- Triage
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- Carer Profile
- **Medical and Medications**
- Function
- Physical, Personal Health & Frailty
- Social
- Cognition
- Behaviour
- Psychological
- Home & Personal Safety
- Financial or Legal

Medical and Medications

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

Medical

Client in receipt of medical treatments

- [ ] Drip infusion in vein
- [ ] Home Dialysis (peritoneal or haemodialysis)
- [ ] Centre/hospital Dialysis
- [ ] Stoma care
- [ ] Oxygen Therapy

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Support Considerations

- [ ] Use of Ventilator
- [ ] Use of Nebuliser
- [ ] Tracheostomy care
- [ ] Nursing care for pain
- [ ] Enteral Feeding Supplement - Bolus
- [ ] Enteral Feeding Supplement - Non-bolus
- [ ] Parenteral feeding (intra-venous hyperalimentation)
- [ ] Care for chronic ulcer
- [ ] Urethral catheter

Health condition(s)

- [ ] Add as Other Consideration

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Health Condition	Health Condition Description	Diagnosis Status	Primary Health Condit

0216

Health Condition Type Override

s47F

Diagnosis status

Primary Health Condition

Primary Health Condition

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Health Condition	Health Condition Description	Diagnosis Status	Primary Health Condit

0921

Health Condition Type Override

s47F

Diagnosis status

Primary Health Condition

Primary Health Condition

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Impact of health issues on normal activities

- Not at all
- Slightly
- **Moderately**
- Quite a bit

Clear Section

This section of IAT must be completed under your organisation's clinical governance.

Advanced Medical assessment

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Has the client been admitted to hospital in the last 12 months?

- No
- Yes planned
- Yes unplanned

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☐ *Add as Other Consideration*

Recent GP visits and health checks

Yes

No

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☐ *Add as Recommendation*

Allergies and/or sensitivities

Yes

No

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☐ *Add as Other Consideration*

Assessor Medical Domain Notes

s47F



Medications

Is the client taking medications?

- Yes
- No

How many medications does the client currently take, including over the counter medicines?

- 0 to 4
- 5 to 14
- 15 or more

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Assessor notes - medications

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Next

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- Financial or Legal

Function

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

General observations of client

Health literacy difficulties

- Yes
- No

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Support Considerations

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☐ *Add as Other Consideration*

Function

Get to places out of walking distance

- Without help
- **With some help**
- Completely unable

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☑ *Add as Functional Need*

Who helps?

☑ No one

Is the need being met?

Partially met

Any additional details?

s47F

Does the client drive?

Yes

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No

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Add as Functional Need

If client does not drive, who assists the client to get to places out of walking distance?

- [ ] Partner
- [ ] Parent
- [ ] Other family member (daughter, daughter-in-law, son-in-law, other relative)
- [ ] Friend/neighbour
- [ ] Public transport
- [ ] Taxi
- [ ] Aged Care Service provider transport service
- [ ] Other

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Undertake light housework

- Without help
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Undertake housework (heavy/moderate)

- Without help
- **With some help**
- Completely unable

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☑ *Add as Functional Need*

Who helps?

☑ No one

Is the need being met?

Partially met

Any additional details?

s47F is able to complete light housework but is unable to complete heavy tasks.

Go shopping (assuming transportation)

- Without help
- With some help
- Completely unable

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☑ *Add as Functional Need*

Who helps?

☑ No one

Is the need being met?

Partially met

Any additional details?

struggles but has no one to help, small shops

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Prepare meals

- Without help
- **With some help**
- Completely unable

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☐ *Add as Functional Need*

Who helps?

☑ No one

Is the need being met?

Partially met

Any additional details?

s47F

Take medicine

Without help

With some help

Completely unable

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☐ *Add as Functional Need*

Any additional details?

s47F is independent with her medications.

Handle money

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Use the telephone

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Use other communication device

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Use online services

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Walk

- **Without help**
- With some help
- Wheelchair independent
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

[redacted] mobilises independently without aids in the community. She cannot walk for long.

Climb stairs

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Take a bath or shower

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

[redacted] is independent with showering.

Dressing

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Grooming

- Without help
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Eating

- **Without help**
- With some help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Transfers

- **Without help**
- Minor help
- Major help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

Upper body strength

- No difficulty
- **Some difficulty**
- Completely unable

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☐ *Add as Functional Need*

Who helps?

☑ Informal carer(s)

☐ Aged care service provider(s)

Other

Is the need being met?

Partially met

Any additional details?

Toilet use

- **Without help**
- Minor help
- Major help
- Completely unable

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☐ *Add as Functional Need*

Any additional details?

She is continent of both.

Toileting – Bladder

Continent (for over 7 days)

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☐ *Add as Functional Need*

Toileting – Bowels

Continent

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☐ *Add as Functional Need*

Are you likely to recommend residential respite care?

Yes

No

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Function Assessor notes

s47F

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Next

Close

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- Psychological
- Home & Personal Safety
- Financial or Legal

Physical, Personal Health & Frailty

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

Physical Health

Sensory concerns

- Yes
- No

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Support Considerations

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☐ *Add as Other Consideration*

Personal Health

Any oral health concerns? (e.g. problems with teeth, mouth and/or dentures)

- [ ] Yes
- [ ] No

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☐ *Add as Other Consideration*

Do you have any problems with swallowing causing difficulties when you eat or drink?

- Yes always
- Yes sometimes
- Yes rarely
- No
- Other

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☐ *Add as Other Consideration*

Any foot problems that affect your ability to walk or move about?

Yes

No

Any major skin conditions?

Yes

No

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☐ *Add as Other Consideration*

During the past month, has it often been too painful to do many of your day to day activities?

Yes

No

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☐ *Add as Other Consideration*

Do you experience any difficulties with sleep (e.g. difficulty falling asleep, fragment sleep, insufficient sleep)

Yes

No

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☐ *Add as Other Consideration*

How often do you have six or more alcoholic drinks on one occasion?

Please select...

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☐ *Add as Other Consideration*

☐ *Add as Complexity Indicator*

Do you smoke or have you smoked in the past?

Please select...

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☐ *Add as Other Consideration*

In the past year, have you used an illegal or prescriptive drug for non-medical reasons?

Please select...

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☐ *Add as Complexity Indicator*

General and personal health observations

Frailty

Have you had any falls or near falls in the last 12 months?

- [ ] Yes
- [ ] No

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☐ *Add as Other Consideration*

Have you unintentionally lost in any weight in the last three months?

More than 5 kg or more than 5% of body weigh

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☐ *Add as Other Consideration*

How much of your time in the past 4 weeks did you feel tired?

All of the time

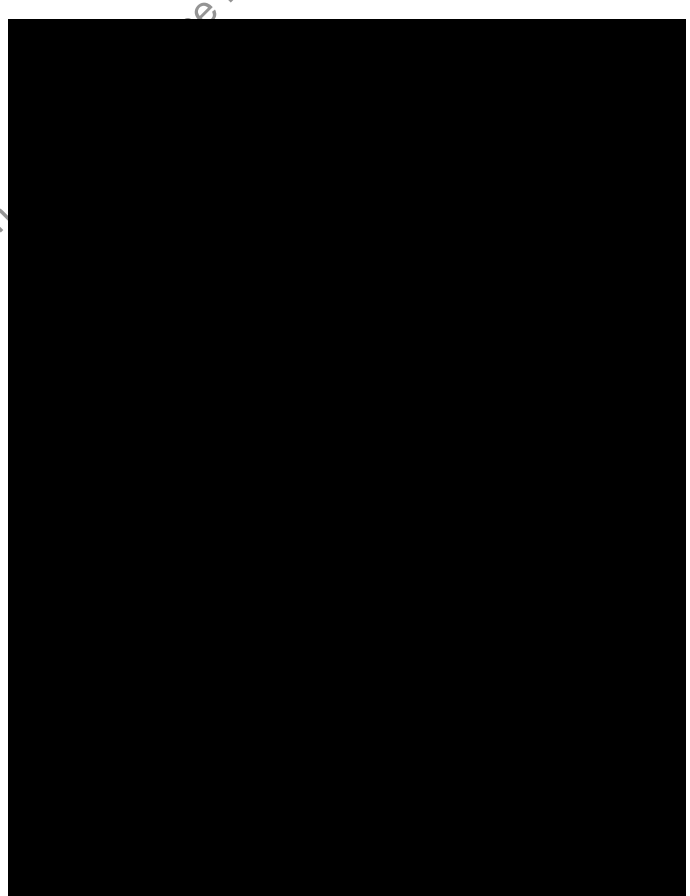
In the past 4 weeks, by yourself and not using aids, do you have any difficulty walking up 10 steps without resting?

Yes

No

In the past 4 weeks, by yourself and not using aids, do you have any difficulty walking 300 m or around the block?

- Yes
- No



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Arthritis

Kidney disease

Frailty observations

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- Financial or Legal

Social

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

Do you ever feel lonely, down or socially isolated?

- Not sure
- **No, not at all**
- Occasionally
- Sometimes
- Most of the time

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Support Considerations

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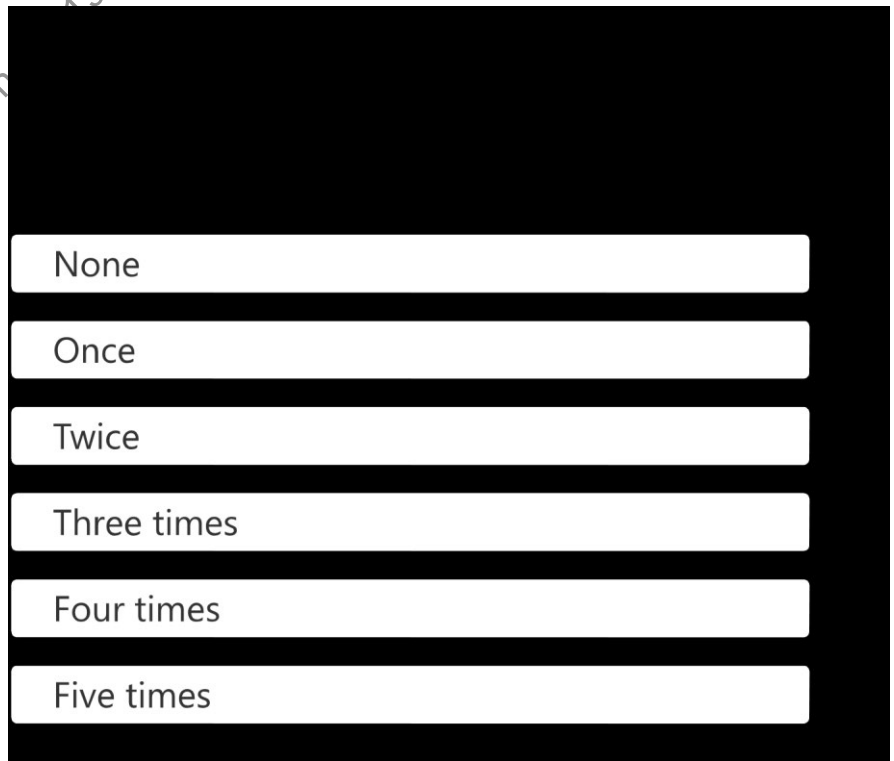
☐ *Add as Other Consideration*

Duke Social Support Index - Social Interaction Subscale

Other than members of your family, how many persons in your local area do you feel you can depend on or feel very close to?

- None
- 1-2 people
- More than 2 people



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Six times

Seven or more times

How many times did you talk or communicate to someone, friends, relatives or others on the telephone, mobile (e.g. text message) or social media (e.g. Facebook, snapchat, Instagram) in the past week (either they contacted you or you contacted them)?

None

Once

Twice

Three times

Four times

Five times

Six times

Seven or more times

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About how often did you go to meetings of clubs, religious meetings or other groups that you belong to in the past week?

- None
- Once
- Twice
- Three times
- Four times
- Five times
- Six times
- Seven or more times

Total score

Total score cannot be calculated until all questions have be

Landerman alternative models stress buffering 1989

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Duke Social Support Index - Satisfaction with social support Subscale

Does it seem that your family and friends (people who are important to you) understand you?

- Hardly ever
- Some of the time
- Most of the time

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Do you feel useful to your family and friends (people important to you)?

- Hardly ever
- Some of the time
- Most of the time

Do you know what is going on with your family and friends?

- Hardly ever
- Some of the time
- Most of the time

When you are talking with your family and friends, do you feel you are being listened to?

- Hardly ever

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Some of the time

Most of the time

Do you feel you have a definite role (place) in your family and among your friends?

Hardly ever

Some of the time

Most of the time

Can you talk about your deepest problems with at least some of your family and friends?

Hardly ever

Some of the time

Most of the time

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How satisfied are you with the kinds of relationships you have with your family and friends?

- Very dissatisfied
- Somewhat dissatisfied
- Satisfied

Total score

Total score cannot be calculated until all questions have be

Landerman alternative models stress buffering 1989

Assessor observation about family, community engagement and support

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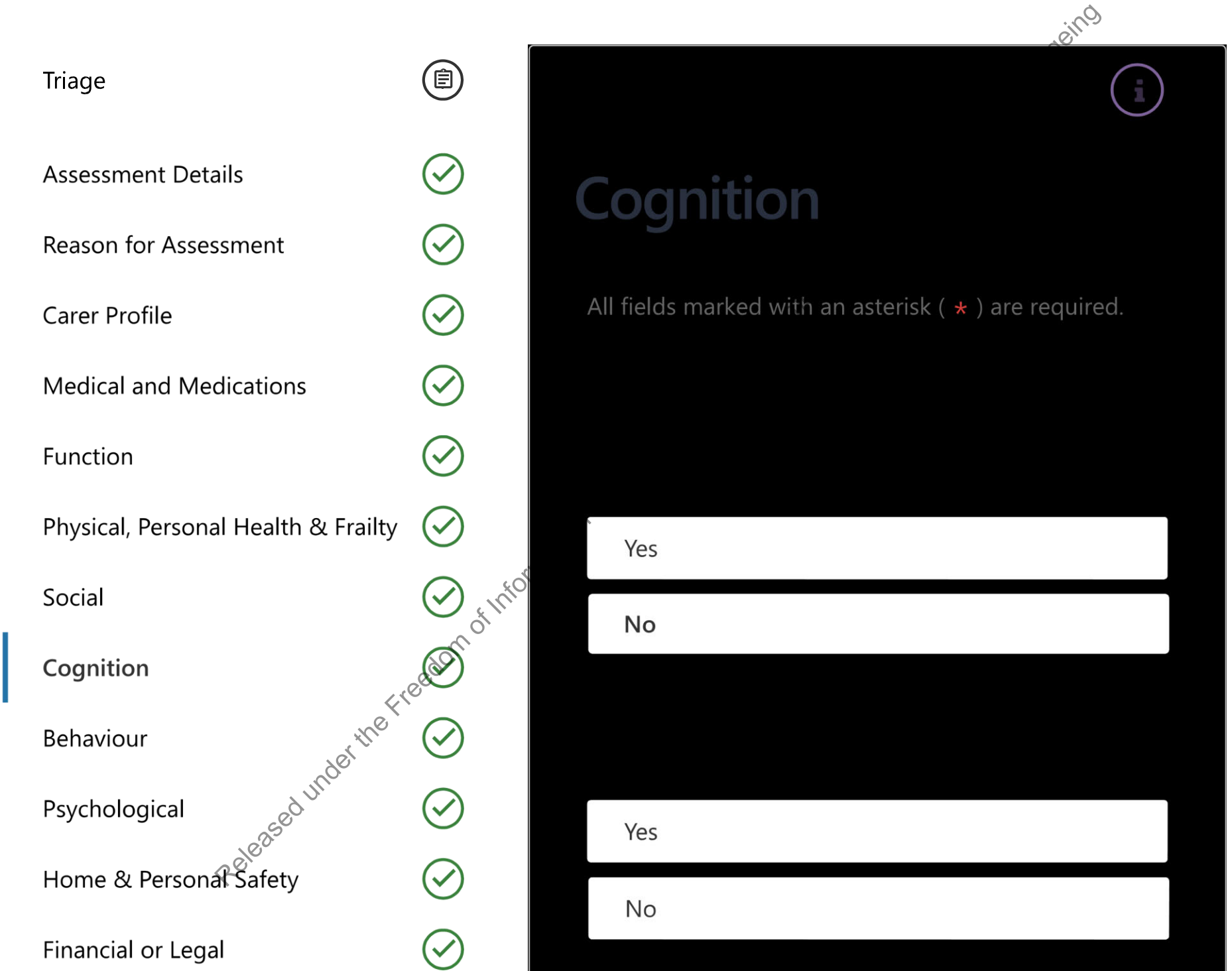

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Support Considerations

Assessor notes on cognition

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Add as Other Consideration



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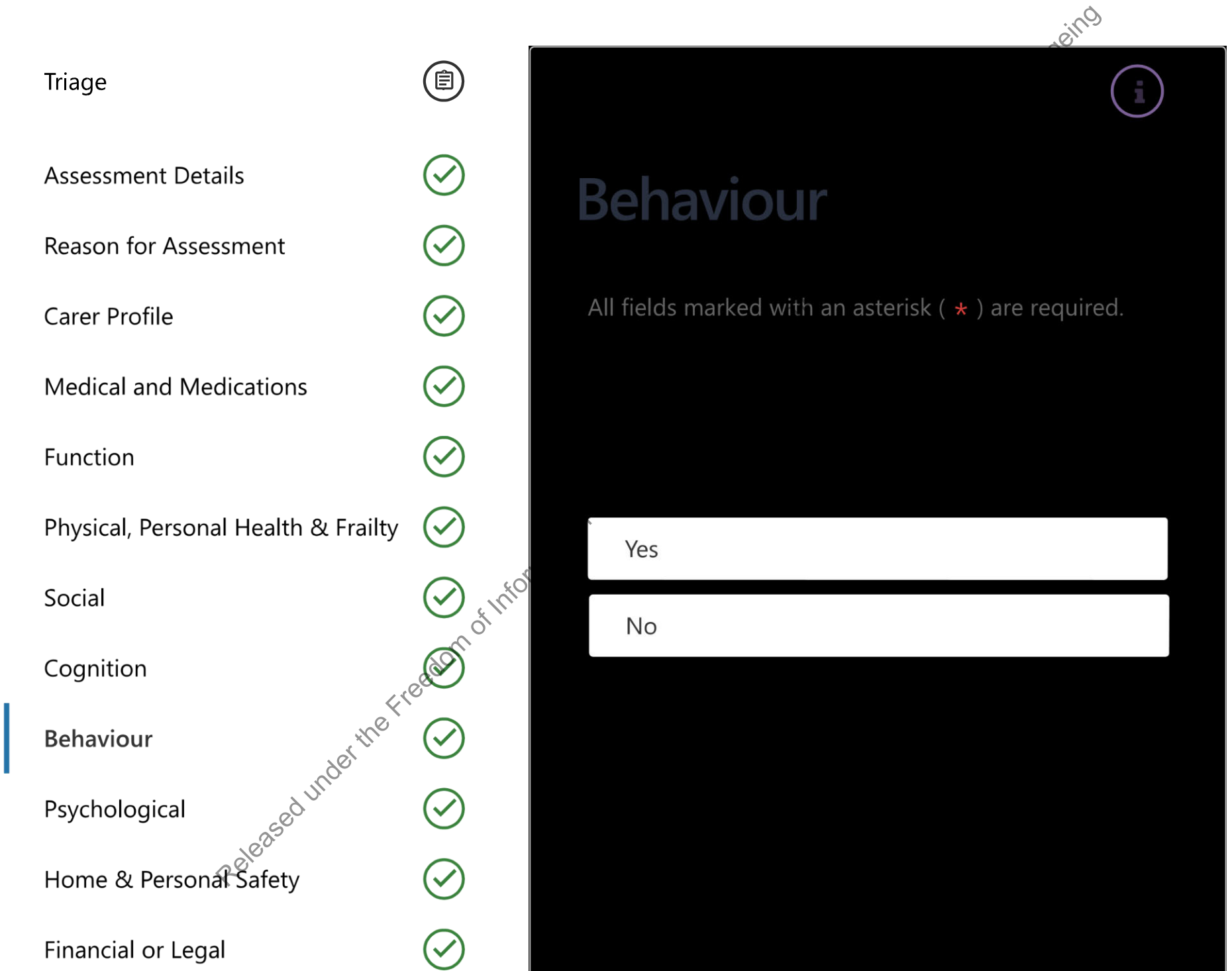

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Support Considerations

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☐ *Add as Other Consideration*

Are there any reported changes in the client's personality?

Yes

No

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☐ *Add as Other Consideration*

Assessor notes on behaviours

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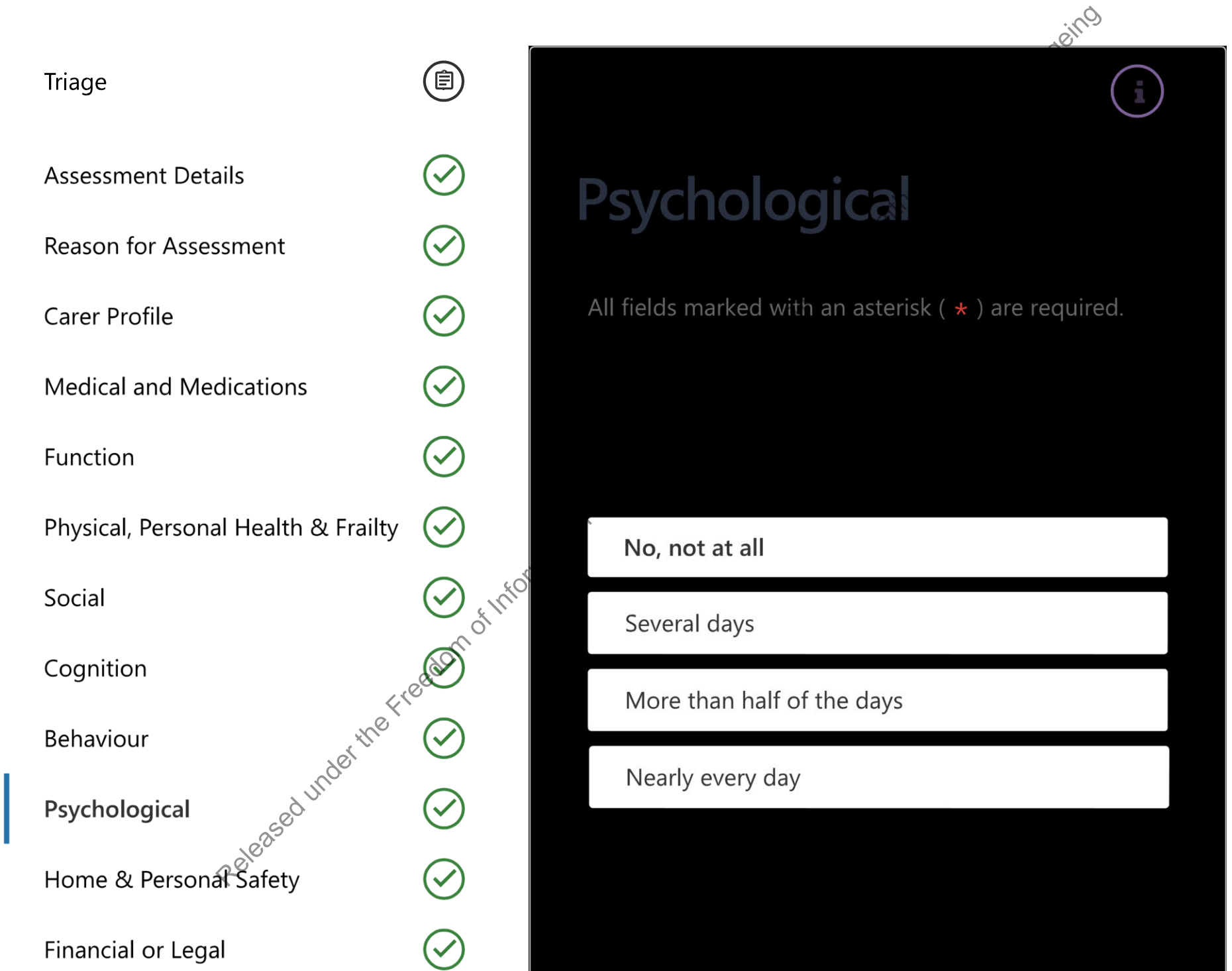

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being

Support Considerations

2. Not being able to stop or control worrying last 2 weeks?

- **No, not at all**
- Several days
- More than half of the days
- Nearly every day

3. Little interest or pleasure in doing things last 2 weeks?

- **No, not at all**
- Several days
- More than half of the days
- Nearly every day

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4. Feeling down, depressed or hopeless last 2 weeks?

- [ ] No, not at all
- [x] **Several days**
- [ ] More than half of the days
- [ ] Nearly every day

Assessor psychological observations

s47F

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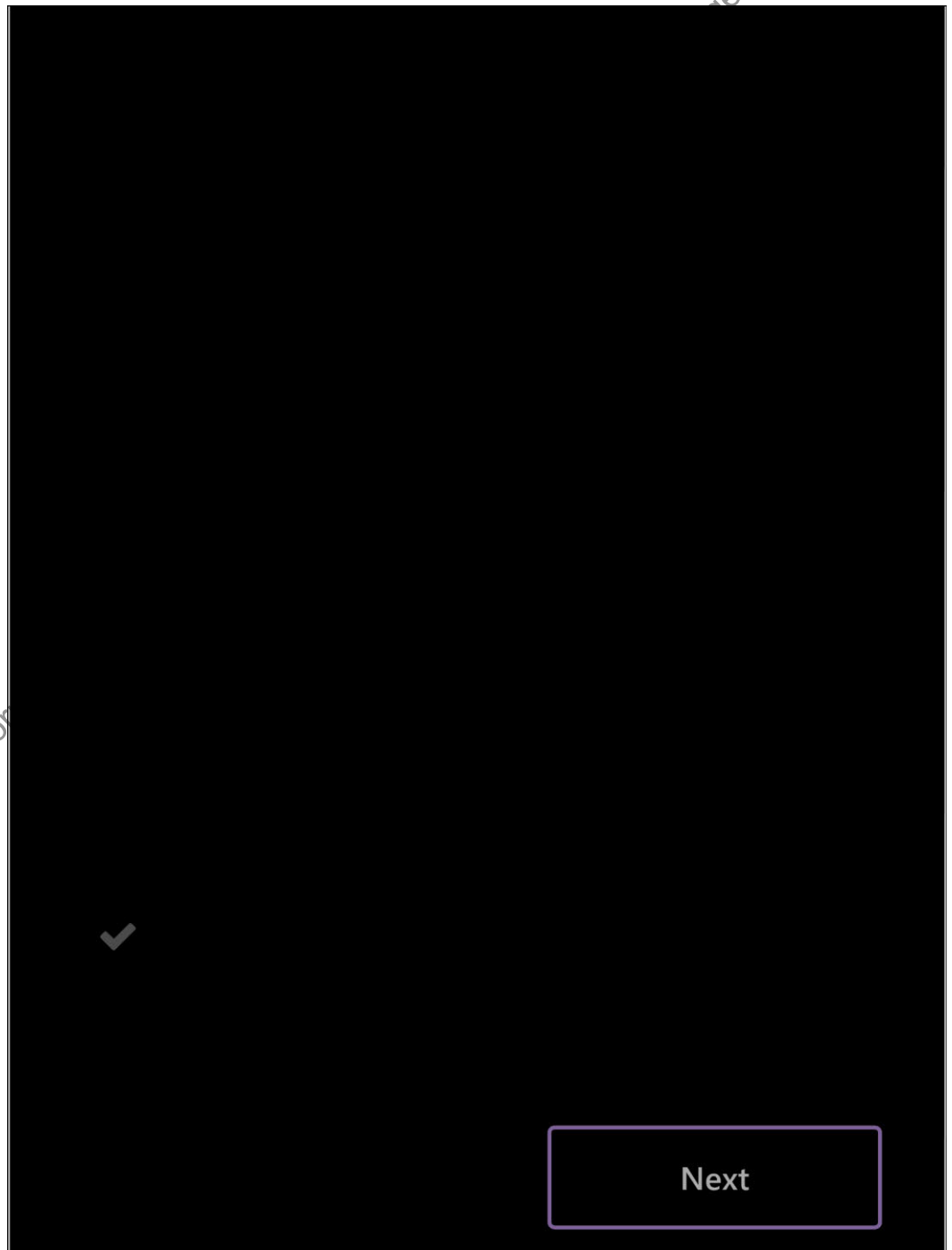

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- Behaviour
- Psychological
- **Home & Personal Safety**
- Financial or Legal

Home & Personal Safety

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

Assess the home and garden and ask the client about:

- Any difficulty/unsteadiness/need to hold onto doors or v
  shower
- Any trouble getting on and off toilet
- Any trouble navigating the house at night
- Any near slips or trips on surfaces

- Home and garden are safe
- Minimal environmental hazards
- Moderate environmental hazards requiring modification
- Extremely unsafe environment

General observations of the home environment

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Support Considerations

[redacted] states she does not have any safety concerns about her home and declined an Occupational Therapy assessment.

Home safety equipment client has

- [ ] Add as Other Consideration
- [ ] Smoke alarm(s) — [ ] *Add as Recommendation*
- [ ] Personal alarm — [ ] *Add as Recommendation*
- [ ] Personal emergency plan — [ ] *Add as Recommendation*
- [ ] Other technology

Characteristics of client's house

Please select...

Characteristics of client's garden

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Please select...

Home maintenance (including gardening) concerns

Yes

No

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☐ *Add as Other Consideration*

There is help for client's home maintenance

Yes

No

Is the client living in unstable accommodation, such as having short term accommodation, having previous accommodation end, or living in a boarding house without the security of tenure?

Yes

No

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☐ *Add as Complexity Indicator*

Home and personal safety assessor notes

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Triage

Financial or Legal

Financial or Legal

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

Yes

No

Yes

No

Support Considerations

What is the client's employment status?

Please select...

Financial or legal observations

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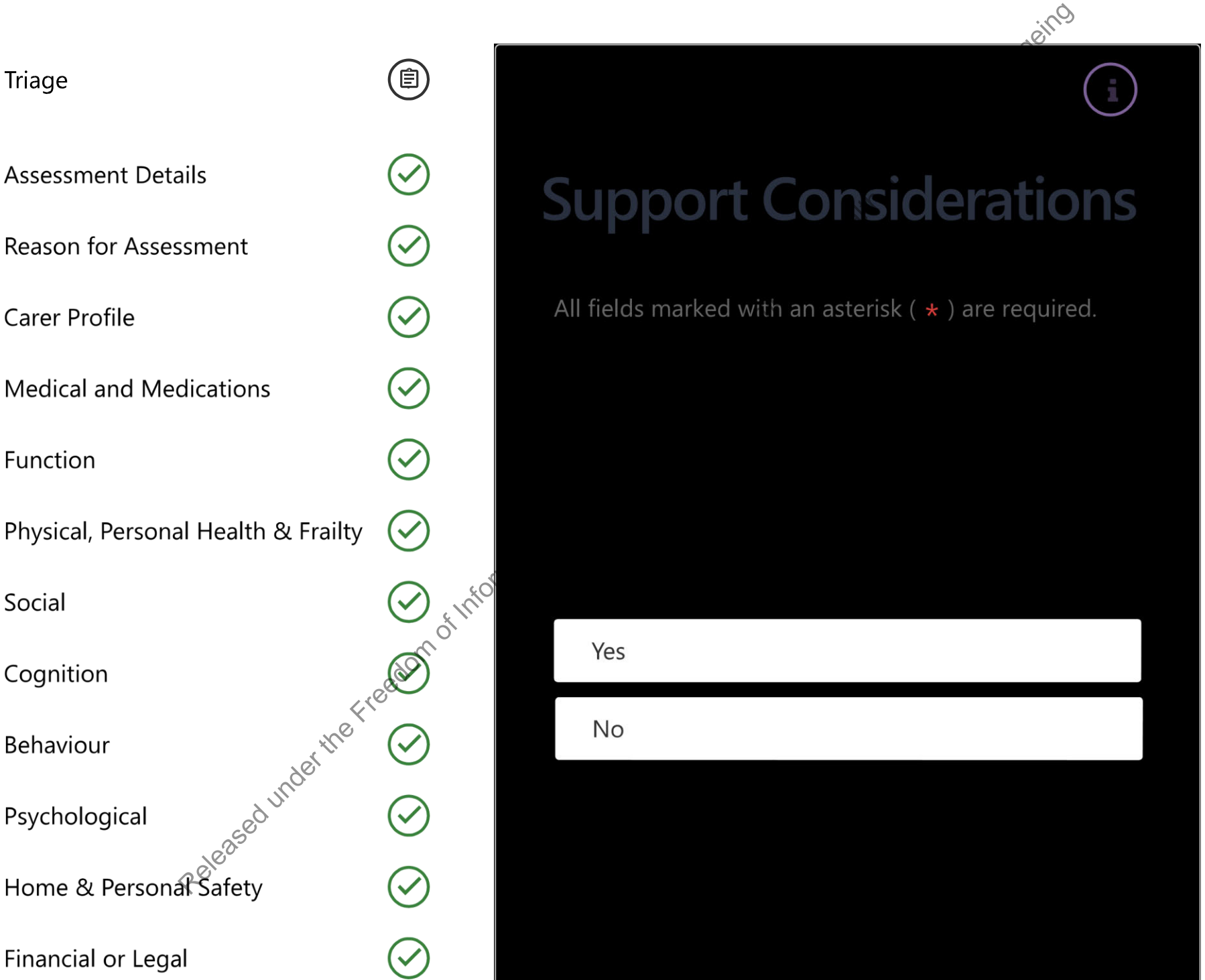

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Support Considerations

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☐ *Add as Complexity Indicator*

[redacted]

Yes

No

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☐ *Add as Complexity Indicator*

Any evidence that the client is self-neglecting of personal care, nutrition or safety?

Yes

No

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☐ *Add as Complexity Indicator*

Risk client may cause harm to themselves or others

Yes

No

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☐ *Add as Complexity Indicator*

Client has a memory problem or confusion that significantly limits self-care capacity, requires intensive supervision and/or frequent changes to support.

Yes

No

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☐ *Add as Complexity Indicator*

[redacted]

Yes

No

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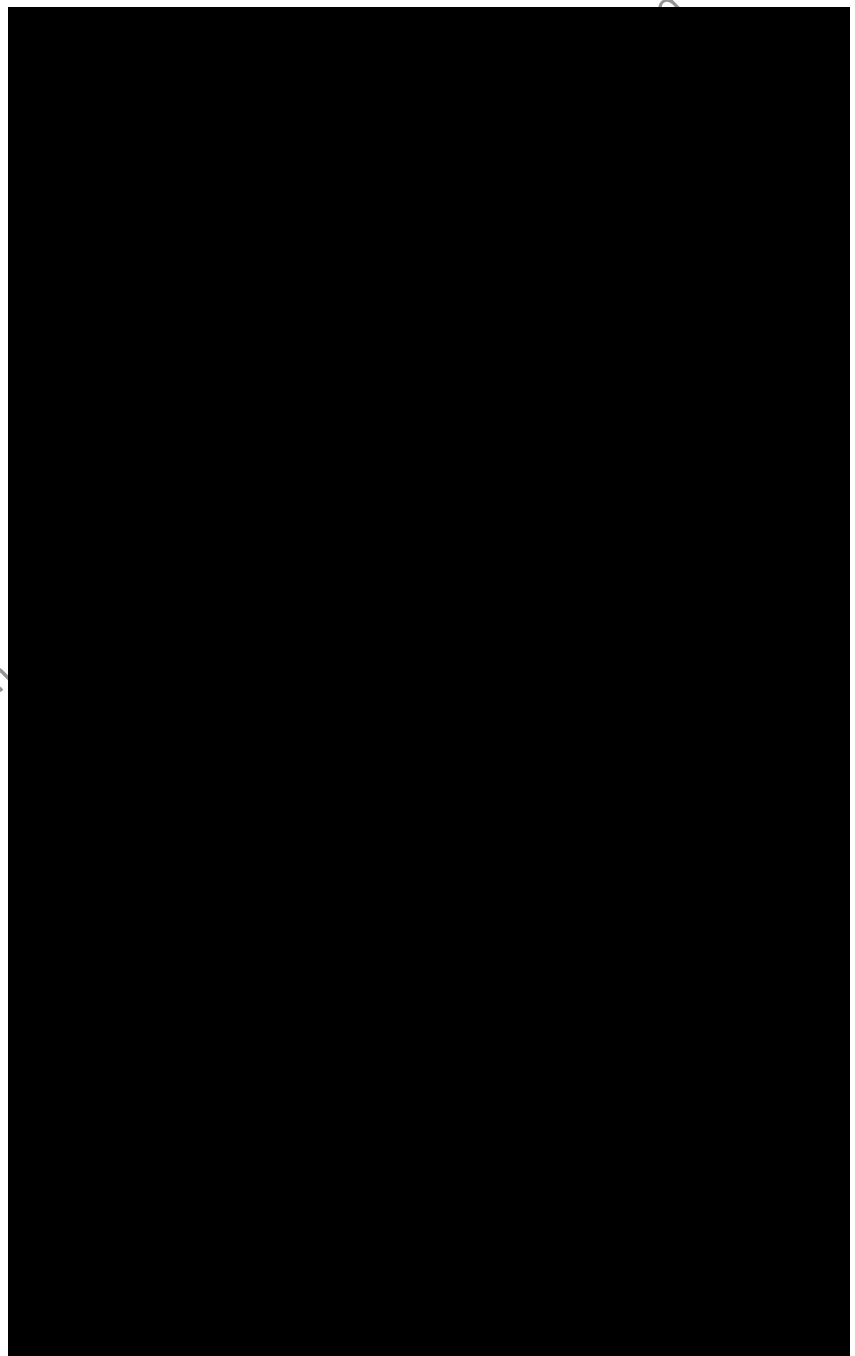
☐ *Add as Complexity Indicator*

Client diversity



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☐	a person separated from your parents or children by forced adoption or removal	☐ *Add as Other Consideration*
☐	a socially isolated individual	☐ *Add as Other Consideration*
☐	Other	☐ *Add as Other Consideration*

Assessor's notes

Does the client require urgent service provision?

- Yes
- No

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Assessments Assurance

Support Plan Review Desktop Activity: Documentation Quality Review

Executive / internal Use

Branch / Section	Single Assessment System Branch/Assessments Assurance Section
Security classification	OFFICIAL
Document owner	Assessments Assurance Section
Prepared date	18 June 2026
Version	1.1

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Document Control

Document title	Support Plan Review (SPR) – Desktop Activity: Documentation Quality Review
Branch / Section	Single Assessment System Branch / Assessments Assurance Section
Security classification	OFFICIAL
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Author	s22
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Version	1.1
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Date approved	12 August 2026

Version History

Version	Date	Summary of changes	Author
1.0	18 June 2026	Prepared for s2 approval	s22
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Executive Summary

This review of 300 Support Plan Reviews (SPRs) found that recorded evidence did not consistently support decisions to progress to reassessment, with 57% of records containing documentation issues. In 27% of records, a significant change in circumstances was not clearly evidenced, despite this being required under policy. Triage practices were not consistently applied, with only 62% of records showing clear separation between SPR and triage activities.

The review also identified that 46% of reassessments may not have been necessary, with 37% of outcomes and 26% of records indicating that needs could have been addressed through the SPR process. Reassessment outcomes were mixed, with some resulting in no change, cancellation or pending status.

Repeat activity was observed in 28% of records, suggesting that initial decisions did not always resolve the older person's needs. These findings indicate a need to strengthen documentation quality, application of the significant change threshold, and decision-making between SPR and reassessment pathways.

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Assessments Assurance – Desktop Review Report

1. Overview

This report summarises a desktop review of 300 Support Plan Reviews (SPRs) completed between 1 February and 27 February 2026. An SPR checks whether an older person's current support plan and aged care services still meet their needs.

The purpose of the review was to assess whether the SPR process was being conducted in accordance with relevant policy guidance, including whether progression from SPR to a reassessment occurred only when necessary. The review examined whether records clearly explained why a new assessment was required, whether there was sufficient evidence of a significant change in the older person's situation, whether triage[1] was appropriately undertaken and documented, and whether some changes could have been managed through the SPR process instead.

Overall, the review found that records were not always clear enough to support decision-making. The main issues related to documentation quality, evidence supporting the need for new assessments, the correct use of the SPR process, triage practices, repeat reassessment and SPR activity, and whether reassessments were initiated where they may not have been necessary.

2. Methodology

In February 2026, several Assessment Organisations (AOs) recorded a high proportion of SPRs resulting in a 'new assessment required' outcome. A new assessment outcome is expected to be supported by evidence of a clear 'significant change', as defined under section 64 of the *Aged Care Act 2024* (the Act), the Aged Care Rules 2025, and Chapter 10.1 of the Aged Care Assessment Manual:

- a carer for the individual has permanently ceased to provide some or all care to the individual;
- the individual has experienced an event, or a decline in their condition, that is likely to mean that they will require:
  - more frequent access to a service they are already receiving, or
  - access to a service they have been approved for but are not currently receiving, or
  - access to new services not covered in the older person's access approval.

The review sample drew on February 2026 SPR activity data across 24 AOs, including the number of reviews completed and their outcomes. On average, 52% of SPRs resulted in a new assessment. Ten AOs above this rate were selected for a detailed desktop review, with 300 Aged Care IDs selected for review. All records reviewed had an outcome of 'new assessment required' and covered a range of referral pathways and presenting circumstances.

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[1] Triage refers to the structured process of determining the most appropriate next step following a review and should be undertaken separately from the SPR and clearly documented to support decision-making.

Records where policy guidance clearly supported a new assessment (such as hospital discharge, end-of-life pathway, residential care and transitional care) were excluded from the sample.

The sample was allocated proportionately across AOs, with higher representation from those with greater volumes of assessments and higher conversion rates from SPR to reassessment.

Supporting documentation refers to any information recorded within the SPR or attached to the older person's record that is intended to explain or justify the decision to progress to a new assessment.

The review assessed whether records:

- clearly documented the rationale for initiating a new assessment
- demonstrated a significant change in the person's circumstances
- showed whether the person's needs could have been managed through the SPR process.

Findings are based on what was recorded at the time of review. They do not determine whether a change in need occurred, only whether it was clearly documented.

3. Findings

Summary of findings

The review identified documentation gaps across a substantial proportion of the 300 SPRs reviewed with many records not clearly outlining why a new assessment was required. In some cases, it was unclear whether the older person had been contacted, whether they agreed to the proposed next steps, what changes had occurred in their needs, or why the matter progressed from an SPR to a new assessment.

Overall, 57% of records had documentation issues. This included 32% that did not meet the expected standard for SPR documentation and 33% where review and triage activities were not clearly distinguished, making decisions difficult to interpret from the record alone. Supporting documentation was present in 76% of records; however, this did not consistently demonstrate a clear or evidence-based rationale. In some cases, records stated that the older person's needs had changed without describing the nature of the change or how it met the threshold of a significant change. In other cases, attached documentation primarily referred to service limitations, such as existing package funding pressures, rather than providing evidence of a change in the person's circumstances.

Triage was undertaken separately from the SPR in 62% of records, indicating that in a substantial proportion of cases, triage and review activities were combined or not clearly documented.

There was variation between AOs in the proportion of SPRs resulting in reassessment, with some AOs recording conversion rates above 60%.

In 27% of records, a significant change in the person's circumstances was not clearly documented to justify a new assessment. In these cases, the rationale often related to service access, provider availability, funding pressures, or requests for additional services, rather than a clearly recorded change in need.

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Departmental reviewers assessed that 46% of records may not have required a new assessment. This included 26% of records where reviewers explicitly identified that the outcome could have been achieved through the SPR process. These findings highlight an opportunity to strengthen the use of SPRs and improve the clarity of the rationale before progressing to reassessment.

Reassessment outcomes varied across the reviewed records. While 44% resulted in higher-level care and 31% in adjusted services, 4% resulted in no change, 6% were cancelled, and 12% were still awaiting completion at the time of review. This indicates that not all reassessments led to a clear change in support.

Further, 28% of records had an additional SPR or assessment scheduled or completed after the reviewed activity, suggesting that initial decisions may not have fully addressed the older person's needs or required further follow-up.

A specific concern was identified in s47G(1)(a) records. Of the SPRs reviewed, 38% indicated that no contact had been made with the older person, despite recommending a new assessment or additional services. Of these, 5% of reassessments were later cancelled, 21% remained pending at the time of review, and 23% proceeded to completion. This highlights the risk that some outcomes may not have been informed by the older person's current needs, preferences, or agreement.

The Assessments Assurance Section is following up with s47G(1)(a) to better understand the circumstances and determine whether further clarification, support or action is required.

4. Recommendations

s47C



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s47C



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