# Australian Government Department of Health and Aged Care banner

# Disability Support for Older Australians (DSOA)

# Client Information Form

The Department of Health and Aged Care is collecting information on DSOA clients which will help inform the future of the DSOA Program beyond 31 December 2023.

You do not need to complete this form if your client has had an I-CAN assessment.

Please return completed forms to [DSOACompliance@health.gov.au](mailto:DSOACompliance@health.gov.au)

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| 1. | Client ID | | Click or tap here to enter text. |
| 2. | Client name | | Click or tap here to enter text. |
| 3. | Living arrangements | | Choose an item. |
|  | Supported Independent Living Arrangements | ***How many residents does the client live with?*** Click or tap here to enter text.  ***Is it a Group Home or independent unit/townhouse?*** Click or tap here to enter text.  ***Are there other DSOA clients who live in the accommodation?*** Click or tap here to enter text.  ***Is it Specialist Disability Support Accommodation?*** Click or tap here to enter text. | |
| 4. | Primary disability | | Choose an item.  If other Click or tap here to enter text. |
| 5. | (If applicable) Secondary disability | | Choose an item.  If Other Click or tap here to enter text. |
| 6. | Health Issues  *Eg diabetes, arthritis* | | Click or tap here to enter text. |
| 7. | Informal support | | ***Does your client receive informal support from family or friends?***  Click or tap here to enter text.  ***How much informal support do they provide?***  Click or tap here to enter text. |