongoing Support at Home services.
- Residential care services exhibited the greatest variation between average and median elapsed times. Residential Care (ongoing) recorded an average elapsed time of 356 days compared with a median of 138 days, while Residential Care (short-term) recorded an average of 329 days and a median of 100 days. This indicates a highly skewed distribution, where many people commence residential care within approximately 3 to 5 months, while a smaller cohort experiences substantially longer elapsed times before commencing care.
- The larger disparity observed in residential care compared with other service types suggests greater variability in the pathways to care commencement, potentially reflecting differing individual circumstances, care transitions, consumer choice, service availability and timing of entry to residential care. For context, approximately 23 per cent of the cohort who commenced residential care in the quarter had previously entered the Home Care Packages Program or Support at Home on the same approval.
- Overall, the results suggest that access to urgent and time-limited pathways is broadly operating in line with policy intent, while ongoing services, particularly Support at Home and residential care, continue to have substantially longer elapsed times. As noted in Appendix B, elapsed times may be influenced by a range of personal, provider and system factors and should not be interpreted solely as system-managed waiting periods.

9. Assessment of differences by State or Territory

9.1 Elapsed time by State and Territory of service delivery (342A(2)(e))

This section compares elapsed time for non-specialist services across Australian jurisdictions, including average and median days between application and service commencement.

The data below presents the elapsed time for this cohort from applying through My Aged Care to assessment, allocation of funded services, and commencement of care.

Please note: Time from allocation to service commencement may be influenced by individual choice, provider availability, and system-level factors.

Table 5: Average and median number of days between application and commencement of services by jurisdiction

Service Type	Measurement	Days								
		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
All non-specialist	Average	293	291	305	263	317	289	317	229	296
	Median	262	244	266	229	254	232	255	244	255

Key points

- The difference between the highest and lowest jurisdictional medians was a range from 229 days in Western Australia to 266 days in Queensland, indicating moderate variation in elapsed times across Australia.
- Queensland recorded the longest median elapsed time from application through My Aged Care to service commencement (266 days), and the second-highest average elapsed time (305 days). Queensland's median was 11 days longer than the national median of 255 days. The relatively small gap between the average and median (39 days) is consistent with delays being experienced more broadly across the cohort, rather than being driven solely by a small number of very long elapsed times.
- Western Australia recorded the shortest median elapsed time (229 days), with an average of 263 days. This result indicates comparatively faster access to services than other jurisdictions, although the gap between the average and median (34 days) suggests some variability in individual experiences.
- The Northern Territory recorded the shortest average elapsed time (229 days); however, the result should be interpreted cautiously due to smaller sample size compared with other jurisdictions. In addition, the median elapsed time (244 days) was higher than the average, suggesting the distribution of elapsed times differs from other jurisdictions and may be sensitive to the small number of observations.
- New South Wales recorded a median elapsed time of 262 days, while Queensland recorded 266 days, making these the jurisdictions with the longest typical elapsed times nationally. Both jurisdictions had relatively small differences between their averages and medians (31 and 39 days respectively), indicating less difference between the two measures than in several other jurisdictions.
- Tasmania and Victoria recorded median elapsed times of 232 days and 244 days respectively, both below the national median of 255 days. The larger gaps between the average and median in these jurisdictions (57 days in Tasmania and 47 days in Victoria) suggest that while many people commenced services earlier than the national median, a smaller cohort experienced substantially longer elapsed times before service commencement.
- South Australia and the Australian Capital Territory recorded the highest average elapsed times (317 days), despite median elapsed times closer to the national result (254 days and 255 days respectively). The sizeable differences between averages and medians are consistent with longer elapsed times among part of the cohort increasing the overall average.

10. Assessment of differences by local region

10.1 Elapsed time by local region by Aged Care Planning Region (ACPR) (342A(2)(f)).

This section compares elapsed time for non-specialist services by Aged Care Planning Region, as per the definition of the local region in section 5-5 of the Aged Care Rules 2025 and Glossary below.

The data below presents the elapsed time for this cohort from applying through My Aged Care to assessment, allocation of funded services, and commencement of care.

Please note: Time from allocation to service commencement may be influenced by individual choice, provider availability, and system-level factors.

New South Wales

Table 6: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Central Coast	281	9	259	9
Central West	234	8	170	6
Far North Coast	250	8	247	8
Hunter	276	9	246	8
Illawarra	275	9	250	8
Inner West	308	10	258	8
Mid North Coast	331	11	274	9
Nepean	259	9	251	8
New England	242	8	222	7
Northern Sydney	313	10	269	9
Orana Far West	234	8	197	6
Riverina/Murray	293	10	174	6

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
South East Sydney	269	9	246	8
South West Sydney	322	11	316	10
Southern Highlands	334	11	300	10
Western Sydney	317	10	298	10

Victoria

Table 7: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Barwon-South Western	344	11	276	9
Eastern Metro	326	11	265	9
Gippsland	296	10	254	8
Grampians	353	12	290	10
Hume	273	9	198	7
Loddon-Mallee	227	7	195	6
Northern Metro	272	9	250	8
Southern Metro	273	9	204	7
Western Metro	282	9	252	8

Queensland

Table 8: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Brisbane North	291	10	244	8
Brisbane South	303	10	280	9
Caboolture	307	10	271	9
Central West	-	-	-	-
Darling Downs	338	11	267	9
Far North	290	10	254	8
Fitzroy	293	10	208	7
Logan River Valley	315	10	280	9
Mackay	242	8	220	7
North West	346	11	238	8
Northern	253	8	231	8
South Coast	337	11	302	10
South West	202	7	202	7
Sunshine Coast	324	11	274	9
West Moreton	290	10	268	9
Wide Bay	296	10	238	8

Western Australia

Table 9: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Goldfields	322	11	272	9
Great Southern	321	11	258	8
Kimberley	236	8	237	8
Metropolitan East	249	8	231	8
Metropolitan North	280	9	254	8
Metropolitan South East	227	7	176	6
Metropolitan South West	250	8	194	6
Mid West	330	11	304	10
Pilbara	-	-	-	-
South West	292	10	254	8
Wheatbelt	272	9	259	9
Indian Ocean Territories	-	-	-	-

Please note: a dash (-), reflects insufficient data was available to generate an average/median due to less than 10 relevant commencements.

South Australia

Table 10: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Eyre Peninsula	245	8	255	8
Flinders & Far North	234	8	225	7
Hills, Mallee & Southern	319	10	226	7
Metropolitan East	341	11	269	9
Metropolitan North	316	10	255	8
Metropolitan South	313	10	254	8
Metropolitan West	354	12	260	9
Mid North	379	12	265	9
Riverland	245	8	280	9
South East	291	10	272	9
Yorke, Lower North & Barossa	272	9	208	7

Tasmania

Table 11: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
North Western	337	11	239	8
Northern	272	9	222	7
Southern	271	9	231	8

Australian Capital Territory

Table 12: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Australian Capital Territory	317	10	255	8

Northern Territory

Table 13: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period.

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Alice Springs	163	5	72	2
Barkly	-	-	-	-
Darwin	258	8	263	9
East Arnhem	-	-	-	-
Katherine	173	6	153	5

Please note: a dash (-), reflects insufficient data was available to generate an average/median due to less than 10 relevant commencements.

Key points

- The longest reportable median elapsed time was recorded in South West Sydney (NSW) at 316 days (10 months), while the shortest reportable median elapsed time was recorded in Alice Springs (NT) at 72 days (2 months).
- The ACPR analysis reveals substantially greater variation than was observed at the state and territory level. While jurisdictional medians varied by 37 days (229 to 266 days), ACPR medians varied by 244 days (72 to 316 days), showing that state and territory results can conceal substantial variation between local regions.
- The 244-day difference between the highest and lowest reportable ACPR medians demonstrates significant variation in elapsed time from My Aged Care application to service commencement across local regions.
- Most ACPRs recorded median elapsed times between 200 and 280 days, although several regions experienced substantially shorter or longer elapsed times.
- Several regions in New South Wales, Victoria and South-East Queensland recorded some of the longest elapsed times nationally, particularly South West Sydney (316 days), Southern Highlands (300 days), Western Sydney (298 days), South Coast Queensland (302 days) and Grampians (290 days).
- Regions with the shortest elapsed times included Alice Springs (72 days), Katherine (153 days), Central West NSW (170 days), Riverina/Murray (174 days), Metropolitan South East WA (176 days) and Metropolitan South West WA (194 days).
- Queensland regions generally reported longer elapsed times, particularly South Coast, Brisbane South, Logan River Valley, Caboolture and Sunshine Coast, where median elapsed times ranged from 271 to 302 days. In contrast, Western Australian metropolitan regions generally recorded shorter elapsed times, especially Metropolitan South East and Metropolitan South West.
- Overall, the findings suggest that local service market conditions, provider capacity, consumer circumstances and regional demand pressures may contribute to the variation in elapsed times between local regions, resulting in substantial variation in the consumer pathway from My Aged Care application to service commencement.

Appendix A: Glossary

Term	Meaning
Aged care needs assessor	A person who conducts aged care assessments (home support or comprehensive assessments). An aged care needs assessor can be a clinical assessor or a non-clinical assessor, and these roles have different qualification requirements.
Aged care planning region (ACPR)	A geographic area used by the government to help plan and deliver aged care services. Each region includes nearby communities with similar care needs. There are 73 regions across Australia. ACPR maps are available at https://www.health.gov.au/resources/collections/2018-aged-care-planning-region-maps
Application for aged care	The process where a person submits a request to access aged care services through My Aged Care.
Assessment delegate	A delegate is a person whose position has been delegated powers and functions under a section of the Act by the System Governor. An assessment delegate's role is to review the assessment report, ensuring that the collection of services an assessor considers will meet the individual's needs are evidenced based, align with the goals and concerns identified during the assessment, are legally sound and meet all of the eligibility criteria under the Act.
Assistive Technology and Home Modifications Scheme	A time-limited support pathway under the Support at Home program that helps eligible older people access aids, equipment, and home modifications based on their assessed needs.
Classification type	Classification types differentiate the time period that services are delivered for under the service group. There are three classification types: ongoing, short-term and hospital transition. Each classification type has a different purpose in meeting the needs of an individual and so are funded and timed accordingly. Classification levels determine the amount of funding available to deliver the aged care services that an individual has been approved to access under a service group.
Comprehensive assessment	A comprehensive assessment is for people who may need more complex aged care services, such as Support at Home or residential care. It looks more deeply at the person's health, care needs, and living situation, and undertaken by clinical assessors.
End-of-Life Pathway	A short-term aged care pathway under the Support at Home program that provides fast access to care for people nearing the end of life.

Term	Meaning
Home support assessment	A home support assessment is used to decide if someone can access entry-level services through the Commonwealth Home Support Program (CHSP).
My Aged Care	The Australian Government's main entry point for aged care services. It provides information, support, and access to assessments and service providers online, by phone, or in person.
Non-specialist funded aged care services	Aged care services that include short-term and ongoing Support at Home and residential care.
Priority system	A system used to manage access to services based on each person's assessed needs and urgency. The allocation of a priority category is based on an older person's level of function, the level of risk in relation to the care situation and any other relevant concerns.
Registered provider	A registered provider of aged care is an organisation that has been assessed and approved to provide high-quality, safe and consistent care to older people under the Act.
Residential aged care	Ongoing care for older people who cannot live independently at home. It is provided in aged care homes and includes accommodation, personal care, meals, and health support.
Restorative Care Pathway	A short-term, time-limited support pathway under the Support at Home program that helps older people regain or maintain independence. It provides tailored services to support recovery and enable people to maintain independence. Services can be delivered in home or community settings and can be for up to 16 weeks.
Specialist Program	A Government program for delivering funded aged care services that (a) is given effect through one or more agreements or arrangements entered into by the Commonwealth under subsection 247(1) or section 264 of the Act for the program; and (b) meets any other requirements prescribed by the rules. Aged Care specialist programs include: • Multi-Purpose Service Program (MPSP) • Transition Care Program (TCP) • National Aboriginal and Torres Strait Islander Flexible Aged Care (NATSIFAC) Program • Commonwealth Home Support Program (CHSP)

Term	Meaning
Support at Home program	Support at Home is a program to help older people remain at home as they age by delivering coordinated care and services to meet their assessed ageing related care needs with: • 8 classifications to fund ongoing services • 3 short-term pathways to fund assistive technology and home modifications, restorative care and end-of-life care • 4 transitioned Home Care Package classifications to provide an equivalent level of funding for those who transitioned to Support at Home • participant contributions set by government.
Support Plan	A plan developed by an aged care assessor that: • summarises the findings of an older person's aged care assessment • makes recommendations for services and supports • provides guidance on how recommended services may be delivered.
Support Plan Review	The pathway for existing care recipients to request a review of their Support Plan if their aged care needs have changed since their last assessment. An aged care needs assessor will speak with the person about their care needs and determine whether they can make changes to the person's existing Support Plan or refer them for a full reassessment. A full reassessment will typically occur where there has been a significant change in their care needs.

Appendix B. Factors influencing the timing of service uptake

When an older person is allocated an aged care place, they will be told the start and end date of their placement.

For residential care, the placement continues for as long as it is needed.

For home support, assistive technology and home modifications, the allocation is time-limited - people have 56 days (or up to 84 days with an approved extension) to enter into a service agreement with a provider.

There are many reasons why someone might not start services straight away, including personal circumstances, provider availability or system-related factors. Examples of these are outlined below.

Personal factors

Everyone's situation is different. There are many personal reasons why someone might take extra time before starting aged care services. These include:

- **Changes in health** – A person's condition might improve temporarily, reducing their need for care. On the other hand, poor health may make it harder to engage with providers.
- **Cultural or language needs** – Some people may prefer to wait for a provider who understands their cultural background or speaks their language.
- **Support from family or friends** – If informal support is available, a person may not need formal services right away. They may also wait if their main carer is temporarily unavailable.
- **Readiness to begin care** – Starting aged care can be a big emotional step. People may need time to prepare, especially if moving into residential care.
- **Time to make decisions** – Some people want to explore their options, talk with family, or compare providers before choosing.
- **Location preferences** – A person may prefer a provider in a specific area, especially for residential care.
- **Financial concerns** – People may want to understand fees, subsidies, or get financial advice before starting services.
- **Multiple care options** – If someone is approved for both home and residential care, they may choose to start one and delay the other.
- **Legal or guardianship matters** – Sometimes starting care is delayed while waiting for legal documents or guardian consent.
- **Respite Care** – People accessing residential care (short-term) generally do not require immediate access. Rather they usually need this care option at specific planned times when their carer is not available.

Provider-related factors

Sometimes the timing of care depends on provider availability and capacity. Common reasons include:

- **Limited services or staff** – This can be particularly challenging in rural or remote areas, or for specialised types of care.
- **Waitlists or scheduling delays** – Providers may not be able to start services immediately due to demand.
- **Time to finalise service agreements** – Some services, like home modifications or assistive technology, may take longer to set up.
- **Waiting for a preferred provider** – A person may choose to wait for a provider who best meets their needs.
- **Consideration of resident characteristics** - Providers may need to have regard to how readily their facility and workforce can meet the care needs of a potential new resident.

Systemic or administrative factors

Some delays are due to broader aspects of how the aged care system operates. These may include:

- **Navigating the system** – It can take time to understand how My Aged Care works, what services are available, and how to access them.
- **Using other services first** – Some people may receive support from state-funded or community programs while waiting for Commonwealth-funded aged care.
- **Processing and communication timeframes** – Occasionally, there may be delays in finalising approvals or sending out funding notifications.

Appendix C. Revised Data Sets for the period 1 November 2025 – 31 March 2026

The first report, published on 12 May 2026, included applications from people seeking Support Plan Review or reassessment. Following a departmental review, the Department excluded these records from the datasets underpinning the revised figures in all tables, as reassessments under section 64 of the Aged Care Act 2024 fall outside the scope of reporting under section 342A. All tables have been revised accordingly using the new methodology.

Table 1: Triage count at end of the reporting period*

	Q2* 2025-26	Q3 2025-26
Applications awaiting triage decision	23,491	18,673

*Data for Quarter 2, 2025-26 is reported from 1 November to 31 December 2025, in line with the commencement of the Act. Triage count is a snapshot as at the last day of each quarter.

Table 2: Average and median number of days/months between application and commencement of all non-specialist services (1 November 2025 – 31 March 2026)

Service Type	Measurement	Days	Months
All non-specialist services	Average	318	10
	Median	300	10

Table 3: Average and median number of days/months between application and commencement of services in a residential setting (1 November 2025 – 31 March 2026)

Service Type	Measurement	Days	Months
Residential care (ongoing)	Average	336	11
	Median	125	4
Residential care (short-term)	Average	324	11
	Median	93	3

Table 4: Average and median number of days/months between application and commencement of services in a community setting (1 November 2025 – 31 March 2026)

Service Type	Measurement	Days	Months
Support at Home (ongoing)	Average	348	11
	Median	344	11
Assistive technology	Average	126	4
	Median	105	3
Home modifications	Average	131	4
	Median	107	4
End-of-Life Pathway	Average	35	1
	Median	19	<1
Restorative Care Pathway	Average	87	3
	Median	70	2

Table 5: Average and median number of days between application and commencement of services by jurisdiction (1 November 2025 – 31 March 2026)

Service Type	Measurement	Days								
		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Aust
All non-specialist	Average	325	293	342	313	314	318	351	282	318
	Median	307	273	329	320	286	317	318	293	300

New South Wales

Table 6: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Central Coast	317	10	316	10
Central West	278	9	286	9
Far North Coast	317	10	302	10
Hunter	328	11	308	10
Illawarra	285	9	293	10
Inner West	335	11	294	10
Mid North Coast	319	10	314	10
Nepean	268	9	275	9
New England	282	9	268	9
Northern Sydney	344	11	301	10
Orana Far West	261	9	287	9
Riverina/Murray	330	11	259	9
South East Sydney	307	10	291	10
South West Sydney	357	12	341	11
Southern Highlands	371	12	357	12
Western Sydney	348	11	337	11

Victoria

Table 7: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Barwon-South Western	350	11	331	11
Eastern Metro	318	10	288	9
Gippsland	319	10	283	9
Grampians	341	11	287	9
Hume	288	9	260	9
Loddon-Mallee	256	8	244	8
Northern Metro	277	9	271	9
Southern Metro	267	9	245	8
Western Metro	270	9	266	9

Queensland

Table 8: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Brisbane North	350	12	359	12
Brisbane South	372	12	373	12
Caboolture	335	11	330	11
Central West	258	8	235	8
Darling Downs	391	13	371	12
Far North	316	10	308	10
Fitzroy	350	11	287	9
Logan River Valley	328	11	316	10
Mackay	282	9	294	10
North West	317	10	233	8
Northern	266	9	269	9
South Coast	344	11	314	10
South West	270	9	211	7
Sunshine Coast	328	11	349	11
West Moreton	342	11	305	10
Wide Bay	352	12	350	11

Western Australia

Table 9: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Goldfields	285	9	277	9
Great Southern	343	11	360	12
Kimberley	298	10	260	9
Metropolitan East	303	10	320	11
Metropolitan North	317	10	326	11
Metropolitan South East	297	10	310	10
Metropolitan South West	329	11	329	11
Mid West	282	9	282	9
Pilbara	306	10	271	9
South West	338	11	347	11
Wheatbelt	224	7	230	8
Indian Ocean Territories	-	-	-	-

Please note: a dash (-), reflects insufficient data was available to generate an average/median due to less than 10 relevant commencements.

South Australia

Table 10: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Eyre Peninsula	366	12	296	10
Flinders & Far North	245	8	160	5
Hills, Mallee & Southern	298	10	282	9
Metropolitan East	332	11	279	9
Metropolitan North	307	10	304	10
Metropolitan South	313	10	284	9
Metropolitan West	317	10	273	9
Mid North	340	11	259	9
Riverland	312	10	283	9
South East	300	10	281	9
Yorke, Lower North & Barossa	318	10	279	9

Tasmania

Table 11: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
North Western	321	11	315	10
Northern	313	10	306	10
Southern	320	11	323	11

Australian Capital Territory

Table 12: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Australian Capital Territory	351	12	318	10

Northern Territory

Table 13: Average (avg)/Median (mdn) number of days/months between an application for aged care and service commencement for services commenced in the reporting period (1 November 2025 – 31 March 2026).

Region	Avg (days)	Avg (months)	Mdn (days)	Mdn (months)
Alice Springs	277	9	269	9
Barkly	-	-	-	-
Darwin	297	10	326	11
East Arnhem	-	-	-	-
Katherine	210	7	247	8

Please note: a dash (-), reflects insufficient data was available to generate an average/median due to less than 10 relevant commencements.

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All information in this publication is correct as at 11 August 2026

