

ASSISTANCE WITH CARE AND  
HOUSING FOR THE AGED PROGRAM

**PROGRAM MANUAL**

**Version 1 - July 2012**

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# 1 Preface

This Program Manual (Manual) provides the framework for the implementation and administration of the Assistance with Care and Housing for the Aged (ACHA) Program and delivery of services provided under the ACHA Program.

This Manual has been developed by the Department of Social Services (Department) for Organisations funded from 2012-13 to 2014-15 to provide services through the ACHA Program.

This Manual replaces the previous ‗ACHA Guidelines‘ issued in June 1999, and revised in March 2008. The Manual is available on the Department of Social Services website.

The Department of Social Serviceds reserves the right to amend this document from time to time, by whatever means it may determine in its absolute discretion and will provide reasonable notice of these amendments.

Organisations will be advised as necessary of any updates by email and providers will be responsible for ensuring that the information contained in the manual is kept up to date.

Feedback on the Manual is welcomed. Organisations can post their feedback via the ACHA

mailbox at [ACHA@dss.gov.au](mailto:ACHA@dss.gov.au)

# 2 Introduction

## 2.1 Purpose of this Program Manual

This Program Manual is intended to assist Organisations, and their staff, providing services funded under the Assistance with Care and Housing for the Aged (ACHA) Program, by providing an explanation of the operational aspects of ACHA service provision.

This document must be read in conjunction with the Funding Agreement. The new

Departmental Funding Agreements consist of:

* The Aged Care Funding Terms and Conditions (Agreement); and
* Program Schedule for Aged Care Funding (Schedule).

Organisations should be familiar with those provisions.

The Program Manual forms part of the Funding Agreement between the Australian Government and the funded Organisation for ACHA and sets out the specific requirements that the funded Organisation is obliged to provide as well as the accountability requirements to demonstrate effective and efficient use of Australian Government funding.

## 2.2 Acronyms

Acronyms used in this manual are listed below:

CACP Community Aged Care Packages

ACHA Assistance with Care and Housing for the Aged

EACH Extended Aged Care at Home

EACHD Extended Aged Care at Home – Dementia eFAR Electronic Financial Accountability Report FAR Financial Accountability Report

HACC Home and Community Care Program

SAR Service Activity Report

## 2.3 Definitions

Note: capitalised terms used in this Program Manual which are not defined in the below definitions have the same meaning as in the Agreement.

| **Definition** | **Description** |
| --- | --- |
| Action Plan | A plan that includes, but is not limited to, the following:   * the client‘s goal for their situation; * the housing and (if required) community care options for the client; * any proposed referrals to other services; * any community resources available to the client; * requirements for outcome monitoring and assessment; * a client closure plan; and * assessment of the client‘s ongoing needs for support. |
| Care Leaver | A Care Leaver is a person who was in institutional care or other form of out-of-home care, including foster care, as a child or youth (or both) at some time during the 20th century. Care Leavers include Forgotten Australians, former child migrants and people from the Stolen Generations. |
| Culturally and Linguistically Diverse (CALD) | Cultural and linguistic inclusion recognises the broader community and reflects Australia‘s various cultural backgrounds and respect for people with a disability, the aged, sexual persuasion, as well as the Indigenous population.  For the purposes of the ACHA Program, clients may be defined as CALD where they have particular cultural or linguistic affiliations due to their:   * place of birth or ethnic origin; * main language other than English spoken at home; and/or * proficiency in spoken English. |
| Dementia | Dementia is a term used to group diseases that are characterised by the progressive impairment of brain functions, including language, memory, perception, personality and cognitive skills. |
| Financially or Socially Disadvantaged | Individuals who, for whatever reason, are without ongoing financial support as a result of incurred debt, unemployment, age or a disability. These individuals may also be socially vulnerable as a result of perception or inaccessibility, or have a tendency for self isolation. |
| Funding Agreement | The Funding Agreement comprises the Terms and Conditions for Aged Care Funding, the Program Schedule for Aged Care Funding, including any Guidelines specified in Annexure A of the Program Schedule, and this Program Manual. |
| Funds | Funds are the monies granted, collected or generated as part of the total income for the ACHA Program. It includes Funding provided by the Department, client fees, interest earned and other monies generated as part of the ACHA Program. |
| Guided Referral | The provision of information to a client about available services and Organisation details, with follow-up with the client to ensure that the arrangements have been made for the client to receive assistance. |
| Homeless | Homeless means people who are:   1. without any acceptable roof over their head e.g. living on the streets, under bridges, in deserted buildings etc. (absolute homelessness or ‗sleeping rough‘); 2. moving between various forms of temporary or medium term shelter such as hostels, refuges, boarding houses or friends; 3. constrained to living permanently in single rooms in private boarding houses; or 4. housed without conditions of home e.g. security, safety, or adequate standards (includes squatting). |
| Housing Stress | The Australian Institute of Health and Welfare defines ‗housing stress‘ as households which spend more than 30 per cent of their household income on housing costs. Low-income households in housing stress are of particular concern since the burden of high housing costs reduces their ability to meet their other living expenses. |
| Low Income | For ACHA purposes, ‗Low Income‘ is equivalent to:   * incomes in the bottom two-fifths of the population; OR * the maximum gross income or less necessary to qualify for or retain a Low Income [Health Care Card](http://www.centrelink.gov.au/internet/internet.nsf/payments/conc_cards_iat.htm), as issued by Centrelink whichever amount is greater. |
| Not Having Secure Accommodation | For the purposes of the ACHA Program, Not Having Secure Accommodation refers to accommodation where the ACHA target group member‘s tenure is precarious or there is a likelihood that they will have to move on because of an escalation in rental cost, exploitation or unsuitability of the accommodation for their needs. This may include boarding and lodging arrangements, public housing and staying with friends or relatives. It may also include accommodation owned by the client from which they are in immediate circumstances of losing ownership and  accommodation rights. |
| Older People | Older People are defined as people aged 65 years and over and Aboriginal and Torres Strait Islander people aged 50 years and over. |
| Organisation | The legal entity with whom the Commonwealth has entered into a Funding Agreement for provision of ACHA services for eligible clients. An Organisation may hold legal responsibility for several ACHA Service Outlets, or it may only hold one Service Outlet. |
| Prematurely Aged | People whose life course, such as active military service, homelessness or substance abuse, has seen them age prematurely. The Supported Accommodation Assistance Program (SAAP) defines older homeless people as aged 50 years and over for non-Indigenous people and aged 45 years and over for Indigenous people. |
| Primary Clients | Primary Clients means the sole client or the older client in a household who meets the requirements listed under the target group as specified in section 4, Service Delivery‘. |
| Rent Assistance | A Commonwealth housing assistance program whereby a benefit is paid to Low Income people to assist in obtaining accommodation in the private rental market. |
| Renting | Renting means payment for accommodation that is not owned by the Primary Client or Secondary Client and where the owner has a right to withdraw the right to accommodation for any reason, after providing a period of notice. |
| Service Outlet | The office, centre or physical location through which the ACHA service is provided. Some Organisations may operate more than one Service Outlet. |
| Secondary Clients | Secondary Clients means spouses, children and other dependants who share the housing situation of the Primary Client and whose relationship with the Primary Client requires continuation of co-habitation. |
| Special Needs | People with Special Needs are defined in the *Aged Care Act 1997* and Aged Care Principles as:   * people from Aboriginal and Torres Strait Islander communities; * people from non-English speaking (CALD) backgrounds; * people who live in rural and remote areas; * people who are Financially or Socially Disadvantaged; * people who are Veterans (of the Australian Defence Force or an allied defence force), including a spouse, widow or widower of a veteran; * people who are Homeless, or at risk of becoming Homeless; and * people who are Care Leavers. |
| Standard Chart of Accounts | The Standard Chart of Accounts (SCOA) is an agreed list of account categories for use by all Australian governments in their dealings with not-for-profit organisations. |

# 3 ACHA Program Overview and Policy Context

## 3.1 ACHA Program – Introduction

The ACHA Program was established during the 1992-93 Budget period as a three-year pilot program to trial approaches aimed at assisting Financially or Socially Disadvantaged Older people who are Renting or who are Homeless to meet both their accommodation and care needs. It is now a continuing program.

## 3.2 Objective of the ACHA Program

The objective of the ACHA Program is to help eligible clients, who are at risk of becoming Homeless or are Homeless, to remain in the community through accessing appropriate, sustainable and affordable housing and linking them where appropriate, to community care.

For information on eligibility, please see section 4.2, ‗Eligibility‘.

## 3.3 Core Functions

The ACHA Program provides linkage assistance with care and housing, but does not provide direct care or ongoing support. The program links clients to the most appropriate range of housing and care services in order to meet their immediate and ongoing needs.

It is a flexible service which is based on priority, and each client‘s length of assistance differs according to their level of need. As a result, there is no set time limit for provision of this service. However, if care needs appear to be long term, a permanent referral to the most appropriate care or housing service may be required.

## 3.4 Assistance with Care and Housing

The broader goal of ACHA extends beyond assistance with housing to include helping people to remain in the community. Service Outlets achieve this through developing links with other care services and providing a referral service for clients to those agencies that offer care and support services. These may include, but are not limited to:

* Home and Community Care Program services (HACC);
* Aged Care Assessment Program (ACAP);
* Community Aged Care Packages (CACP);
* Extended Aged Care at Home (EACH) and EACH Dementia (EACHD);
* state and territory services;
* local government services;
* Health care services (including therapy);
* Veterans‘ Home Care (VHC) services;
* Commonwealth Carelink services;
* residential care options as appropriate; and/or
* other services appropriate to the needs of the client, such as police and legal services, other aged and community services, medical and therapeutic services, financial services, culturally specific programs, counselling, mental health services, drug and alcohol treatment services, disability support programs and so forth.

The ACHA Program links clients to existing accommodation services. The type of assistance may vary between services and the type of accommodation options are subject to availability.

### Housing Types

The range of housing types may include the following:

**Abbeyfield style accommodation**: A shared, supported housing model for older people with private rooms and en-suite bathrooms for up to 10 people who share a common kitchen, living and dining rooms and have meals provided.

**Boarding house**: A form of low-cost accommodation with a number of rooms rented to individuals. Boarding houses have shared bathroom facilities and provide meals and, in some cases, other support services.

**Community housing:** An alternative social housing model to public housing jointly funded and managed by a non-government or not-for-profit organisation.

**Cooperative housing:** A generic term for housing developed and/or managed by a not-for- profit cooperative. This is not necessarily social housing.

**Clustered housing**: A form of housing for the aged where separate units are organised into clusters to facilitate social contact.

**Crisis accommodation**: Short term accommodation (usually homeless shelters or hostels)

for people without, or displaced from, stable housing.

**Independent accommodation:** Public housing or private rental accommodation occupied on an independent and relatively permanent basis by an individual or household.

**Independent living units (ILUs):** Segregated housing (predominantly cottages or units) for older people which provide a sheltered community or village environment. They often provide other services such as a meeting room, an emergency alarm in each unit, and an

on-site caretaker/manager. ILUs are often co-located with residential aged care services and located in areas which provide good amenities for residents.

**Residential aged care**: Accommodation for people deemed eligible for high-level and

low-level residential aged care, as determined by an Aged Care Assessment Team (ACAT) assessment. Facilities receive subsidies from the Australian Government and are regulated by the *Aged Care Act 1997.*

**Rooming house**: A form of low-cost accommodation (similar to a boarding house) with a number of rooms rented to individuals and providing shared bathroom facilities, but no meals or other support services.

**Supported housing:** Accommodation that includes the provision of or coordination with social services to support people with high or complex needs.

**Transitional accommodation**: Medium-term accommodation to assist homeless people in the transition from short term crisis accommodation to independent living.

**Transportable homes:** Caravans, mobile homes, and modular homes capable of transportation – usually located on rented lots in mobile home parks.

## 3.5 Policy Context

### Reform of Community Care Services

As part of the National Health Reforms, the Council of Australian Governments (COAG) agreed that from 1 July 2012, the Australian Government will take full funding and program responsibility for basic maintenance, support and care services for Older People previously delivered through the Home and Community Care Program (HACC). This applies to people aged 65 years and over and Aboriginal and Torres Strait Islander people aged 50 years and over. This change in responsibility applies in all states and territories, except Victoria and Western Australia.

From 1 July 2012, the Australian Government is funding and administering the Commonwealth HACC Program through direct funding arrangements with existing HACC Organisations who deliver services to Older People. State and territory governments are continuing to fund and administer basic maintenance, support and care services for people aged 64 years and less, and Aboriginal and Torres Strait Islander people aged 49 years and less.

The Australian Government‘s Commonwealth HACC Program is directed towards assisting:

* frail Older People with functional limitations as a result of moderate, severe and profound disabilities; and
* the unpaid carers of these frail Older People.

The target population is frail Older People living in the community who, without the basic maintenance, support and care services provided under the Commonwealth HACC Program, would be at risk of premature or inappropriate long term residential aged care.

Transferring full responsibility for aged care services to the Commonwealth will combine services with existing community and residential aged care programs, and create a national aged care system. This will allow for a better integrated aged care system to be built, with links to health and hospital services, so that service delivery is coordinated to support older people to move through the aged care system.

### A New 1800 Number for Aged Care

On 1 July 2011 the Government introduced a new 1800 number (**1800 200 422**) which is being answered by Commonwealth Respite and Carelink Centres (Centres). The new 1800 number is designed to create a single point of entry to help people find information about aged care.

The new national phone number is a first step to create a single point of entry to information about aged care. However, the existing pathways will remain. Restructuring of the 1800 number will be undertaken over the next two years.

The Organisation should provide clients with the 1800 number when clients enquire about or request information on aged care services that are not related to the ACHA Program or housing issues in general.

### Aged Care Information Services

The [Aged Care Australia website](http://www.agedcareaustralia.gov.au/), www.agedcareaustralia.gov.au, includes information about aged care services for the growing number of people who like to find their information online.

The Organisation should provide clients with the [aged care website address](http://www.agedcareaustralia.gov.au/), www.agedcareaustralia.gov.au, when clients enquire about or request information on aged care services that are not related to the ACHA Program or housing issues in general.

The Department produces a number of publications that are available to the public at no charge. Organisations who wish to order bulk copies of these publications can order these by contacting the 1800 number. Please note that the supply of publications will depend on the availability of stock.

### Productivity Commission Report – Caring for Older Australians

The Productivity Commission‘s final report into the aged care sector, [*Caring for Older Australians*](http://www.pc.gov.au/projects/inquiry/aged-care/report), was released on 8 August 2011. The final report provided analysis of the aged care sector and detailed proposals for aged care reform.

In undertaking the inquiry, the Commission developed options for further structural reform of the aged care system so this system can meet the challenges facing it in coming decades.

Further information on the inquiry can be found on the [Productivity Commission‘s](http://www.pc.gov.au/) website at

http://www.pc.gov.au or by contacting the Commission on (02) 6240 3223.

### “Living Longer. Living Better.” – the Australian Government‟s Aged Care Reform Package

On 20 April 2012, the Australian Government announced a comprehensive 10 year package to reshape aged care. It will build a better, fairer, sustainable and nationally consistent aged care system to meet the social and economic challenges of the nation‘s ageing population.

The Government recognises the need for fundamental reform of the aged care system in order to ensure that it continues to provide high quality care and can respond to future challenges.

Further information on the comprehensive reform package can be found on the [Department of Social Services](http://www.dss.gov.au/agedcarereform) website at www.dss.gov.au/agedcarereform.

## 3.6 Other Program Manuals

Staff should also refer to the appropriate/applicable Program Manuals for information about additional programs administered by the Organisation, e.g. Home and Community Care, Community Aged Care Packages and the Residential Care Manual.

# 4 Service Delivery

## 4.1 Overview

Clients should be assessed for their eligibility for ACHA services, along with their level of need. This section outlines eligibility for support and assistance, target groups and service delivery.

## 4.2 Eligibility

The primary target group for the ACHA Program is Older or Prematurely Aged people on a

Low Income who:

* are Homeless; or
* may be at risk of becoming Homeless as a result of:
  + experiencing Housing Stress; or
  + Not Having Secure Accommodation.

The person being assessed for assistance under the program and who must meet the above eligibility requirement is regarded as the Primary Client.

The Primary Client may have dependants and these are regarded as Secondary Clients. Secondary Clients do not need to meet the eligibility requirements and are entitled to receive the same range of Guided Referral assistance as Primary Clients as the stability of the client household is important to the long term viability of future accommodation arrangements.

## 4.3 Consumer Engagement and Participation

The Organisation must assess potential clients on their eligibility for services and their level of need. The Organisation must focus upon the needs and choices of the client, their carer, family or advocate. Clients must be engaged, assisted and encouraged to identify their particular needs and the type of assistance and support which they feel is most useful.

As the flexibility of the ACHA Program meets client needs through utilising existing services and/or providing a range of basic supports to clients as a short term service, the Organisation must assess each client‘s level of need on an individual basis. There are no set or prescribed times to link clients to services and each individual‘s length of assistance differs according to their level of need.

When determining client goals, the Organisation must include acknowledgement of the preferences of the client. Client goals must be reviewed at an appropriate stage as determined by the client and the Organisation. If possible, follow-up strategies should be established for those clients exiting the program.

## 4.4 Priority Areas

Some localities have greater numbers of people from the ACHA target group. Alternative support services can also be lacking in the priority areas for the ACHA Program. Organisations should, therefore, give priority to areas or localities where:

* a high proportion of people are not in secure housing or are in temporary housing;
* affordable housing options are limited due to the limited availability of public housing, cooperative housing or other accommodation models (e.g. lodging house, boarding house etc.);
* residential aged care services are considered inappropriate in meeting local needs. For example, these services may not be appropriate for some Aboriginal and Torres Strait Islander communities or Culturally and Linguistically Diverse (CALD) communities.

## 4.5 Referral

Clients may be referred to ACHA from a range of sources, including:

* general practitioners
* Aged Care Assessment Teams
* social workers
* geriatricians
* hospitals
* community health workers

Clients do not need a written referral. Clients may also self-refer or be referred by a carer or family member.

## 4.6 Assessment

The Organisation must initially assess clients to establish their housing and care needs. The initial assessment must identify goals in relation to housing and care linkages and actions in the form of an Action Plan for each client, as well as an exit goal and strategy for clients to

be able to successfully exit the ACHA Program. Families or carers should be consulted

(where appropriate) when developing the Action Plan.

The assessment process must include, but is not limited to:

* interviewing Primary Clients referred to or arriving at the ACHA Service Outlet;
* assessing their risk of homelessness to determine priority for assistance;
* creating an Action Plan to determine their accommodation and care needs and make the appropriate referrals required;
* determining the impact of any Secondary Clients on the sustainability of housing on the Primary Client;
* assisting the Primary Client to locate, apply for, and, relocate to housing in an area suitable to the needs of Primary and Secondary Clients;
* referring Primary and Secondary Clients to relevant housing services to assist the Primary Client to maintain secure housing; and
* referring Primary and Secondary Clients to relevant community care services to assist clients to maintain their independence.

The Organisation must record basic information about all clients, including age and gender as well as CALD status and whether they identify as Aboriginal or Torres Strait Islander people.

The Organisation must provide information on its complaints and feedback policy. Please see section 16 of this Program Manual, ‗Complaints and Feedback‘, for further information.

The Organisation must complete an outcome assessment for each client on termination of the ACHA-client relationship to confirm the achievements, or otherwise, of the Action Plan. A copy of the outcome assessment at discharge must be filed and the original sent to the client or, if appropriate, the person or organisation responsible for the ongoing care of the client.

## 4.7 Linkage to Services

As part of the Action Plan, the Organisation must provide Guided Referral of the client to appropriate housing and/or care services. For clients with Special Needs, the Organisation must give particular consideration to specific actions that will assist them in addressing the special circumstances of their housing and care needs. In addition, Organisations must understand and adapt to the demographics and needs of the community around them to ensure that service information reflects the community‘s needs and the availability of the services.

As the primary aim of the ACHA Program is to assist in obtaining secure and appropriate housing, Guided Referral under the ACHA Program is considered complete once arrangements have been made for the client to receive this assistance. This referral process does not extend to ensuring clients follow through with care appointments or arrangements, beyond the first appointment with the organisation which is provide the care or service.

Organisations are funded to link clients to appropriate specific services in their area. They may provide clients with direct contact details for these services, or where judged necessary, provide active liaison and representation on behalf of clients.

# 5 Organisation Planning, Management and Administration

## 5.1 Overview

The ACHA Program is funded by the Australian Government. Accordingly, there are a number of responsibilities that the Organisation must abide by. These responsibilities are specified in the Funding Agreement, which includes documents that have been incorporated by reference, including this Program Manual.

## 5.2 Organisation Policies

Organisations must develop appropriate internal policies, protocols and procedures in line with relevant Commonwealth and state and territory legislation, to support quality service provision including:

* facility emergency procedures such as evacuation;
* workplace health and safety;
* procedures to address concerns about client welfare or possible client abuse;
* police checks and renewals (further information below);
* reportable incidents (further information in section 8);
* risk management (further information in section 11);
* no response‘ guidelines (further information in section 13.4);
* confidentiality and privacy (further information in section 15);
* complaints and feedback about services (further information in section 16);
* appropriate qualifications or skill sets of staff and staff development programs; and
* staffing contingencies for holidays, training days, sickness or other instances of short staffing.

Organisations may also choose to have protocols on other aspects of service provision, such as marketing of ACHA services and local stakeholder engagement.

## 5.3 Responsibilities of the Organisation

The Organisation must:

* be committed to the principles and aims of the ACHA Program;
* have links with relevant organisations/agencies providing care and/or housing services to Older People, and those who are Prematurely Aged, who are Homeless or are at risk of becoming Homeless;
* be committed to the philosophy and goals of community service provision, ensuring flexible services are tailored to meet the needs of consumers;
* be able to supervise, provide case management and manage proactive service development strategies;
* provide a structure which facilitates integration of this service with other relevant services;
* provide peer and mentor support to ACHA staff;
* enable access to relevant training for ACHA staff;
* develop and implement policies and practices that ensure the safety of clients as a result of their relationship with the ACHA provider (e.g. transporting clients, freedom from abuse and neglect);
* ensure all requirements relating to privacy and confidentiality of client information are met;
* ensure accountability while encouraging an innovative approach;
* have job description(s) outlining the duties of the ACHA worker(s) consistent with the Funding Agreement;
* have effective protocols for each Service Outlet for referral procedures, access arrangements and relationships with other service organisations and agencies;
* have appropriate levels of insurance in place for each Service Outlet (in particular, workers‘ compensation, public liability and/or professional indemnity as required by relevant legislation) as set out in the Funding Agreement;
* have a protocol for the support, development and supervision of the ACHA worker(s) in each Service Outlet;
* have a budget for the services in each Service Outlet; and
* demonstrate management of each Service Outlet listed in the Program Schedule.

## 5.4 Rights and Responsibilities

The Australian Government is committed to promoting and protecting the civil, human and legal rights of the consumer. It has developed a Charter of Rights and Responsibilities for a range of services to ensure that individual consumer rights are accepted and implemented as an integral part of service provision. Organisations must abide by the *Charter of Rights and Responsibilities for Community Care* (Appendix 1).

## 5.5 Staffing and Training

### Organisation’s Responsibility for Staffing and Training

Organisations are responsible for ensuring staff and volunteers have appropriate skills, knowledge and attributes, and receive adequate training with an emphasis on quality care and service. Organisations are also responsible for ensuring staff members are trustworthy, have integrity and will respect the privacy and dignity of clients.

### Qualifications of Staff

There are a range of service types delivered under the ACHA Program, and the Department recognises that qualifications and skills required vary across services and jurisdictions. Organisations must be aware of any registration, accreditation or licensing requirements for the professions from which they draw their workforce and must ensure their personnel (and any Subcontractors) comply with these requirements.

All Organisations should be encouraging staff to undertake vocational and other formal education and training to enhance the skill base of the ACHA workforce.

### Volunteers

Organisations may utilise volunteers in the operation of their service. If volunteers are used, Organisations must ensure that volunteers have the necessary knowledge and skills to undertake their duties.

Organisations who utilise volunteers should have policies and procedures in place regarding management of their volunteer workforce.

Volunteer management policies and procedures should include any policy relating to volunteer reimbursement. The reimbursement of volunteer expenses will depend on the financial and human resources available to the Organisation. Policies should reflect the circumstances of the Organisation, such as remoteness, isolation, and other regional differences that can impact on their capacity to attract and retain volunteers.

## 5.6 Contractors

Where Organisations engage a subcontractor to deliver a service, this is defined in the Aged Care Funding Agreement as a Primary Subcontractor. Where a Primary Subcontractor subcontracts the delivery of ACHA services to another organisation, this is defined as a Secondary Subcontractor. Where a Secondary Subcontractor subcontracts the delivery of ACHA services, this organisation is also referred to as a Secondary Subcontractor.

All Primary Subcontractors and Secondary Subcontractors are required to be legal entities. The following are examples of legal entities:

* a company
* an incorporated association
* a body incorporated under other legislation
* an individual

### Primary Subcontractors

If an Organisation plans to utilise any Primary Subcontractors, they must notify the Department of the Subcontractor within 20 business days of entering into an agreement with that Subcontractor. The notification must include the Subcontractor‘s name and ABN, the tasks which the Subcontractor will complete under the Aged Care Funding Agreement and Program Schedule, the period of the subcontract and any other information requested by the Department.

### Secondary Subcontractors

In accordance with the Program Schedule, the Department consents to any secondary subcontracting arrangements which the Organisation or any Primary Subcontractor had entered into prior to 1 July 2012.

From 1 July 2012, if an Organisation plans to utilise any Secondary Subcontractors, or its Subcontractors plan to utilise any Secondary Subcontractors, the Organisation must request the Department‘s prior written consent of the Subcontractor **before an agreement is**

**entered into with that Subcontractor.** The request must include the Subcontractor‘s name

and ABN, the tasks which the Subcontractor will complete under the Aged Care Funding Agreement, the period of the subcontract and any other information requested by the Department.

## 5.7 Work Health and Safety (Previously Occupational Health and Safety)

Legislation previously referred to as Occupational Health and Safety (OH&S) has been replaced by Work Health and Safety (WHS) following the passing of the *Work Health and Safety Act 2011* in six of the nine jurisdictions. The Australian Government, Northern Territory, Queensland, New South Wales and the Australian Capital Territory have implemented the new legislation. Tasmania has passed the legislation, but has requested a delay in implementation until 1 January 2013. South Australia remains involved in the harmonising process and are continuing to debate the legislation. It is intended that the term OH&S will be incrementally replaced with WHS in all Australian Government, state and territory documents.

### Providing a Safe and Healthy Workplace

Organisations must provide a safe and healthy workplace for their employees and volunteers in accordance with relevant Commonwealth, and state or territory government WHS legislation, as well as WHS codes and standards.

In some cases, the workplace will be the client‘s home. Organisations are also responsible for addressing the safety of employees and volunteers delivering services to a client or carer in their home.

Organisations should also consider and assess WHS, Australian Building Standards and other local requirements, as these relate to their own offices and facilities, vehicles, and other physical resources used by their staff and volunteers.

### Making Others Aware of their Responsibilities

Employees are also responsible for ensuring their own safety, and the safety and health of others, including clients. Organisations must ensure that their employees and volunteers:

* have adequate WHS training
* are aware of their WHS responsibilities;
* comply with WHS requirements and instructions associated with the work being performed;
* use the appropriate equipment; and
* identify and report hazards, risks, accidents and incidents.

### Obligations to Document WHS Policies and Procedures

Organisations must have in place appropriate policies and procedures to reflect WHS

legislative requirements. Policies and procedures could relate to, for example:

* management of communicable diseases;
* minimising the risk of infection;
* safe lifting and transfer procedures;
* asbestos;
* fire safety; and
* first aid.

## 5.8 Requirement for a Police Check

All aged care programs funded by the Department, including the ACHA Program, now require police checks. Previously the ACHA Program has not had this requirement, but police checks will now be required. To allow time to implement the police checks arrangements, Organisations will have until **31 December 2012** to have all the police check requirements completed.

From 1 January 2013, Organisations must comply with the ‗Commonwealth HACC Program Police Certification Guidelines‘ (Appendix 3). Note that the Commonwealth HACC Program Police Certificate Guidelines will also apply to the National Respite for Carers Program (NRCP), Assistance with Care and Housing for the Aged (ACHA) Program, Day Therapy Centres (DTC) Program, Commonwealth Respite and Carelink Centres (CRCC) Program, the National Carer Counselling Program (NCCP) and the Carer Information and Support Service (CISS) Program.

A national criminal history record check (commonly known as a police check) is a process undertaken by the relevant state/territory police or the Australian Federal Police (for the Australian Capital Territory), which reveals whether an individual has been charged with and/or convicted of a criminal offence which has not been removed from their record under a

‗spent conviction‘ scheme. Police jurisdictions then provide a police certificate detailing any criminal offences, with the exception of any spent convictions.

## 5.9 Relocation of Services

Services may only relocate their premises with the prior written approval of the Department. Organisations must advise the Department of any proposed change to the location of a Service Outlet at least 30 business days prior to the relocation.

Requests for approval to relocate must be in writing and include reasons for the relocation and any impact this may have on clients and the provision of services. The Department will respond in writing regarding the approval. Relocations will generally only be approved if the services to clients are improved or unaffected.

The building from which the ACHA service is provided should meet the accessibility standards for people with physical disabilities. The Disability (Access to Premises – buildings) Standards 2010 (Premises Standards) commenced operation on 1 May 2011 and includes an Access Code for buildings. More information is available on the [Attorney-General’s Department](http://www.ag.gov.au/PremisesStandards) website at http://www.ag.gov.au/PremisesStandards .

## 5.10 Changing the Name of a Service

ACHA services may only be renamed with prior written approval from the Department. Organisations must advise the Department of any proposed change to the ACHA name at least 30 business days prior to the change. The Department will respond in writing regarding approval.

# 6 Material and Information

## 6.1 Overview

Organisations are encouraged to market their services to maximise awareness of ACHA services to the target group (as defined in Part 4.2 ‗Target Group‘ of this Program Manual), client referrers and the local community.

Any advertising or resource materials developed by the ACHA provider for local use must be approved in writing by the Department. The Organisation must forward copies to the Department at least two weeks prior to the proposed commencement of the advertising.

## 6.2 Acknowledgement of the Australian Government

Promotional material produced by Organisations must acknowledge the financial and other support received by the Commonwealth. The words ―Australian Government‖, ―Australian Government funded‖, or ―An Australian Government Initiative‖ are acceptable words. Alternatives such as ―Authorised by the Australian Government‖ must not be used.

Neither the Australian Coat of Arms (COA or Crest) nor Departmental branding can be used in promotional material developed by Organisations.

# 7 ACHA Funding

## 7.1 Overview

The Commonwealth provides ACHA Funding solely for the delivery of ACHA services according to the Funding Agreement between each Organisation and the Department.

## 7.2 Operational Funding

Operational funding is ongoing funding that Organisations receive annually for the term of their Funding Agreement to fund their day-to-day operations. Funding is awarded on a competitive basis through a funding round where Organisations are invited to apply for funding. Applications are assessed by the Department according to advertised criteria and recommendations for successful providers are made to the Minister with portfolio responsibility for Ageing for her/his approval.

ACHA funding allocations take into account equity in distribution of services and the capacity of providers to deliver quality services. Consideration includes that of demand in a region, existing services in the region, and regions where no services exist.

Once awarded Funding, Organisations must provide the services outlined in the terms and conditions of Funding in the Funding Agreement. The Organisation cannot make changes to the items specified in the Funding Agreement unless formal written approval has first been granted by the Department.

When new funding becomes available, it will be published on the [Department of Social Services](http://www.dss.gov.au/grants/open-for-application) website at http://www.dss.gov.au/grants/open-for-application.

Organisations delivering services under the ACHA Program are required to submit annual Financial Accountability Reports (FARs) and Service Activity Reports (SARs) to the Department, to demonstrate that Funds are being used in line with the purposes of the program and to show achievement against the desired outcomes.

## 7.3 One-off Funding

From time to time, the Department may offer one-off funding under the ACHA Program if there are sufficient unspent ACHA Funds that are returned to the program through the annual financial accountability reporting process. Existing Organisations may then have the opportunity to submit proposals for one-off Funds in a competitive process.

One-off funding, unlike operational funding, is a one-off grant provided to existing

Organisations for activities that meet the following criteria:

* the funding being sought is for a ‗one-off‘ project;
* the one-off project is consistent with the aims and objectives of the ACHA Program;
* the project is likely to improve service quality or Organisation performance or otherwise benefit ACHA clients; and
* the one-off project can be justified as a reasonable use of grant funding.

Projects might include activities such as workplace health and safety improvements, information technology upgrades, the purchase or replacement of appropriate equipment, or **minor** building modifications to improve client safety (such as the installation of a wheelchair ramp).

There are some key differences between one-off and operational funding processes. Under one-off funding processes:

* applications for one-off funding are only open to existing Organisations;
* the application process, guidelines etc. are not advertised nationally, although the process is still a competitive one. Instead, the Department provides existing Organisations with an application pack and invitation to apply;
* assessments include Organisation performance including the outcome of any previous one-off funding projects;
* financial viability assessments will not usually be required; and
* approval of recommended applications is usually by the Department‘s financial delegate.

Successful Organisations are required to execute **new** Funding Agreements and acquit the one-off Funds separately. Funds need to be expended within the financial year of the new agreement or formally committed by 30 June of that year.

## 7.4 Managing Funds

Funds paid to Organisations by the Commonwealth must be used only for the purpose of providing services specified in Funding Agreements.

If the Organisation receives any Other Contribution for the ACHA Program or allocates any Other Contribution to the ACHA Program, the Organisation is required to notify the Commonwealth. This notification is required to occur in the next Financial Accountability Report (FAR) the Organisation submits, following the receipt or allocation of the Other Contribution.

If an Organisation intends to close an ACHA service, the Department must be advised in writing immediately. The Department will liaise with the Organisation to help ensure a smooth transition out, in accordance with the Transition-Out Plan under the Funding Agreement, and continuity of care to clients. In addition, any Unspent Funding will need to be repaid to the Commonwealth. Please refer to section 12 ‗Activity Continuity‘ of this Program Manual for further information on Transition-Out Planning.

## 7.5 Establishment/Set Up Funds

Any Funds provided for establishing a new ACHA service must be spent on that Service Outlet and other agreed activities covered in the Funding Agreement. Assets purchased with establishment Funds should be covered by appropriate insurance and included in the Assets Register. If Funds allocated for establishment items are not spent during the initial three months, this must be identified on the next recurrent acquittal statement as committed

Funds.

## 7.6 Payment of Funding

The Department will pay Funding in accordance with the payment provisions set out in the

Funding Agreement.

The Commonwealth will issue Recipient Created Tax Invoices (RCTIs) in respect of the services provided by the Organisation for the Commonwealth insofar as those supplies are Taxable Supplies.

If the Department has overpaid or underpaid an instalment, the Department must be notified immediately in writing. The Department will undertake steps to rectify the over or under payment.

It is the responsibility of the Organisation to pay appropriate staff and/or Subcontractors that are involved in providing all or any of the services from the ongoing Funding.

Where an acquittal of Funds reveals Unspent Funds for the previous financial year, the Department may arrange for future ongoing payments to be reduced to offset the Unspent Funds. Where time does not permit this approach, the Organisation will be required to repay the Unspent Funds by cheque.

Any enquiries regarding payments should be directed to the Departmental state or territory

Program Manager.

## 7.7 Unspent Funds and Carry-overs

Unspent Funds are ACHA grant Funds, paid to the Organisation to deliver ACHA services for a particular financial year, and include any client fees which remain unexpended at

30 June of that financial year. Organisations will be notified of any Unspent Funds as part of

the annual acquittal process.

Unspent Funds will not be automatically carry-over into the next year. Unspent Funds will be recovered by reducing the next available grant payment through a funding variation,

following the audited financial acquittal. If no further grant payments are due, the Department

will raise an invoice to recover Unspent Funds.

However, in certain limited circumstances, an Organisation may be able to request a carry- over of Funds:

* for operational funding – where the Organisation can demonstrate that they received goods/services in the relevant financial year, but did not pay until the following year; and
* for one-off funding – where the Organisation can demonstrate that the Funds were committed at the end of the financial year.

Where one-off projects have not commenced by the end of the financial year nor have any formal commitments to proceed been given, then **no carry-overs will be considered**.

A request to carry-over Unspent committed Funds must be in writing detailing the Organisation‘s intentions with regards to the Funds. It must be submitted by **30 September** with the annual FAR. This allows sufficient time for consideration by the Department and for the Organisation to have adequate time to undertake the project before the end of the financial year. Only in exceptional circumstances will a carry-over request be considered after 30 September.

## 7.8 Variations and Indexation

At any time either party may suggest a variation to the services outlined in the Funding Agreement. The Department is not liable for any additional work undertaken, or expenditure incurred, unless the variation has been agreed to in writing by the Department.

The Department will provide written notification to Organisations of variations due to annual indexation. Such variations will be paid to the account nominated in the Organisation‘s Funding Agreement. Payments for indexation variations will be paid according to Departmental guidelines and policies and payment is at the discretion of the Department.

## 7.9 Managing Funding from the Department and Other Agencies

Organisations are required to separately manage the Funding provided by the Department and by other government agencies, i.e. federal, state or territory government agencies. In accordance with clause 13.1 of the Funding Agreement, the bank account into which the ACHA Funding is being paid does not need to be used exclusively for ACHA-related funding. However, Organisations **must** be able to track Funding relating to each of the activities defined in the Program Schedule.

## 7.10 Assets

Assets are defined in clause 54 of the Aged Care Funding Agreement. Assets purchased, disposed of, sold or written off, must be included in the relevant audited statements forwarded to the Department.

### Assets Acquired prior to 1 July 2012

Where Organisations possess Assets on 1 July 2012 that were acquired with Funding provided under the former ACHA Agreements, and had a value of $10,000 or more (including GST) at the time of acquisition, these Assets are specified as a class of Assets in the Program Schedule.

Organisations must continue to use this class of Assets in delivering ACHA services and to include these Assets in their Assets Register.

### Acquiring Assets from 1 July 2012

Where an Organisation wishes to use Funding to acquire an item with a value of $10,000 or

more (including GST), they must seek the Department‘s prior written approval.

Organisations should note that the Department will not approve the use of Funding for purchasing of Assets if an Organisation has already received funding for the same purpose under any other program. These requirements are set out in item H of the Program Schedule.

If the Department provides approval, the Organisation must use that Asset for delivering ACHA services. In addition, the Organisation must maintain the Asset, record the details of that Asset in their Asset Register and not dispose of or replace that Asset without further written approval from the Department, as set out in clause 31 of the Aged Care Funding Agreement.

From 1 July 2012, when using ACHA Funding to acquire and dispose of Assets, Organisations are expected to do so in a way that encourages open and fair competition, value for money, and fair dealing. When acquiring and disposing of Assets with ACHA Funding, Organisations should also note the requirements of clause 34 of the Aged Care Funding Agreement, which relate to conflict of interest obligations.

In addition, should an Organisation wish to use Funding to purchase or lease an item with a value of $22,000 or more (including GST), they must obtain:

* written quotes; or
* tenders in response to public invitation, from **at least three[[1]](#footnote-1)** suitable suppliers.

Assets purchased with alternative funding sources outside the ACHA Funding may be purchased and used for the delivery of ACHA services at the Organisation‘s discretion. Where these Assets are individual items with a value of $10,000 or more (including GST), they should also be recorded in the relevant section of the Assets Register.

### Disposal of Assets

Disposal of Assets acquired with grant Funds during the term of the Funding Agreement and use of any proceeds from such disposal requires prior approval in writing from the Department. Should the Service Outlet close down during the Activity Period, any Assets acquired with program Funding must be dealt with as notified by the Department. The Department may ask to see the closing Service Outlet‘s Assets Register. The Service Outlet‘s Transition-Out Plan should indicate those Assets to be transferred to a new outlet to ensure continuity of care and those Assets which would otherwise revert to the Commonwealth.

### Depreciation of Assets

Depreciation of Assets which have been purchased with Commonwealth funding is allowed, provided that these Assets have been listed on the Assets Register. They may be included as an expense in the Financial Accountability Reports (FARs) submitted to the Department.

Further information to support Organisations in submitting their FARs can be found in the eFAR User Guide on the Departments website.

## 7.11 Vehicles

The Department will consider any request for funding for a motor vehicle on its merit. Where leasing is available, it is the preferred option.

When determining whether to approve the use of ACHA Funding to lease or purchase a vehicle, the Department must consider the principles provided in the *Finance Management and Accountability Act* (1997), and the best option in the context of the Organisation‘s budget and the expenditure of Commonwealth monies.

**8 Notifiable Incidents and Issues**

If an Organisation is associated with an event that has, or may have, affected the health, safety and/or wellbeing of care recipients while under the care of staff, volunteers or contractors, the event must be reported to the Department. Organisations must report such events in a timely manner to their local state or territory office.

This requirement is set out in clauses 35 and 54 of the Aged Care Funding Agreement. In addition, the specific requirements for notices made under the Aged Care Funding Agreement are set out in clause 50.

There are two tiers of incidents which must be reported. First tier reportable incidents include, but are not limited to, a Serious Incident that causes:

* the unexpected death of any person;
* a serious injury to any person;
* an allegation of Significant Misconduct made by any person in relation to the Organisation or its personnel; or
* a fire, natural disaster, accident or other incident that will or is likely to:
  + prevent the delivery of all or part of an Activity;
  + result in the closure of premises, or significant damage to premises or property; or pose a significant threat to the health and safety of any person; and/or
  + cause harm or suspected harm to a client.

For first tier incidents, Organisations must immediately inform the Department in writing (email is acceptable) of the incident occurring or the Organisation becoming aware of the incident.

For second tier incidents Organisations must make this notice in writing (email is acceptable) to the Department within 72 hours of the incident occurring or within 72 hours of becoming aware of the incident.

Notification of incidents under the second tier provides an opportunity for the Department to be aware of and monitor the Organisation‘s management of the incident.

Examples of second tier reportable events or other incidents include, but are not limited to:

* criminal activity on the part of Organisation staff such as theft;
* minor accidents, including vehicle accidents where the Organisation is transporting the care recipient; and
* incidents that may bring negative media attention to the Organisation and/or the Australian Government as the funding body.

Organisations must have policies about how to respond if there is, or they suspect there is, assault, abuse or concern about risk of harm to a client.

Key considerations include:

* appropriate assessment, particularly where there is the suspicion or risk of abuse or harm. This may include discussions with the client in order to understand the situation so that appropriate assistance can be arranged;
* prompt provision of emergency ACHA services and linkage with other support services such as counseling, health services and social support; and
* contact information for emergency staff such as police, ambulance, crisis mental health teams, or other relevant services.

# 9 Local Stakeholder Engagement

Organisations should network with local stakeholders including other organisations, interest groups and relevant people in state and territory and local government agencies.

As a minimum, Organisations should:

* consult with relevant stakeholders in the development of their annual and longer-term business and strategic plans so that these plans reflect local needs and circumstances;
* have appropriate mechanisms to ensure ongoing links with information partners to share information; and
* ensure the complaints process is publicised.

**10 Service Development**

Organisations are well positioned to understand both the needs of clients and the demands on them as Organisations. For instance, knowledge gained about gaps in services should be used to contribute to the development of improvements in the service.

Organisations are expected to develop ACHA services to deliver responsive and effective services that meet the identified needs of the region. This may be through:

* involvement in regional or local planning processes to contribute information about needs for ACHA services;
* provision of advice to new and developing ACHA services on issues such as service design, operational protocols, staff recruitment and governance;
* participation in reviews or evaluation of programs and services to provide feedback and expert advice;
* offers to provide training and professional development for other organisations;
* ongoing advice about service management issues to other ACHA services; and/or
* communication to other organisations of any feedback and complaints that the ACHA services receive from clients. Conveying constructive feedback to Organisations can contribute to service improvement and responsiveness.

# 11 Dealing with Risk

## 11.1 Overview

Organisations of all types and sizes face internal and external factors and influences that make it uncertain whether and when they will achieve their objectives. ―Risk‖ is how exposed a person/organisation is to the chance of injury, litigation and/or loss e.g. failure to achieve objectives.

All Organisations must have a risk management plan, which they must present to the Department upon request. It is important in such a plan that risks are identified, analysed and evaluated to determine whether the risk should be modified by treatments and controls. Throughout this process, communication and consultation with stakeholders needs to be taken into account and ongoing monitoring and review must occur in order to ensure that no

further risk treatment is required. Risk management can be applied to an entire organisation, at its many areas and levels, at any time, as well as to specific functions, projects and

activities.

The management of risk enables an organisation to, for example:

* increase the likelihood of achieving objectives;
* encourage proactive management;
* be aware of the need to identify and treat risk throughout the service;
* improve the identification of opportunities and threats;
* comply with relevant legal and regulatory requirements and international norms;
* improve financial reporting;
* improve governance;
* improve stakeholder confidence and trust;
* establish a reliable basis for decision making and planning;
* improve controls;
* effectively allocate and use resources for risk treatment;
* improve operational effectiveness and efficiency;
* enhance health and safety performance, as well as environmental protection;
* improve loss prevention and incident management;
* minimise loss;
* improve organisational learning; and
* improve organisational resilience.

Risk management comprises the activities and actions taken to ensure that a service is conscious of the risks it faces, makes informed decisions in managing these risks, and identifies and harnesses potential opportunities.

Some risks are managed by appropriate insurances and indemnities while management of other risks, such as risks to the effectiveness of a government program, can be built into program design, Funding Agreements and various monitoring and governance mechanisms.

Organisations might wish to refer to the [Comcover *Better Practice Guide to Risk Management*](http://www.finance.gov.au)to develop their own templates to store their own risk management information. It is available at http://www.finance.gov.au/comcover/better-practice-guide.html

## 11.2 Insurance

The type and level of insurance is specified in the Funding Agreement. The Funding Agreement specifies that an Organisation must take out all insurances that are necessary to ensure that the Organisation‘s obligations under the Funding Agreement can be covered, including any obligations that may extend beyond the term of the Funding Agreement. Types of insurance include:

* Public Liability
* Worker‘s Compensation Insurance
* Professional Indemnity
* Building Insurance
* Third Party Insurance (if the vehicle is considered an asset)

Any insurance is required to be maintained for the Agreement Period as outlined in the Funding Agreement. If the policy is a claims made policy, the policy is required to be maintained from the Schedule Commencement Date to seven years after the Schedule Completion Date.

The minimum level of Public Liability required by the Department is $10 million. Professional Indemnity insurance is required by the Department and must be an

amount which is consistent with the outcomes of a risk assessment. The Organisation is required to perform a risk assessment for the purpose of identifying an appropriate

amount of insurance.

Insurance for building and contents and worker‘s compensation, are as required by the relevant state or territory legislation.

Appropriate cover, such as a form of volunteer accident insurance, is also advisable for volunteers if they provide services to, or in relation to, the Organisation.

The amounts of insurance coverage required can be varied in exceptional circumstances. Organisations must make a formal approach to the Department‘s state and territory offices as required.

The Commonwealth cannot provide advice on the type and level of insurance that Organisations should have, and Organisations should refer to their own insurance broker for advice on this.

Organisations must, on request, promptly provide to the Department any relevant insurance policies or certificates of currency for inspection. If relevant, copies of insurances that cover Assets funded under the Program may also be requested.

# 12 Activity Continuity

Continuity of service provision is a critical risk that the Commonwealth has to manage. Therefore, Organisations are required to develop and submit to the Department for approval, a Transition-Out Plan for each ACHA Service Outlet by 31 December 2012, as a risk treatment.

The aim of the Transition-Out Plan is to ensure that the obligations of both parties to the Funding Agreement, upon termination or expiry of the Agreement, are acknowledged and agreed, and that, where applicable, there will be minimal disruption of service delivery to clients. The Transition-Out Plan should address issues that enable the orderly transition of the services from the ACHA Organisation to the Commonwealth or its nominated alternate ACHA Organisation on expiry or termination of the Funding Agreement.

The Department can request an updated copy of the Transition-Out Plan at any time. Guidelines for the Transition-Out Plan can be found at Appendix 2 of this Program Manual.

# 13 Accountability and Reporting

## 13.1 Overview

The public funding which is provided to ACHA Organisations is to be used to achieve specified outcomes. Accountability arrangements are directly linked to the objectives of the ACHA Program.

The ACHA Program represents a substantial investment of public funds. To ensure that these funds are used appropriately, effectively and efficiently, Organisations are required to operate within an accountability framework that comprises this Program Manual and individual Funding Agreements.

The accountability framework accommodates a number of factors, including ensuring that:

* quality service is delivered;
* Program standards and expectations are met;
* service provision meets the identified needs of service recipients; and
* Funds are used according to the purposes specified in the Funding Agreements.

The key accountability requirements for Organisations are:

| **Report** | **Due to the Department** |
| --- | --- |
| Annual Financial Accountability Report  (FAR) | due at the end of September each  year or as per the Funding Agreement |
| Annual Service Activity Report (SAR) | due at the end of July each year or as per the Funding Agreement |

Both the FAR and the SAR are assessed by the Department to ensure that grant recipients are complying with their contractual obligations, and to ensure that project Funds have been used as intended and can be accounted for.

## 13.2 Financial Accountability Reports and the Acquittal Process

In the context of the standard funding process, the term ‗acquittal‘ refers to the process of assessing and reconciling both the financial and performance/progress reports submitted by the Organisation. This is done with a view to ensuring that the Organisation has satisfied their obligations as specified in the Funding Agreement.

Acquittal of a Funding Agreement is complete when the Department's responsible officer is satisfied that the evidence exists that:

* Funds have been used for the purpose intended in the agreement; and
* the Funds can be accounted for.

Annual information in the FAR should relate to a standard financial year (1 July – 30

June). The Organisation must have its accounts and records audited by a qualified external auditor at the end of each financial year in accordance with the electronic Financial Accountability Report (eFAR) process.

The ACHA Program will now use the eFAR system as used for other community care programs, such as the National Respite for Carers Program.

Further information to support Organisations in submitting their FARs can be found in the eFAR User Guide on the Departments website.

### Structure of the FAR

The FAR is comprised of up to five parts. More detailed information on these parts can be found in the eFAR User Guide. Note that not all types of FARs require all parts to be completed. The table below outlines the requirements for each FAR type.

| FAR component | Annual Report | Progressive Report | Adhoc Report | Final Report |
| --- | --- | --- | --- | --- |
| 1. Organisational Details | Yes | Yes | Yes | Yes |
| 2. Statement of Income & Expenditure | Yes | Yes | Yes | Yes |
| 3. Carry-overs of Underspends & One-Off Grants | Yes | One-off grants only | One-off grants only | One-off grants only |
| 4a. Segment Note in Audited General Purpose Financial Statements  **OR**  4b. Extraction of FMS with audit opinion | Yes | No | No | Yes |
| 5. Statement of Compliance | Yes | Yes | Yes | Yes |

### FAR Submission Requirements

Organisations are required to have their accounts prepared in accordance with Australian Accounting Standards Board (AASB) standards. Organisations are also required to have their accounts audited by an Approved Auditor as at 30 June of the applicable financial year, in accordance with the eFAR User Guide.

A responsible officer from each Organisation is required to sign the Statement of Compliance in Part 5 of the FAR. A responsible officer can be a person occupying the position of Chief Executive Officer or Chief Financial Officer of the Organisation, or a person authorised to execute documents on behalf of the Organisation and legally bind it.

FARs are to be submitted through the Aged Care Provider Portal. More information on the process for this will be available on the [Aged Care Provider Portal](https://www.ebiz.agedcare.gov.au).

An annual FAR will need to be completed for each Funding Agreement. For a FAR to be considered submitted, the Organisation must fill in and return the FAR with **all** relevant sections completed and with **all** the required signatures and certifications.

## 13.3 Service Activity Reports

One SAR is required each financial year. The SAR reports on the financial year from 1 July to 30 June is due to the Department by the 31st of July.

SARs provide information on service delivered, clients, hours of services delivered, qualitative data providing evidence of goal attainment, provide reasons for variations between services delivered and proposed service delivery in the Funding Agreement.

SARs are to be completed manually and lodged electronically (by email as scans) and in hardcopy. In the future electronic Service Activity Reports may be implemented.

## 13.4 ‘No response’ Protocols

Organisations must have a policy on how to respond when a client does not respond to a scheduled visit. As part of the development of nationally consistent protocols to deal with non-response from a client when a community care worker arrives to provide a scheduled service, in June 2008 the Ministerial Conference on Ageing (MCA) agreed that a Guide for Community Care Service Providers should be developed and implemented across jurisdictions. This guide can be accessed on the Department‘s website,

## 13.5 Software

Internet access will be necessary for all Organisations as financial reporting for the ACHA

will be completed and submitted electronically. Services are required to have software that is

compatible with the Department‘s. This includes the following Microsoft Office products: Word; Excel; Access and PowerPoint 2000 or more recent. An internet browser equivalent to Internet Explorer 6 or greater is also required.

Organisations should also have appropriate information technology to send and receive documents and information electronically. Access to the internet through broadband ADSL or other connection with similar capacity is preferable. The Department will be expanding electronic reporting for the ACHA Program in the future.

## 13.6 Performance Management

The Funding Agreement prescribes possible sanctions for Organisations that do not meet their performance management requirements. In addition to the sanctions prescribed in the Funding Agreement, there are other sanctions that the Department can seek to impose on

an Organisation. These include increasing Organisational reporting requirements (in order to better monitor performance) or instructing the Organisation to prepare and implement a

corrective action plan. Should an Organisation refuse to cooperate, the Department can rely

on the more severe sanctions legally enforceable under the terms of the Funding

Agreement.

The possible responses to a compliance breach that the Department may implement include, but are not limited to:

* **Request for explanation:** Depending on the nature of the non-compliance, the Department may formally write to the Organisation specifying the reasons that it considers the Organisation‘s performance to be unsatisfactory, and requiring the Organisation to respond within a specified timeframe setting out an explanation and any proposed remedial action.
* **Notice to remedy situation:** The Department may formally notify the Organisation that its performance is inadequate and specify a timeframe during which it must improve its performance. The notice will set out any sanctions the Department will impose on the Organisation if it does not rectify the situation within the specified timeframe.
* **Requirement to prepare corrective action plan:** The Department may require the Organisation to prepare a plan setting out how it plans to remedy the situation, an option that is more focused on improvement.
* **Increased Departmental reporting**: Organisations who have failed to fully comply with program requirements may, at the Department‘s discretion, be asked to complete more regular service activity or financial activity reports, or else be subjected to more frequent site visits – until such time as the Organisation becomes fully compliant.
* **Appointment of an independent expert:** The Department may ask the Organisation to engage an independent expert to assist it to become compliant with program requirements.
* **Suspension of payments:** The Funding Agreement empowers the Department to suspend payments to the Organisation where the Organisation fails to comply with the terms of its Funding Agreement.
* **Appointment of an administrator**: The Funding Agreement empowers the Department to appoint a Funds administrator to administer the Funds provided for under the Agreement, and provide assistance, support and advice to the board.
* **Termination of Funding Agreement:** The Funding Agreement empowers the Department to terminate the Funding Agreement where the provider fails to comply with the terms of the Funding Agreement.

# 14 Record Keeping

## 14.1 Overview

Organisations are responsible for managing information through good record keeping. Records must be kept about the performance of the services Funded under the Funding Agreement and in connection to progress against the aims, objectives and outcomes of the Agreement. Financial and client records form part of the records kept.

Records must be managed in accordance with the following legislation:

* *Privacy Act 1988*
* Australian Standard AS ISO 15489 - 2002, Records Management.

## 14.2 Financial Records

Financial records should be retained by Organisations for a minimum of 7 years from the last entry on the record, and if requested, records should be made available to the Commonwealth. Retention of financial records is essential to enable the Commonwealth to be assured that Funds have been spent for the purpose they were provided under the Funding Agreement.

## 14.3 Client Records

Records should be retained by Organisations for at least 7 years from the date of the last entry on the record.

Records should be kept secure and clients‘ privacy and confidentiality should be protected. Accordingly, a Organisation‘s record keeping practices should conform to relevant legislation such as the *Privacy Act 1988*.

The *Privacy Act* regulates the ways that ―personal information‖ is managed. ―Personal information‖ is information capable of identifying a person directly or by inference, including an opinion.

It can be recorded in a material form or otherwise. Personal information could include a person's name, address, date of birth, blood type, health diagnosis or Medicare number. The *Privacy Act* does not cover de-identified statistical data where individuals cannot reasonably be re-identified.

When handling personal information, Organisations must comply with:

* [*National Privacy Principles*](http://www.privacy.gov.au/law/act/npp) *–* http://www.privacy.gov.au/law/act/npp;
* [*Information Privacy Principle*](http://www.privacy.gov.au/law/act/ipp) *–* http://www.privacy.gov.au/law/act/ipp;
* industry privacy codes approved by the Australian Information Commissioner (approved privacy codes);
* state or territory legislation relating to personal or health information; and
* the *Privacy Act 1988*.

Other legislation which may apply to an Organisation‘s records includes the *Archives Act*

*1983*, the *Freedom of Information Act 1982*, and other legislation which authorises, or limits, access to records held by the Organisation.

When disposing of client records, the Commonwealth confidentiality and privacy acts should be consulted for the correct protocol.

Organisations must not disclose personal information, including client records, to the Commonwealth, other than for reporting which must be in de-identified form. However, personal information excludes the name(s) of the Organisation or any Subcontractors' names which the Organisation may choose to engage.

Under section 27.3 of the Funding Agreement, the Department may choose to disclose the name(s) of the Organisation or any Subcontractor at any time.

# 15 Confidentiality and Privacy

## 15.1 Confidentiality Overview

Organisations must:

* comply with the confidentiality requirements in the Funding Agreement;
* have policies and procedures to manage confidentiality of client information;
* have mechanisms for the secure storage of confidential information; and
* comply with any relevant state or territory legislation about personal health records and privacy.

## 15.2 National Privacy Principles and the Australian Information

**Commissioner**

Organisations are required to conform to the *National Privacy Principles*. The [Australian Information Commissioner](http://www.privacy.gov.au/law/act/ipp) publishes a range of information sheets which are available at http://www.privacy.gov.au/ .

## 15.3 Collecting Client Information

Only information that is relevant should be collected about clients. Clients must be informed that de-identified information will be used to evaluate and improve services, and that the Department has access to the information that is collected. Information will be used by the Department only for statistical, planning and evaluation purposes. The data will not be matched, in whole or in part, with any other information for the purposes of identifying individuals. Any statistical information about clients which is made public will not identify individuals.

Client information should remain confidential and not be provided to others unless it is with consent or it is lawful to provide the information to others. Consent to disclosing information may be given expressly or it may be implied.

### Confidentiality Statement

To inform clients about information collection safeguards, Organisations may wish to use words such as:

**Confidentiality**

―We give statistics about our clients to the Australian Government to help plan and improve services. Information about you will be kept confidential, and won‘t affect your entitlement to services**.**

# 16 Complaints and Feedback

## 16.1 Complaints Management Process

Organisations must have in place effective complaints handling mechanisms and ensure that clients are aware of these procedures. Organisations must develop and distribute written information as appropriate to clients about the role and responsibilities of the manager and other staff (including volunteer staff), the rights of clients and the problem solving mechanisms adopted by the Organisation.

A complaint should be handled locally (i.e. within the Organisation) in the first instance. The Department will act as a facilitator in instances of dispute or where clients make complaints about an ACHA service where the complaint cannot be resolved locally. The Department‘s primary focus is on resolving the complaint. There are two main options for this – bilateral negotiations in which the complainant need not have any dealings with the Organisation; and mediated negotiations where face to face discussions between parties to the complaint are held. Other options may be explored should these options be inappropriate or unsuccessful. Please refer to the Department who will provide further information about procedures for dealing with complaints.

The Organisation must advise the Department if there are any significant or serious complaints that are likely to be made to the Minister, the Ombudsman or another statutory complaint body. Early advice will assist the Department in providing prompt information on the complaint.

While the focus is on complaints about government agencies, Ombudsman websites include information which may be helpful for development or review of the Organisation‘s complaint management policy. Some links are listed below:

[Commonwealth Ombudsman - Better Practice Guide](http://www.ombudsman.gov.au/docs/better-practice-guides/onlineBetterPracticeGuide.pdf)

www.ombudsman.gov.au/docs/better-practice guides/onlineBetterPracticeGuide.pdf

[NSW Ombudsman - Complaint Handling Kit for Community Service Organisations](http://www.ombo.nsw.gov.au) www.ombo.nsw.gov.au

[Victorian Ombudsman – Good Practice Guide](http://www.ombudsman.vic.gov.au)

www.ombudsman.vic.gov.au

[NT Ombudsman – Effective Complaint Management Fact Sheets](http://www.ombudsman.nt.gov.au/public-agencies/effective-complaints-management-fact-sheets/) www.ombudsman.nt.gov.au/public-agencies/effective-complaints-management- [fact-sheets/](http://www.ombudsman.nt.gov.au/public-agencies/effective-complaints-management-fact-sheets/)

[NT Ombudsman - Complaint management models](http://stingray.cbr.hosting-server.com.au/~ombudsma/wp-content/uploads/2009/07/3_NT_Complaints_Management_Models.pdf)

[Qld Ombudsman – Developing Effective Complaint Management Policy](http://www.ombudsman.qld.gov.au/Portals/0/docs/Publications/CM_Resources/Developing%20effective%20complaints%20management%20policy%20and%20procedures%202006.pdf) www.ombudsman.qld.gov.au

[WA Ombudsman – Guidelines](http://www.ombudsman.wa.gov.au/Publications/Guidelines.htm)

www.ombudsman.wa.gov.au/Publications/Guidelines.htm

[Tasmanian Ombudsman – How to make a complaint](http://www.ombudsman.tas.gov.au/making_a_complaint/how_to_make_a_complaint) www.ombudsman.tas.gov.au/making\_a\_complaint/how\_to\_make\_a\_complaint

[SA Ombudsman – Lodge a complaint](http://www.ombudsman.sa.gov.au)

www.ombudsman.sa.gov.au

[ACT Ombudsman – Tips and advice on making a complaint](http://www.ombudsman.act.gov.au/pages/making-a-complaint/tips-and-advice/) www.ombudsman.act.gov.au/pages/making-a-complaint/tips-and-advice/

# Appendix 1 Charter of Rights and Responsibilities for Community Care

**CHARTER OF RIGHTS AND RESPONSIBILITIES FOR COMMUNITY CARE**

*Aged Care Act 1997, Schedule 2 User Rights Principles*

The Charter of Rights and Responsibilities for Community Care (the Charter) became law on 1 October 2009.

The Charter applies to people in receipt of Australian Government funded packages legislated under the *Aged Care Act 1997* (the Act):

* + Community Aged Care Packages (CACPs);
  + Extended Aged Care at Home (EACH); and
  + Extended Aged Care at Home Dementia (EACHD) packages.

Service providers under the National Respite for Carers Program (NRCP) will also need to meet the terms and conditions of the Charter of Rights and Responsibilities as requirement of their Funding Agreement.

Hard copies of the Charter may be ordered from National Mailing and Marketing on 02 6269

1060 and through email on [health@nationalmailing.com.au.](mailto:health@nationalmailing.com.au)

If you have any enquiries regarding the Charter please ring the Aged Care Information Line

on freecall 1800 500 853.

To view the Charter in legislation go to the [*User Rights Amendment Principles 2009 (No. 2)*](http://www.comlaw.gov.au/ComLaw/Legislation/LegislativeInstrument1.nsf/0/E300875E744E82B4CA257632000F5CB8?OpenDocument&amp;VIEWCAT=item&amp;COUNT=999&amp;START=1)

at http://www.comlaw.gov.au/Details/F2009L03559 noting that the legislative Instrument reflects the legislation drafting style and is therefore in the third person. The implementation version of the Charter is in the first person.

## Rights

As a care recipient I have the following rights:

### 1 GENERAL

1. to be treated and accepted as an individual, and to have my individual preferences respected
2. to be treated with dignity, with my privacy respected
3. to receive care that is respectful of me, my family and home
4. to receive care without being obliged to feel grateful to those providing my care
5. to full and effective use of all my human, legal and consumer rights, including the right to freedom of speech regarding my care
6. to be treated without exploitation, abuse, discrimination, harassment or neglect

### 2 PARTICIPATION

1. to be involved in identifying the community care most appropriate for my needs
2. to choose the care and services that best meet my assessed needs, from the community care able to be provided and within the limits of the resources available
3. to participate in making decisions that affect me
4. to have my representative participate in decisions relating to my care if I do not have capacity

### 3 CARE AND SERVICES

1. to receive reliable, coordinated, safe, quality care and services which are appropriate to my assessed needs
2. to be given before, or within 14 days after I commence receiving care, a written plan of the care and services that I expect to receive
3. to receive care and services as described in the plan that take account of my lifestyle, other care arrangements and cultural, linguistic and religious preferences
4. to ongoing review of the care and services I receive (both periodic and in response to changes in my personal circumstances), and modification of the care and services as required

### 4 PERSONAL INFORMATION

1. to privacy and confidentiality of my personal information
2. to access my personal information

### 5 COMMUNICATION

1. to be helped to understand any information I am given
2. to be given a copy of the Charter of Rights and Responsibilities for Community Care
3. to be offered a written agreement that includes all agreed matters
4. to choose a person to speak on my behalf for any purpose

### 6 COMMENTS AND COMPLAINTS

1. to be given information on how to make comments and complaints about the care and services I receive
2. to complain about the care and services I receive, without fear of losing the care or being disadvantaged in any other way
3. to have complaints investigated fairly and confidentially, and to have appropriate steps taken to resolve issues of concern

### 7 FEES

1. to have my fees determined in a way that is transparent, accessible and fair
2. to receive invoices that are clear and in a format that is understandable
3. to have my fees reviewed periodically and on request when there are changes to my financial circumstances
4. not to be denied care and services because of my inability to pay a fee for reasons beyond my control

## Responsibilities

As a care recipient I have the following responsibilities:

### 1 GENERAL

1. to respect the rights of care workers to their human, legal and industrial rights including the right to work in a safe environment
2. to treat care workers without exploitation, abuse, discrimination or harassment

### 2 CARE AND SERVICES

1. to abide by the terms of the written agreement
2. to acknowledge that my needs may change and to negotiate modifications of care and service when my care needs do change
3. to accept responsibility for my own actions and choices even though some actions and choices may involve an element of risk

### 3 COMMUNICATION

1. to give enough information to assist the approved provider to develop, deliver and review a care plan
2. to tell the approved provider and their staff about any problems with the care and services

### 4 ACCESS

1. to allow safe and reasonable access for care workers at the times specified in my care plan or otherwise by agreement
2. to provide reasonable notice if I do not require a service

### 5 FEE

1. to pay any fee as specified in the agreement or negotiate an alternative arrangement with the provider if any changes occur in my financial circumstances
2. to provide enough information for the approved provider to determine an appropriate level of fee.

# Appendix 2: Transition-Out Plan Guide

## Aims

The Transition-Out Plan (Plan) must be developed and submitted to the Commonwealth for approval within 6 months of commencement of the Funding Agreement. The aim of the Plan is to ensure that the obligations of both parties upon termination or expiry of the Funding Agreement are acknowledged and agreed and that there will be minimal disruption of service delivery to clients. The Plan must be signed and dated by a person who has the authority to bind the Organisation.

The Plan should:

* + aim to preserve the availability of services to Assistance with Care and Housing for the Aged (ACHA) clients and to protect the employment of staff within the reasonable capacity of the Organisation. (The Organisation is expected to comply with all relevant legislation regarding staff entitlements and to the principle of fair play);
  + not be a lengthy document but should indicate that these issues have been addressed and that the ACHA has set aside resources for that purpose;
  + be able to be activated in the event of an impending service closure to ensure continuity of care for clients;
  + address issues that enable the orderly transition of the services from the Organisation to the Commonwealth or its nominated alternative Organisation on termination or expiry of the Funding Agreement; and
  + include a strategy for any specific requirements for services.

If the Organisation, following submission of the Plan, is no longer able to provide ACHA services and is unable to comply with all elements of the approved Plan, the Department should be notified as soon as this becomes evident. In such instances the Commonwealth and Organisation will work together to determine the priority of obligations relating to the Plan.

**Elements of the Plan**

The following elements are intended as a guide and should be considered for inclusion in the

Plan. Each Plan will depend on individual arrangements and the outcome of any negotiations.

**Auspice body**

Include name, address, and relevant contacts (positions only – do not include names as these are subject to change).

**Assistance with Care and Housing for the Aged details**

Include name, physical address of the ACHA(s), and relevant contacts (positions only – do not include names).

**Program description**

Provide a brief description of the range of the services provided. Include information and contact details (positions only – do not include names) about organisations with which the ACHA has linkages. Identify other programs at the location e.g. HACC, packages etc.

**Organisational arrangements**

Include information on administrative policies, processes and procedures and operational protocols, such as:

* subcontracting arrangements;
* strategies;
* monitoring;
* audit arrangements;
* identification of geographical areas serviced, including any cross border arrangements;
* hours of operation;
* staff processes; and
* any additional services provided by the ACHA.

**Timeframe for transition**

Specify the transition-out period (average is one to three months, to be negotiated and agreed with the Department). Include a timetable for the transition: events, milestones etc. Identify the timing of advice to clients, staff, carers (if appropriate), Special Needs groups and all other stakeholders.

**Staffing arrangements**

Include staffing details and the basis on which ACHA staff are employed, e.g. awards and arrangements for transition of staff to a new Organisation (subject to the agreement of the new Organisation). While there is provision in project Funding for staff entitlements, the Plan should address conditions and arrangements for staff not wishing to transfer, e.g. re- deployment, redundancy.

**Organisation property/ accommodation**

Information about what accommodation arrangements exist for premises currently occupied by the Organisation. Would the space currently used be available on termination of the Agreement? If available, arrangements required to transfer e.g. lease arrangements, etc.

**Assets**

In accordance with the Funding Agreement clause 31.4, details of all Assets purchased with Commonwealth funding are to be recorded in an Assets Register. The Assets Register should be attached to the Plan and kept current for the duration of the agreement.

Identify how and when the transfer of Assets to the Commonwealth or nominee is to take place, e.g. whether the Assets are to be sold and proceeds paid to the Commonwealth, and arrangements for this.

**Information and records**

Identify all documents necessary to enable services similar to the existing service to be provided by the Commonwealth or its nominee, and arrangements for their transfer to the Commonwealth or its nominee. In particular, the Organisation should consider arrangements for the transfer of client records, giving due regard to privacy requirements.

**Intellectual property and database arrangements**

Arrangements should be set out for the delivery to the Commonwealth of any databases or directories that are used in providing services as per the Funding Agreement. If applicable, an intellectual property register with up-to-date contact details of all owners and licensees of intellectual property should also be attached to the Plan. If applicable, identify arrangements for the transfer of any relevant software.

**Financial records**

Acknowledge that all financial acquittals and the final report will be actioned in accordance with the conditions set down in the Funding Agreement.

**Service contracts**

Arrangements to novate (transfer) to the Commonwealth‘s nominee all contracts relating to services provided or any other relevant contracts to which the Organisation is a party, including Subcontractors.

# Appendix 3 Commonwealth HACC Police Certificate Guidelines



**Commonwealth HACC Program**

**Police Certificate Guidelines**

**MARCH 2012**

## 1 INTRODUCTION

The Aged Care Funding Agreement sets out the conditions under which Service providers are funded by the Commonwealth Government for activities under the Commonwealth HACC Program.

The Police Certificate Guidelines are an attachment to the Aged Care Funding Agreement and supplement the information in the Commonwealth HACC Program Manual. The Guidelines have been developed to assist Service providers with the management of police check requirements under the Commonwealth HACC Program.

**These Guidelines also apply to the National Respite for Carers Program (NRCP), Assistance with Care and Housing for the Aged (ACHA) Program, Day Therapy Centres (DTC) Program, Commonwealth Respite and Carelink Centres (CRCC) Program, the National Carer Counselling Program (NCCP) and the Carer Information and Support Service (CISS) Program.**

Police checks are intended to complement robust recruitment practices and are part of a Service provider‘s responsibility to ensure all staff, volunteers and executive decision makers are suitable to provide services to clients of the Commonwealth HACC Program.

### 1.1 Transition (not applicable to NRCP, DTC, CRCC and NCCP service providers)

In states and territories where undergoing a police check every three years has not been a mandatory requirement previously, service providers have until 30 June 2013 to ensure all existing staff, volunteers and executive decision makers have undergone a police check. This applies to service providers in New South Wales, Queensland, the Australian Capital Territory and the Northern Territory. It is expected that any new staff, volunteers and executive decision makers will be required to have a police check conducted as part of the engagement process.

## 2 YOUR OBLIGATIONS

Service providers have a responsibility to ensure that all staff, volunteers and executive decision makers working in Commonwealth HACC services are suitable for the roles they are performing. They should undertake thorough background checks to select staff in accordance with the requirements under the Aged Care Funding Agreement and the Community Care Common Standards.

As part of this, Service providers must ensure national criminal history record checks, not more than three years old, are held by:

* staff who are reasonably likely to interact with clients;
* volunteers who have unsupervised interaction with clients; and
* executive decision makers.

Service providers should ensure they have policies and procedures in place to assess police certificates. A Service provider‘s decision to employ or retain the services of a person with any relevant recorded convictions will need to be rigorous, defensible and transparent. For information about assessing police certificates for staff, volunteers and executive decision makers see **5 Assessing a Police Certificate** in these Guidelines.

## 3 POLICE CERTIFICATES

### 3.1 Police certificates and police checks

A police certificate is a report of a person‘s criminal history; a police check is the process of checking a person‘s criminal history. The two terms are often used interchangeably in aged care.

### 3.2 Police certificate requirements

A police certificate that satisfies requirements under the Aged Care Funding Agreement and Commonwealth HACC Program Manual is a nation wide assessment of a person‘s criminal history (also called a ―National Criminal History Record Check‖ or a ―National Police Certificate‖) prepared by the Australian Federal Police, a state or territory police service, or a CrimTrac accredited agency.

For more information about assessing police certificates, including the different types, please see:

5 Assessing a Police Certificate.

### 3.3 CrimTrac certificates

Police certificates or reports prepared by CrimTrac accredited agencies are considered by the Department as being prepared on behalf of the police services and therefore meet the Department‘s requirements. More information about [CrimTrac](http://www.crimtrac.gov.au/) is available at www.crimtrac.gov.au .

### 3.4 Statutory declarations

Statutory declarations are generally only required in addition to police checks in two instances:

* for essential new staff, volunteers and executive decision makers who have applied for, but not yet received, a police certificate; and
* for any staff, volunteers or executive decision makers who have been a citizen or permanent resident of a country other than Australia after the age of 16.

In these two instances, a staff member, volunteer or executive decision maker can sign a statutory declaration stating either that they have never, in Australia or another country, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence. Note that a person is entitled to sign a statutory declaration stating that they have not been convicted of an offence if they have been convicted of an offence but the conviction is a ‗spent‘ conviction (see **5.8 Spent convictions**).

Statutory declarations relating to police certificate requirements should be made on the form prescribed under the *Commonwealth Statutory Declarations Act 1959* (the Declarations Act). Anyone who makes a false statement in a statutory declaration is guilty of an offence under the Declarations Act.

A statutory declaration template is provided at **Appendix 3b**. More information about [statutory declarations](http://www.ag.gov.au/statdec) is available at www.ag.gov.au/statdec.

## 4 STAFF, VOLUNTEERS AND EXECUTIVE DECISION MAKERS

### 4.1 Staff, volunteers and executive decision makers

Police certificates, not more than three years old, must be held by:

* staff who are reasonably likely to interact with clients;
* volunteers who have unsupervised interaction with clients; and
* executive decision makers.

### 4.2 Definition of a staff member

A staff member is defined, for the purposes of the Guidelines, as a person who:

* has turned 16 years of age; and
* is employed, hired, retained or contracted by the Service provider (whether directly or through an employment or recruitment agency) to provide care or other services under the control of the Service provider; and
* interacts, or is reasonably likely to interact, with clients.

Examples of individuals who are staff members include:

* employees and subcontractors of the Service provider who provide services to clients (this includes all staff employed, hired, retained or contracted to provide services under the control of the Service provider whether in a community setting or in the client‘s own home);
* employees and subcontractors who contact the client by phone.

### 4.3 Definition of non-staff members

Individuals who are not considered to be staff members, for the purposes of the Guidelines, include:

* employees who, for example, prepare the payroll, but do not interact with clients;
* independent contractors.

Generally, an independent contractor is a person:

* who is paid for results achieved;
* provides all or most of the necessary materials and equipment to complete the work;
* is free to delegate work to others;
* has freedom in the way that they work;
* does not provide services exclusively to the Service provider;
* is free to accept or refuse work; and
* is in a position to make a profit or loss.

For the purposes of these Guidelines, a subcontractor who has an ongoing contractual relationship with the Service provider is not taken to be an independent contractor but is regarded as a staff member. A person who is contracted to perform a specific task on an ad hoc basis may fall within the definition of an independent contractor.

Having an Australian Business Number (ABN) does not automatically make a person an independent contractor.

### 4.4 Definition of a volunteer

A volunteer is defined, for the purposes of the Guidelines, as a person who:

* is not a staff member; and
* offers his or her services to the Service provider; and
* provides care or other services on the invitation of the Service provider and not solely on the express or implied invitation of a client; and
* has, or is reasonably likely to have, unsupervised interaction with clients.

A student undertaking a clinical placement in the community who is over 18 years and has, or is reasonably likely to have, unsupervised interaction with clients would be a volunteer.

Examples of persons who are not volunteers under this definition include:

* persons volunteering who are under the age of 16 (except where they are a full-time student, then under the age of 18);
* persons who are expressly or impliedly invited into the client‘s home by a client (for example, family and friends of the client); and
* persons who only have supervised interaction with clients.

### 4.5 Definition of unsupervised interaction

Unsupervised interaction is defined as interaction with a client where a volunteer is unaccompanied by another volunteer or staff member.

In regard to volunteers, if volunteers are visiting a client in pairs it is not a requirement for either of those volunteers to have a police certificate.

### 4.6 Definition of an executive decision maker

An executive decision maker is:

* a member of the group of persons who is responsible for the executive decisions of the entity at that time; or
* any other person who has responsibility for (or significant influence over) planning, directing or controlling the activities of the entity at that time; or
* any person who is responsible for the day-to-day operations of the service, whether or not the person is employed by the entity.

In determining who are executive decision makers, service providers need to consider the functional role individuals perform rather than their job title.

### 4.7 New staff

While service providers should aim to ensure all new staff members, volunteers and executive decision makers have obtained a police certificate before they start work, there are exceptional circumstances where new staff, volunteers and executive decision makers can commence work prior to receipt of a police certificate.

A person can start work prior to obtaining a police certificate if:

* the care or other service to be provided by the person is essential; and
* an application for a police certificate has been made before the date on which the person first becomes a staff member or volunteer; and
* until the police certificate is obtained, the person will be subject to appropriate supervision during periods when the person interacts with clients; and
* the person makes a statutory declaration stating either that they have never, in Australia or another country, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence.

In such cases, the service provider must have policies and procedures in place to demonstrate:

* that an application for a police certificate has been made;
* the care and other service to be provided is essential;
* the way in which the person would be appropriately accompanied; and
* how a person will be appropriately accompanied in a range of working conditions, e.g. during holiday periods when staff numbers may be limited.

### 4.8 Staff, volunteers and executive decision makers who have resided overseas

Staff members, volunteers and executive decision makers who have been citizens or permanent residents of a country other than Australia since turning 16 years of age must make a statutory declaration before starting work with any Commonwealth HACC service provider, stating either that they have never, in a country other than Australia, been convicted of an offence or, if they have been convicted of an offence, setting out the details of that offence.

This statutory declaration is in addition to a current national police certificate, as this reports only those convictions recorded in Australian jurisdictions.

## 5 ASSESSING A POLICE CERTIFICATE

### 5.1 Police certificate format

Police certificates may have different formats, including printed certificates or electronic reports. Every police certificate or report must record:

* the person‘s full name and date of birth;
* the date of issue; and
* a reference number or similar.

A service provider must be satisfied that a certificate is genuine and has been prepared by a Police service or a CrimTrac accredited agency. An original police certificate or a certified copy should be provided rather than an uncertified photocopy.

It is up to the service provider to be satisfied that a certificate meets the requirements, and enables them to assess a person‘s criminal history. Any police certificate decision should be documented by the service provider. For more information on record keeping, and the sighting and storing of police certificates, see 6 **Police Check Administration**.

### 5.2 Purpose of a police certificate

A police certificate that best satisfies requirements under the Commonwealth HACC Program police check regime is one obtained for the purposes of aged care. However, a national criminal history record check undertaken for another purpose will generally also satisfy the requirements. It is best practice to specify the purpose of the police check to the police service or CrimTrac agency issuing the certificate.

In place of a national criminal history record check, service providers may accept staff members and volunteers who hold a card issued by a state or territory authority following a vetting process that enables the card holder to work with vulnerable people. Executive decision makers are required to have a national criminal history record check (see **5.5 Assessing information obtained from a police certificate for executive decision makers**).

### 5.3 Police certificate disclosure

A police certificate discloses whether a person:

* has been convicted of an offence;
* has been charged with and found guilty of an offence but discharged without conviction; or
* is the subject of any criminal charge still pending before a Court.

The information on the certificate is drawn from all Australian jurisdictions and is subject to relevant state and territory spent conviction schemes. For more information about spent convictions, please see

**5.8 Spent convictions**.

### 5.4 Assessing information obtained from a police certificate for staff and volunteers

Commonwealth HACC service providers may use discretion when assessing a person‘s criminal history to determine whether recorded offences are relevant to the job. The principle that service providers should apply is to determine the risk of harm to clients.

Service providers should ensure they have policies and procedures in place to assess police certificates. A service provider‘s decision to employ or retain the services of a person with any relevant recorded convictions will need to be rigorous, defensible and transparent.

For more information see: **5.7 Refusing or terminating employment on the basis of a criminal record**.

#### A risk assessment approach

The following considerations are intended as a guide to assist service providers to assess a person‘s police certificate for their suitability to be either a staff member or volunteer for a Commonwealth HACC service provider:

**Access:** the degree of access to clients, their belongings, and their personal information. Considerations include whether the individual will work alone or as part of a team, the level and quality of direct supervision, the location of the work, i.e. community or home based settings.

**Relevance:** the type of conviction and sentence imposed for the offence in relation to the duties a person is, or may be undertaking. A service provider should only have regard to any criminal record information indicating that the person is unable to perform the inherent requirements of the particular job.

**Proportionality:** whether excluding a person from employment is proportional to the type of conviction.

**Timing:** when the conviction occurred.

**Age:** the ages of the person and of any victim at the time the person committed the offence. The service provider may place less weight on offences committed when the person is younger, and particularly under the age of 18 years. The service provider may place more weight on offences involving vulnerable persons.

**Decriminalized offence:** whether or not the conduct that constituted the offence or to which the charge relates has been decriminalized since the person committed the offence.

**Employment history:** whether an individual has been employed since the conviction and the outcome of referee checks with any such employers.

**Individual‘s information:** the findings of any assessment reports following attendance at treatment or

intervention programs, or other references; and the individual‘s attitude to the offending behaviour. **Pattern:** whether the conviction represents an isolated incident or a pattern of criminality.

**Likelihood:** the probability of an incident occurring if the person continues with, or is employed for, particular duties.

**Consequences:** the impact of a prospective incident if the person continues, or commences, particular duties.

**Treatment strategies:** procedures that will assist in reducing the likelihood of an incident occurring including, for example, modification of duties.

### 5.5 Assessing information obtained from a police certificate for executive decision makers

Commonwealth HACC service providers may use limited discretion when assessing a person's criminal history to determine whether any recorded offences are relevant to performing the functions and duties of an executive decision maker.

A Commonwealth HACC service provider must not allow a person whose police certificate records a precluding offence to perform the functions and duties of an executive decision maker. The offences that preclude a person under the Commonwealth HACC Program police check regime from performing the functions and duties of an executive decision maker are:

* a conviction for murder or sexual assault; or
* a conviction and sentence to imprisonment for any other form of assault; or
* a conviction for an indictable offence within the past 10 years.

Whether or not an offence is an indictable offence will depend on legislation within the jurisdiction. Service providers might need to seek legal advice if there is any doubt. If a conviction for what would

otherwise be a precluding offence is considered 'spent' under the law of the relevant jurisdiction (see

**5.8 Spent convictions**), the conviction does not preclude the person from performing the functions and duties of an executive decision maker.

While a service provider may not use discretion to allow a person whose police certificate records a conviction for a precluding offence to perform the functions and duties of an executive decision maker, service providers may use discretion in determining whether any other recorded convictions are

relevant to performing those functions and duties. The risk assessment approach set out in 5.4 may be used as a guide to assist service providers to assess the relevance of any non-precluding offences to performing the functions and duties of an executive decision maker.

A service provider‘s decision to allow a person with any recorded convictions to perform the functions and duties of an executive decision maker must be rigorous, defensible and transparent. The overriding principle that service providers should bear in mind is to minimise the risk of harm to clients.

### 5.6 Committing an offence during the three year police certificate expiry period

Service providers must take reasonable measures to require each of their staff members, volunteers and executive decision makers to notify them if they are convicted of an offence in the three year period between obtaining and renewing their police check. If an executive decision maker has been convicted of a precluding offence they must not be allowed to continue as an executive decision maker.

### 5.7 Refusing or terminating employment on the basis of a criminal record

If a service provider refuses or terminates employment on the basis of a person‘s conviction for an offence, the conviction must be considered relevant to the inherent requirements of the position. If in any doubt, service providers should seek legal advice regarding the refusal or termination of a person‘s employment on the basis of their criminal record.

Under the *Fair Work Act 2009* there are provisions relating to unfair dismissal and unlawful termination by employers. More information about the [Fair Work Act 2009](http://www.fwa.gov.au/) is available at www.fwa.gov.au. In addition, under the *Human Rights and Equal Opportunity Act 1986*, the Australian Human Rights Commission has the power to inquire into discrimination in employment on the ground of criminal record.

If a person feels they have been discriminated against based on their criminal record in an em ployment decision of a service provider, they may make a complaint to the Australian Human Rights Commission. Further information on [discrimination on the basis of criminal record](http://www.humanrights.gov.au/) is available at www.humanrights.gov.au.

### 5.8 Spent convictions

Convictions that are considered ‗spent‘ under state, territory and Commonwealth legislation will not be disclosed on a police certificate unless the purpose for the application (for example, working with children) is exempt from the relevant spent conviction scheme. If a conviction has been ‗spent‘ the person is not required to disclose the conviction. The aim of the scheme is to prevent discrimination on the basis of old minor convictions, once a waiting period (usually 10 years) has passed and provided the individual has not re-offended during this period.

Spent conviction legislation varies from jurisdiction to jurisdiction. In some circumstances or jurisdictions certain offences cannot be spent.

Further information on [spent convictions](http://www.afp.gov.au/what-we-do/police-checks/spent-convictions-scheme.aspx) can be found at http://www.afp.gov.au/what-we-do/police- [checks/spent-convictions-scheme.aspx](http://www.afp.gov.au/what-we-do/police-checks/spent-convictions-scheme.aspx).

## 6 POLICE CHECK ADMINISTRATION

### 6.1 Record keeping responsibilities

Service providers must keep records that can demonstrate that:

* there is a police certificate, which is not more than three years old, for each staff member, volunteer and executive decision maker;
* an application has been made for a police certificate where a new staff member, volunteer or executive decision maker does not have a police certificate; or
* a statutory declaration has been provided by any staff member, volunteer or executive decision maker who has not yet obtained a police certificate or was a citizen or permanent resident of a country other than Australia.

How a service provider demonstrates their compliance with record keeping requirements is a decision for their service provider to make, based on their circumstances.

### 6.2 Sighting and storing police certificates

The collection, use, storage and disclosure of personal information about staff members and volunteers must be in accordance with the *Privacy Act 1988* (Commonwealth). State and territory privacy laws can also impact on the handling of personal information such as a police certificate. Further information about [privacy](http://www.privacy.gov.au/law/act/ipp) is available at www.privacy.gov.au.

When individuals undertake to obtain their own police certificate, or employment agencies hold police certificates, service providers should sight an original or a certified copy of the police certificate and the information and reference number should be recorded on file.

If it is impossible to assess a person‘s police certificate for any reason, the individual may be required to obtain a new police certificate in order for the service provider to meet their responsibilities under the Commonwealth HACC Program police check regime.

### 6.3 Cost of police certificates

Service providers have a responsibility to ensure all staff members, volunteers and executive decision makers undergo police checks. However, the payment of the cost of obtaining a police certificate is a matter for negotiation between the service provider and the individual.

Individuals may be able to claim the cost of the police certificate as a work-related expense for tax purposes. Further advice on this issue is available from the [Australian Taxation Office](http://www.ato.gov.au/) through their website at www.ato.gov.au.

Volunteers may be eligible to obtain a police certificate at a reduced cost whether the certificate is requested by an individual or by a service provider on behalf of a volunteer. This should be confirmed with the agency issuing the police certificate.

### 6.4 Obtaining certificates on behalf of staff, volunteers or executive decision makers

A person may provide a police certificate to the service provider or give consent for the service provider to obtain a police certificate on their behalf.

Service providers can obtain consent forms from the relevant police services or a CrimTrac accredited agency. In some jurisdictions, parental consent may be required to request a police certificate for an individual under the age of 18 years.

### 6.5 Police certificate expiry

Police certificates for all staff, volunteers and executive decision makers must remain current and need to be renewed every three years before they expire. If a police certificate expires while a staff member is on leave, the new certificate must be obtained before the staff member can resume working at the service. Service providers should note that the application or renewal process can take longer than eight weeks.

### 6.6 Documenting decisions

Any decision taken by a service provider should be documented in a way that can demonstrate to an auditor the date the decision was made, the reasons for the decision, and the people involved in the decision, i.e. the service provider, the individual, a legal representative, board members etc.

### 6.7 Monitoring compliance with police check requirements

Service providers must have policies and procedures in place to demonstrate suitable management and monitoring of the police certificate requirements for all staff members, volunteers and executive decision makers. This includes, for example:

* three-year police check renewal procedures;
* appropriate storage, security and access requirements for information recorded on a police certificate; and
* evidence of a service provider‘s decisions in respect of all individuals, or where staff are contracted through another agency, evidence of contractual arrangements with the agency that demonstrates the police certificate requirements.

The Community Care Common Standards outline the requirements for service providers to have appropriate policies and procedures in place to manage relevant legislative and regulatory requirements for police checks. Specific references to police checks requirements are made in Standard 1: Effective Management, Expected Outcome 1.2 Regulatory Requirements and Expected Outcome 1.7 Human Resource Management.

Under the Community Care Common Standards, quality reviewers may check the currency of a service provider‘s police checks, and that they have appropriate systems and procedures in place to ensure police checks remain current.

For more information see: **6.1 Record keeping responsibilities**.

# APPENDIX 3a – Police Service Contact Details

| State / Territory | Phone number |
| --- | --- |
| [Australian Federal Police](http://www.afp.gov.au/what-we-do/police-checks/national-police-checks.aspx) (for ACT) | Phone: (02) 6202 3333 |
| [New South Wales Police Service](http://www.police.nsw.gov.au/about_us/structure/specialist_operations/forensic_services/criminal_records_section) | Phone: (02) 8835 7888 |
| [Victoria Police](http://www.police.vic.gov.au/content.asp?Document_ID=274) | Phone: 1300 881 596 |
| [Queensland Police Service](http://www.police.qld.gov.au/services/purchase/polcert.htm) | Phone: (07) 3364 6705 |
| [Western Australia Police Service](http://www.police.wa.gov.au/ABOUTUS/OurServices/ClearanceCertificates/tabid/1202/Default.aspx) | Phone: (08) 9268 7645 |
| [South Australia Police](http://www.sapolice.sa.gov.au/sapol/services/information_requests/national_police_certificate.jsp) | Phone: (08) 8204 2455 |
| [Tasmania Police](http://www.police.tas.gov.au/services-online/police-history-record-checks/) | Phone (03) 6230 2928 |
| [Northern Territory Police](http://www.pfes.nt.gov.au) | Phone: 1800 723 368 |

## APPENDIX 3b- STATUTORY DECLARATION TEMPLATE

Commonwealth of Australia

STATUTORY DECLARATION

*Statutory Declarations Act 1959*

[[2]](#footnote-2) I,

make the following declaration under the *Statutory Declarations Act 1959*:

[[3]](#footnote-3)

I declare that (place a tick or cross in applicable box):

since turning 16 years of age, I have been a citizen or permanent resident of a country/countries other than Australia.

since turning 16 years of age, I have never been a citizen or permanent resident of a country/countries other than Australia

*[Delete whichever declaration is not applicable and initial beside deletion]*

I declare that I have never been convicted of any offence in any country.

OR

I declare that I have been convicted of the following offence(s):

<Insert details of offence(s)>

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the *Statutory Declarations Act 1959*, and I believe that the statements in this declaration are true in every particular.

Declared at[[4]](#footnote-4)      on[[5]](#footnote-5)      of[[6]](#footnote-6)

Before me,[[7]](#footnote-7)[[8]](#footnote-8)

Note 1 A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years — see section 11 of the *Statutory Declarations Act 1959*.

Note 2 Chapter 2 of the Criminal Code applies to all offences against the Statutory Declarations Act 1959 — see section 5A of the *Statutory Declarations Act 1959*.

A statutory declaration under the Statutory Declarations Act 1959 may be made before–

1. a person who is currently licensed or registered under a law to practise in one of the following occupations:

Chiropractor Dentist Legal practitioner

Medical practitioner Nurse Optometrist

Patent attorney Pharmacist Physiotherapist

Psychologist Trademarks attorney Veterinary surgeon

1. a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described); or
2. a person who is in the following list:

Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public Australian Consular

Officer or Australian Diplomatic Officer (within the meaning of the Consular Fees Act 1955)

Bailiff

Bank officer with 5 or more continuous years of service

Building society officer with 5 or more years of continuous service

Chief executive officer of a Commonwealth court

Clerk of a court

Commissioner for Affidavits

Commissioner for Declarations

Credit union officer with 5 or more years of continuous service Employee of the Australian Trade Commission who is:

1. in a country or place outside Australia; and
2. authorised under paragraph 3 (d) of the Consular Fees Act 1955; and
3. exercising his or her function in that place Employee of the Commonwealth who is:
4. in a country or place outside Australia; and
5. authorised under paragraph 3 (c) of the Consular Fees Act 1955; and
6. exercising his or her function in that place Fellow of the National Tax Accountants’ Association Finance company officer with 5 or more years of continuous service

Holder of a statutory office not specified in another item in this list

Judge of a court

Justice of the Peace

Magistrate

Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the Marriage Act 1961

Master of a court

Member of Chartered Secretaries Australia

Member of Engineers Australia, other than at the grade of student

Member of the Association of Taxation and Management Accountants

Member of the Australasian Institute of Mining and Metallurgy

Member of the Australian Defence Force who is:

1. an officer; or

(b) a non-commissioned officer within the meaning of the Defence Force Discipline Act 1982 with 5 or more years of continuous service; or

(c) a warrant officer within the meaning of that Act

Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising

Accountants or the National Institute of Accountants

Member of:

1. the Parliament of the Commonwealth; or
2. the Parliament of a State; or
3. a Territory legislature; or
4. a local government authority of a State or Territory

Minister of religion registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961 Notary public

Permanent employee of the Australian Postal Corporation with 5 or more years of continuous service who is employed in an office supplying postal services to the public

Permanent employee of:

* 1. the Commonwealth or a Commonwealth authority; or
  2. a State or Territory or a State or Territory authority; or
  3. a local government authority; with 5 or more years of continuous service who is not specified in another item in this list

Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made

Police officer

Registrar, or Deputy Registrar, of a court

Senior Executive Service employee of:

* 1. the Commonwealth or a Commonwealth authority; or
  2. a State or Territory or a State or Territory authority Sheriff

Sheriff‘s officer

Teacher employed on a full-time basis at a school or tertiary education institution

1. Where an Organisation reasonably determines that it is not possible or practicable to obtain tenders or quotes from three or more suitable suppliers, they must notify the Department within 10 Business Days after making that determination. The specific requirements for notices are set out in clause 50 of the Aged Care Funding Agreement. [↑](#footnote-ref-1)
2. *Insert the name, address and occupation of person making the declaration* [↑](#footnote-ref-2)
3. *Set out matter declared to in numbered paragraphs* [↑](#footnote-ref-3)
4. *Place* [↑](#footnote-ref-4)
5. *Day* [↑](#footnote-ref-5)
6. *Month and* year [↑](#footnote-ref-6)
7. *Signature of person before whom the declaration is made (see over)* [↑](#footnote-ref-7)
8. *Full name, qualification and address of person before whom the declaration is made (in printed letters)* [↑](#footnote-ref-8)