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Background and overview of the My Aged Care provider portal

1.1 Purpose of the Guide

The My Aged Care Provider Portal User Guide – Part Two (Provider Portal User Guide) outlines how Commonwealth-funded service providers (providers) use the My Aged Care provider portal (the provider portal) for your organisation.

The Provider Portal User Guide is split into two parts as follows:

- Part One provides an overview of the portal and describes the functions that an individual with the Administrator role in the provider portal will perform.
- Part Two (this document) provides an overview of the portal and describes the functions that an individual with the Team Leader or Staff Member role in the provider portal will perform.

1.1.1 What this Guide does not cover

This guide does not cover:

- Detailed instructions on how to obtain an AUSkey (which can be found on the AUSkey website).

1.2 Document key

This symbol is used to highlight a point that all providers need to pay particular attention to.

1.3 Key Terms

The updated list of key terms in My Aged Care relevant to assessors and service providers is available on the Department’s website at https://agedcare.health.gov.au/my-aged-care-key-terms
1.4  Introduction to using the provider portal

The provider portal is used to:

- Manage information about the services you provide
- Manage referrals for service(s) issued by My Aged Care contact centre staff or assessors by accepting, rejecting, or placing on a waitlist
- Update client records with information about services being delivered
- Request that an assessor undertakes a Support plan review for a client
- Generate reports.

AUSkey is the primary authentication mechanism for assessors to securely access and use the My Aged Care system. For assessment organisations experiencing AUSkey access issues, the Department is promoting VANguard Federated Authentication Service (FAS), as an alternative secure authentication mechanism. Further information on accessing My Aged Care using VANguard FAS is available on the Department’s website at https://agedcare.health.gov.au/programs/my-aged-care/vanguard-federated-authentication-service-fact-sheet

Staff must have an individual AUSkey linked to their organisation to access the provider portal. If you require access to the provider portal for multiple organisations, you will need a unique AUSkey for each user account.

1.5  Preparing to access the provider portal

The steps to prepare to access the provider portal and AUSkey requirements are outlined below.

1.5.1  AUSkey and technology requirements

Prior to accessing the provider portal, each staff member intending to use the provider portal needs their own AUSkey that is linked to a unique email address. An AUSkey is needed prior to logging on for the first time.

1.5.2  What is AUSkey?

AUSkey is a secure login that identifies you when you use participating Government online services on behalf of your business. Obtaining an AUSkey is a simple process and is free. Many organisations already use an AUSkey to interact with other Government services. Each AUSkey is linked to an Australian Business Number (ABN) and can be stored on a computer or a USB stick for staff that use multiple Windows-based computers.

If your organisation does not currently use AUSkey, your organisation must register for an Administrator AUSkey. To register for the first AUSkey you need to be an
eligible associate recorded on the Australian Business Register (ABR) for that ABN. You can register yourself or someone else for the first AUSkey. The first person to be registered will have an Administrator AUSkey and can set up other AUSkey Administrators within the organisation.

After the first AUSkey is issued, there can be unlimited AUSkeys linked to that ABN. In most cases, each person wanting to use participating government online services on behalf of a business must have a separate AUSkey. The registration process for subsequent AUSkey users depends on the type of AUSkey you need.

The information you will need to register for an AUSkey is outlined below:

<table>
<thead>
<tr>
<th>Administrator AUSkey</th>
<th>Standard AUSkey for other Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>• the ABN of the business you want the AUSkey to be linked to</td>
<td></td>
</tr>
<tr>
<td>• your full legal name</td>
<td></td>
</tr>
<tr>
<td>• your date of birth</td>
<td></td>
</tr>
<tr>
<td>• an email address that only you have access to</td>
<td></td>
</tr>
<tr>
<td>• an Administrator AUSkey user’s email address</td>
<td></td>
</tr>
<tr>
<td>• your full legal name</td>
<td></td>
</tr>
<tr>
<td>• an email address that only you have access to</td>
<td></td>
</tr>
</tbody>
</table>

The Administrator AUSkey holder is also able to set up Standard AUSkeys for all staff members who will use the provider portal. Administrator AUSkey holders can upload all staff AUSkeys in a batch by uploading a CSV file to ABR. For more information go to the ABR website (https://abr.gov.au/AUSkey/Help-and-support/Registering-for-AUSkey-troubleshooting/Register-more-than-one-person/). Alternatively, staff members are able to self-register online.

1.5.3 What will you need to use an AUSkey?

To use an AUSkey you will need a computer with an internet connection and a standard internet browser that supports AUSkey, such as Internet Explorer, Safari or Firefox.

⚠️ To use AUSkey you will need to use a browser that is compatible. Please note that the following are not compatible with AUSkey:

• Google Chrome browsers
• Microsoft Edge browsers
• Mobile devices such as smartphones and tablets

To use an AUSkey to log in to the provider portal, the computer will need certain software installed. If you and your staff do not have administration rights to the computer, you will need to consult your organisation’s IT support area to ensure the appropriate software is installed.
1.5.4 Where can you go for more information?

- Further details of software and compatibility can be found at https://abr.gov.au/AUSkey/Help-and-support/Set-up-AUSkey-troubleshooting/AUSkey-compatibility/
- For more information, visit the Australian Business Register (ABR) website at https://abr.gov.au/AUSkey/ or call the ABR national service desk on 1300 287 539 8:00am–6:00pm weekdays.
- Email the Australian Taxation Office (ATO) technical helpdesk technical.help@ato.gov.au.

1.5.5 Nominating an Organisation Administrator

In order to gain access to the provider portal, your organisation will first need to nominate an Organisation Administrator. The Organisation Administrator is the initial user to gain access to the portal for your organisation. The Department is responsible for creating the initial user account for each organisation. Further information on Administrator functions is detailed in the My Aged Care Provider Portal User Guide: Part One – Administrator functions.

The Organisation Administrator is responsible for setting up the structure of your organisation in the provider portal and creating staff user accounts, including additional administrator accounts as required. The administrator details provided for your organisation should be the person who is most suitable to set-up these details.

To nominate the Organisation Administrator for your organisation, you will need to complete and submit an Organisation Administrator Registration Form. This form is emailed to the key personnel (listed on your contract) when your organisation is added to the My Aged Care system.

If you need a copy of the registration form, please contact myagedcare@health.gov.au with your organisation name, ABN, National Approved Provider System (NAPS) ID (if known) and your contact details.
1.6 Further information, enquiries and technical support

The My Aged Care service provider and assessor helpline is available on 1800 836 799. The helpline answers enquiries relating to the My Aged Care system and provides technical support. The helpline is available between 8am to 8pm Monday to Friday and 10am to 2pm Saturday, local time across Australia.

You can view a record of enquiries you have made to the helpline via the provider portal, by selecting the ‘My Aged Care Interactions’ icon on the homepage.

Further information to support the use of the provider portal (including fact sheets, videos, FAQs) is available at https://agedcare.health.gov.au/our-responsibilities/ageing-and-aged-care/programs-services/my-aged-care/information-for-service-providers.
1.7 How to login to the provider portal

The steps you need to follow to log in to the provider portal are outlined below.

The first time log in process is different. The steps you need to take to login for the first time are outlined in Attachment A.


**Step Two:** An Australian Government ‘Authentication Service’ page will be displayed. Select your AUSkey credentials from the drop down list. Enter your AUSkey password and select ‘Continue’.
Step Three: After you select ‘Continue’ the provider portal homepage will be displayed.

1.8 Staff roles in the provider portal

The person nominated on the My Aged Care Organisation Administrator Registration Form needs to be the first person from your organisation to log into the provider portal. How to nominate your first Organisation Administrator is detailed in Section 1.5.5 of this guide.

The Organisation Administrator will be responsible for assigning roles to other staff. This can include assigning other staff the administrator role to help set up and maintain information about your organisation in the provider portal. Roles should be assigned in accordance with the duties the person performs within your organisation.

⚠️ If you are assigned more than one role, this access will apply across all outlets you have been granted access to in the provider portal.
The table below outlines the functions for each role within the provider portal. It includes both client focused and organisation focused tasks.

<table>
<thead>
<tr>
<th>Key Functions</th>
<th>Roles</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Client Focussed</strong></td>
<td>Organisation Administrator</td>
</tr>
<tr>
<td>Search for a client record (for referred clients)</td>
<td>✓</td>
</tr>
<tr>
<td>View client records (for referred clients)</td>
<td></td>
</tr>
<tr>
<td>View referrals</td>
<td></td>
</tr>
<tr>
<td>Accept, reject and revoke referrals</td>
<td></td>
</tr>
<tr>
<td>View tasks and notifications</td>
<td>✓</td>
</tr>
<tr>
<td>Manage organisation preferences for tasks and notifications</td>
<td></td>
</tr>
<tr>
<td>Manage outlet preferences for tasks and notifications</td>
<td></td>
</tr>
<tr>
<td>View My Aged Care interactions</td>
<td>✓</td>
</tr>
<tr>
<td>Add client service information</td>
<td></td>
</tr>
<tr>
<td>Transfer clients between services</td>
<td></td>
</tr>
<tr>
<td><strong>Organisation Focussed</strong></td>
<td></td>
</tr>
<tr>
<td>Request change to contractual information</td>
<td></td>
</tr>
<tr>
<td>Enter quality indicator data for Residential Care Facilities</td>
<td></td>
</tr>
<tr>
<td>Submit quality indicator data for Residential Care Facilities</td>
<td></td>
</tr>
<tr>
<td>Add outlets</td>
<td></td>
</tr>
<tr>
<td>Manage outlets: edit, activate, deactivate, remove</td>
<td>✓</td>
</tr>
<tr>
<td>Manage services: add, edit, activate, transfer (organisation administrator only) or deactivate</td>
<td>✓</td>
</tr>
<tr>
<td>Manage staff (organisation level): add, edit, deactivate, remove</td>
<td></td>
</tr>
<tr>
<td>Manage staff (outlet level): add, edit, deactivate, remove</td>
<td></td>
</tr>
</tbody>
</table>
1.8.1 Homepage views by role type

1.8.1.1 Administrator homepage

People assigned an administrator role at an organisation level can view and manage information for the entire organisation in the portal. People assigned an administrator role for one or more outlet(s) in the organisation will only be able to view and manage information for the outlet(s) they have been assigned.

If you log in to the provider portal as an administrator, you will see ‘Tasks and notifications’, ‘My Aged Care interactions’, ‘Reports and documents’, ‘Outlet administration’, and ‘Staff administration’ tiles on your homepage.

From 1 July 2019 it is mandatory for all Commonwealth subsidised residential aged care services to collect and submit clinical quality indicator data to the Department of Health. If you are a Commonwealth subsidised residential aged care service and you are assigned as an administrator at the outlet level, and the ‘Quality indicator’ role has been added to your staff profile, the ‘Quality Indicators’ tile will display on your home page.

Administrators at the organisation level will NOT see the ‘Quality Indicators’ tile on their home page.

For information on how to add the quality indicator application for staff members please refer to the National Aged Care Mandatory Quality Indicator Program Manual 1.0.
1.8.1.2 Team Leader homepage

People assigned the Team Leader role in the provider portal have the same functions as the Staff Member role and are also responsible for managing referrals for service(s).

If you log into the provider portal as a Team Leader, you will see ‘Service referrals’, ‘Find a client’, ‘Tasks and notifications’, ‘My Aged Care interactions’, ‘Reports’, ‘Retrieve a referral code’ and ‘Quality Indicators’ tiles on your homepage.

The Quality Indicators tile will only display on your home page once your Administrator for the Provider Portal has added the the ‘Quality indicator’ role for your staff profile.

For information on how to add the quality indicator application for staff members please refer to the National Aged Care Mandatory Quality Indicator Program Manual 1.0.
1.8.1.3 Staff Member homepage

People assigned the Staff Member role in the provider portal are responsible for adding and updating client service information in the client record.

If you log in to the provider portal as a Staff Member, you will see ‘Service referrals’, ‘Find a client’, ‘Review requests’, ‘Tasks and notifications’, ‘My Aged Care interactions’, and ‘Reports’ tiles on your homepage.

1.8.1.4 Homepage for person assigned multiple roles

If you log in to the provider portal as a user with Administrator, Team Leader and Staff Member roles, you will see the functions for all of these roles on the homepage.
2 Team leader role

All referrals for service(s) from the My Aged Care contact centre and assessment organisations are managed by the person (or people) assigned the Team Leader role in the provider portal for each outlet.

The Team Leader performs this function in addition to the functions they perform as a Staff Member in the provider portal.

2.1 Managing referrals

Referrals for service are for individual services. Providers either receive referrals electronically or via a referral code, depending on the client’s preferences, and incoming referrals have a priority status (low, medium, high).

Providers may receive referrals for services via four different pathways:

1. Clients with existing approvals for care types under the Aged Care Act 1997 can approach service providers directly (these clients may not be registered with My Aged Care)
2. Providers can receive electronic referrals for service via the provider portal
3. Clients can approach providers directly with a referral code issued by assessors or the My Aged Care contact centre
4. Providers can accept electronic referrals for service to a provider’s waitlist, if a waitlist is available.

These pathways are described in more detail below in Section 2 (Managing referrals) of this guide.

Each provider outlet needs at least one person assigned the ‘Team Leader’ role in the portal. This person will be responsible for managing referrals for service (accepting, accepting to waitlist, rejecting referrals and revoking referrals after acceptance) within the provider portal.
2.1.1 Clients with existing approvals for services under the Act

Flexible Care, Residential Care and Residential Respite providers may be approached by clients who have an existing care approval that was not approved through My Aged Care. These clients may not be registered with My Aged Care and will not have an electronic referral for service.

Providers can offer and deliver services to these clients through off-system processes, and use the Aged Care Client Record (ACCR) online to confirm that the client has the appropriate current care approval.

With the introduction of Increasing Choice in Home Care in February 2017, all clients with valid approvals for Home Care Packages were registered within the My Aged Care system. There is no requirement for clients with existing approvals to be registered with My Aged Care. However, if a provider determines that a client’s care needs have changed significantly, for instance they require a higher level of care; they should facilitate the client’s registration by calling the My Aged Care contact centre or via the online web referral form available on the My Aged Care website at http://www.myagedcare.gov.au/referral.

2.1.2 Electronic referrals for service via the My Aged Care provider portal

Providers can receive electronic referrals for service for clients registered with My Aged Care via the provider portal.

2.1.2.1 Viewing referrals

To view referrals and search for a particular client:

1. Select 'Service referrals' from the homepage.
Team Leaders and Staff Members can view referrals, however only Team Leaders can accept, accept to waitlist, and reject referrals or revoke referrals after acceptance. You may have multiple roles within the provider portal. Your homepage will display different tiles depending on the role(s) you are assigned.

Alternatively, from any other page in the provider portal, you can choose the 'Service referrals' option from the tool bar displayed at the top of the portal.

Or, from any other page, by selecting the Menu button located above the ‘Home’ hyperlink, selecting the ‘Service Referrals’ from the side-bar which opens.

You will need to select the relevant outlet name to ensure that you are looking for referrals in the correct outlet. This can be done by selecting the outlet name from the top right corner of the portal, above the ‘Logout’ link.

The 'Incoming referrals' page will now display a list of incoming referrals (i.e. those that have not been actioned).
You can alternate between card and list view by using the toggle at the top of the page.

2. You are able to refine the search results by entering a client’s First name, Last name, or Aged Care User ID.

You can show the filter option by clicking the expanding arrows at the right of the filter bar.
You can use the ‘Advanced Search’ link to expand search parameters.

The following search filters can be chosen from the ‘Optional Filter Field’ drop down box and applied to your search by clicking ‘Add Filter’.

- Aged Care User ID
- Due date
- First name
- Last name
- Locality
- Outlet
- Postcode
- Priority
- Recommended start date
- Referred date
- Service type
- State
- Suburb
You can save any filters that have been applied by selecting ‘Save filter’, so that they may be quickly used again through the ‘Advanced Search’ option. Alternatively, these referrals can also be sorted by the following fields, in either ascending/descending or alphabetical A-Z/Z-A:

- Client Last Name
- Client First Name
- Aged Care User ID
- Suburb
- State
- Postcode
- Locality
- Date Referred
- Due Date
- Recommended Start Date
- Priority
- Service Type
2.1.2.2 Accepting or rejecting a referral for service

To accept a referral for service, select ‘Service referrals’ from the home page, the toolbar at the top of the portal, or the side-bar from the Menu option at the top left of the portal and follow the procedure below.

1. From the ‘Incoming referrals’ tab in ‘Service referrals’ select the expanding arrows at the top right of the referral in card view, or to the left of the referral in list view, that you wish to view to display information about the referral.

Or in list view, select the expanding arrows to the left.

Referrals for waitlists are no longer sent as a specific waitlist referral. If a waitlist is available for the service the client has been referred to, a team leader can accept the referral in order to start service immediately, or accept the referral to waitlist.

The expanded information will provide, in addition to what was already visible, any referral comments made by the assessor or contact centre, and whether or not the client has multiple referrals for additional service types to your outlet.

You may decide to accept, reject or waitlist referrals based on the information available on the referral card.
However, if you want to see more client information prior to accepting a referral, select ‘View referral summary and client record’ to view details of the referral, the client’s assessment and assessment outcomes and more detailed information about the client.

The detailed referral view will also display the recommended frequency and intensity of recommended CHSP services. This is a recommendation only, to assist providers when discussing service options with the client. This information is also available in the ‘Services’ and ‘Referrals for my Organisation’ tabs in the client record.

2. If you select ‘View referral summary and client record’, the ‘Referrals for my organisation’ screen will display. Any referrals issued to your organisation for the client will be displayed.
4. You can view the following information in the client record tab:

- Personal information
- Primary contact person
- Identity information and status of identity check
- Communication requirements
- Address details (Suburb, State/Territory and postcode only)
- Payment details
- Health insurance details
- Service information
- Current notes

You can view the following information on the other tabs of the client record:

- Support plan
- Attachments
- Approvals under the Act
- Services in place
- Tasks and notifications for that client
- Current and previous assessment and support plan review information

Client contact details and full address details can only be viewed once a referral has been accepted.

To accept the referral, refer to Step 5 and 6.

To reject the referral, refer to Steps 7 and 8.

To accept the referral to waitlist, refer to Step 9.

The Quick Reference Guide – Navigating and viewing information in the client record contains further information about navigating the client record and what information can be viewed.
5. To accept the referral, select 'Accept Referral' from the ‘Referral summary’ page or from the expanded card or list view in incoming referrals tab.

![Accepting a referral](image)

6. Select the correct service item name/NAPS Service ID (if your organisational has more than one service/NAPS ID available for the service type) you wish to link the referral to. Confirm that you want to accept the referral by selecting 'Accept'.

![Accepting referral for Sam Powell](image)

A confirmation banner will appear at the bottom of your screen confirming your acceptance of the referral and advising that the referral, and access to the client’s full record including complete address and contact information, will be available through the ‘Accepted services pending’ tab.
7. To reject the referral, select ‘Reject referral’ located next to ‘Accept referral’ on the referral card or ‘Referral summary’ page.

8. You will be asked to select a reason for rejecting the referral from a drop down list. You may also elect to enter additional information in the ‘Rejection reason’ free text field.
Rejecting a referral with the reason of ‘Client deceased’ will change the client’s status to ‘Deceased’ and make the client record read only. Any unaccepted service referrals will be recalled and the client’s access to the client portal will be revoked.

Important: Where a client is active in the Home Care Package national priority system or has been assigned a home care package, this will remove the client from the national priority system and withdraw any assigned home care packages.
Comments regarding the ‘Rejection reason’ are displayed in the Assessor portal but not in the client portal. Providing a rejection reason assists assessors and the My Aged Care contact centre to support clients in accessing services.

Upon rejection, a confirmation banner will appear at the bottom of the screen.

If you do not have capacity to provide the service type, your administrator should update your service availability and information in the portal. This process is described in Section 2.2 (Adding service items) of the Provider Portal User Guide Part One – Administrator Functions.

9. If you are unable to provide the service at the time and you have a waitlist available, you can accept the referral to your waitlist. The referral will appear in your outlet’s ‘Waitlist’ tab. The waitlist process is described in more detail in section 2.4 (Accepting a referral to waitlist).

This option is only available if the service is configured by your Organisation Administrator to offer waitlist. This process is described in Provider Portal User Guide Part One – Administrator Functions.

2.1.2.3 Revoking a referral after acceptance
There may be circumstances after you have accepted a referral for service that affect your ability to provide services to that client. For example, the client withdraws their consent for service provision or their circumstances change.

You can only revoke accepted referrals where service delivery information has not been entered and/or services haven’t commenced.

The Department will monitor the use of this functionality, and notifications will be sent to service providers where 20% or more of referrals issued to the outlet over a period of 12 months have been revoked after acceptance.
To revoke a referral after acceptance, follow the steps below.

1. Navigate to the ‘Accepted services pending’ tab in the ‘Service referrals’ section of the provider portal and locate the accepted referral that you wish to revoke. You are able to filter the results by expanding the ‘Filter’ functionality, sort the results by editing the sort order and selecting ‘Go’, or change the display of information between ‘Card’ or ‘List’ views.

2. Select the accepted referral you wish to revoke, and expand the information. You are then able to select ‘Revoke Referral’.

3. Select the reason for revocation from the drop down menu and enter detailed information in the ‘Comments’ section to explain why you are revoking the referral after acceptance. Select ‘Revoke Referral’.
4. You will receive confirmation that the referral has been revoked, and it will no longer appear in your ‘Accepted services pending’ tab.

When a referral is revoked after acceptance, other referrals (such as from a broadcast or preference referral) will be automatically issued.

2.1.2.4 Accepting a referral to waitlist
If a service provider chooses to turn on the waitlist function in the provider portal, they will be able to accept electronic referrals to a waitlist. Accepting a referral to waitlist allows a client to be placed on a waitlist for a particular service until the service becomes available.

To accept waitlist referrals, the administrator for your organisation must ensure that ‘Waitlist availability’ for specific services is set to ‘On’. This procedure is described in the Quick Reference Guide – Create Service Delivery outlets and add Service information
1. Navigate to the ‘Service referrals’ page and view the ‘Incoming referrals’ tab.

2. Expand the client’s information in either the card or list view, and select ‘Accept to Waitlist’.


The referral will now appear in the ‘Waitlist’ tab in the ‘Service referrals’ page.
2.1.2.5 Retrieving a referral code

A client may choose to be issued with a referral code by assessors or My Aged Care contact centre staff. A referral code allows clients to visit different service providers to discuss their needs prior to choosing their preferred provider. If a service provider Team Leader has been given a referral code, they should follow the procedure below to retrieve the referral.

1. From the homepage select ‘Retrieve a referral code’.

Alternatively, from any other page you can select ‘Retrieve a referral code’ from the toolbar displayed at the top right corner of the portal, or by selecting the Menu button located above the ‘Home’ hyperlink, and selecting the ‘Retrieve a Referral Code’ from the side-bar which opens.
2. Enter the client's referral code and select the outlet in which services will be provided from. Select ‘Retrieve referral’.

If you are a team leader at the organisation, select the outlet you wish to refer the client to. Outlet team leaders will not have this option.

A confirmation message will display confirming the successful retrieval of the referral, and the referral will be added to your 'Incoming referrals' tab within the 'Service referrals' tile.

It is critical that you review the referral and client information and that you have decided to provide services to the client prior to accepting the referral. Only accept the referral if both the provider and client agree to commence services.
You will be directed to the 'Incoming referrals' page where you can view details of the referral. Depending on client preferences, and your capacity to provide services, you can either:

- accept or reject the referral for service(s);
- accept the referral to waitlist; or
- revoke the referral after acceptance

These processes are listed in Section 2.1.2.2 – 2.1.2.4.

A referral code will need to be reactivated if it has previously been accepted by another provider, a previously commenced service has ceased, or the time limited approval has lapsed. Clients and their representatives can now manage their referral codes via the client portal.

If you are a Home Care Package provider and encounter a client who would like to change their provider, they can reactivate their referral code via the client portal. For further information, refer the client to the My Aged Care Client Portal User Guide or call the My Aged Care contact centre on 1800 200 422.

Referrals for Home Care Packages will only be issued, usually via the provision of a referral code to the client, once a package has been assigned. Providers should note the ‘take up deadline’ by which they must have commenced services with a client for Home Care Packages or else the assigned package will be withdrawn.

2.1.2.6 Drawing a client into service from a waitlist

When a service becomes available for a corresponding referral in your waitlist, you can draw the client into service and commence service delivery.

Clients may be on a number of waitlists with other providers at any one time. If a service becomes available, and the client is 'Drawn down into service', the client will be removed from all other provider waitlists for that same service type.
1. Navigate to the ‘Waitlist’ tab in the ‘Service referrals’ tile in the provider portal.

![Waitlist tab in the provider portal]

Referrals that have been accepted to waitlist will be displayed.

2. Find the client referral that you want to accept to service and expand the client’s information by selecting the arrows on the card or list view. You are able to filter the results by expanding the ‘Filter’ functionality, sort the results by editing the sort order and selecting ‘Go’, or change the display of information between ‘Card’ or ‘List’ views. Select ‘Draw down into service’.

![Client referral details]

Prior to drawing down a client into service, be sure to review the referral summary and client record to confirm that you are still able to provide this service to the client.
3. Select the correct service item name/NAPS Service ID (if your organisational has more than one service/NAPS ID available for a service type) you wish to link the referral to. Confirm that you want to accept the referral by selecting ‘Accept’.

A confirmation message will appear confirming the acceptance of the referral. The referral has now been accepted into service and the client’s referral will now appear in the ‘Accepted services pending’ tab until service delivery information is recorded for the service.
4. To reject a referral that is on your waitlist, select ‘Reject referral’ and a reason for rejection, then select ‘Reject’. Providing a rejection reason assists assessors and the My Aged Care contact centre to support clients in accessing services.

<table>
<thead>
<tr>
<th>Tara SUMMER</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Aged 78 (1 July 1959), Female</strong></td>
</tr>
<tr>
<td><strong>Client contact details</strong></td>
</tr>
<tr>
<td>Preferred contact number</td>
</tr>
<tr>
<td><strong>About this referral</strong></td>
</tr>
<tr>
<td>Date issued</td>
</tr>
<tr>
<td>Date accepted</td>
</tr>
<tr>
<td>Outlet</td>
</tr>
<tr>
<td>Referral comments</td>
</tr>
</tbody>
</table>

The referral will be removed from your waitlist and will no longer be visible in the provider portal.
2.1.2.7 Notifications for overdue referrals in the provider portal

Team Leaders will see visual indicators in their ‘Incoming referrals’ tab for referrals that have not been actioned (accepted, rejected or waitlisted) within priority timeframes.

An email will also be sent to the email address connected to the outlet prompting them to action the referrals. In addition, these notifications will display in the ‘Tasks and notifications’ section of the provider portal, displaying as ‘Overdue referral’ tasks.
2.1.2.8  Detailed referral history

The ‘Referral history’ tab allows service provider Team Leaders and Staff Members to view referral history, including information on whether a referral was revoked or recalled.

Detailed referral information is available by selecting the arrow to the left of the referral (in list view or card view, respectively).
2.1.2.9 Referral priority status

Incoming service referrals are assigned a priority status (low, medium, high) based on a client’s level of function, the level of risk in relation to the care situation, and any other concerns that are relevant to the client’s circumstances identified during the screening or assessment process.

Service providers are required to action referrals (accept, reject or waitlist) within 3 calendar days of receiving an electronic referral for service or electronic referral for waitlist.

⚠️ Home Care Package approvals will not display a service priority.
3 Staff Member role

This section steps you through how to find a client, how to view client information and how to maintain client service details.

A person who performs the Team Leader role can perform the same functions as a Staff Member. Team Leaders also manage referrals as outlined in Section 2 (Team Leader role).

⚠️ You can only view client information for clients who have been referred to you or accepted by your outlet.

3.1 Finding a client

To find a client who has been referred to or accepted to service by your organisation, follow the procedure below.

**Step One:** Select 'Find a client’ from the home page.
Alternatively, (i) from any page in the provider portal, you can choose the ‘Find a client’ option from the tool bar at the top right hand corner of the page to find the referral for that client.

To enable easy navigation in the portal, the tool bar will display when your screen has a smaller resolution, and will not display when zoomed in. If you cannot see the tool bar, try zooming out or expanding your window.

Or (ii) by choosing the ‘Find a client’ option from the side menu by selecting the menu option available in the top left corner of the portal.
Step Two: On the ‘Find a client’ page, you can search for a client by entering the first name and/or last name of the client.

Any matching results will be displayed.
‘Advanced Search’ replaced ‘Show more find options’ for a consistent search experience across all tabs that offer a card and a list view. Advanced Search options available for ‘Find a Client’ include:

- Aged Care Payment Management System (ACMPS) number
- Aged Care User ID
- Centrelink Customer Reference number (CRN)
- Client Status
- Date of Birth
- Department of Veterans’ Affairs (DVA) card number
- First name
- Home contact number
- Last name
- Locality
- Medicare Card Number
- Postcode
- Preferred name
- State
- Suburb
- System for the Payment of Aged Residential Care (SPARC) number
3.1.1 Viewing client information

You can only view information about clients that have been referred to your organisation.

To view client information follow the steps below.

Once you have located the relevant client’s details using the procedure above, you can view information contained in the client record.

⚠️ You can view all information about a client, apart from their full address and contact details, prior to accepting a referral.

Select the client’s name from the list of search results.

Alternatively, you can access the client record from different points in the provider portal:

(i) In the ‘Find a client’ section by selecting the client’s name when in card view; or
(ii) by selecting 'Service referrals', selecting the expansion arrow on the client card in card view of expanded record in list view, and selecting 'View client record'.

![Image of the My Aged Care Provider Portal User Guide](image-url)
The ‘Referrals for my organisation’ page will be displayed.
A summary ‘snapshot’ of the client record is also available in PDF format by selecting the ‘View PDF of Client record’ from any tab in the client record, and includes client details, representative and carer details, notes, assessment history, care approvals and the client’s interactions with My Aged Care.

The client record contains client information displayed across eight tabs, which are described in more detail below.

The client record contains tabs with the following information:

- Client summary
- Client details
- Approvals
- Plans
- Attachments
- Services
- My Aged Care interactions
- Notes

1. The ‘Client summary’ tab contains a real-time client journey tracker (Client tracker) and a dashboard of key information (Client summary) about the client’s interactions with My Aged Care.

The Client tracker is a visual display of what stage a client is at in their My Aged Care journey, including the client’s current position and any next steps that need to be taken by the client.
The Client summary provides information about the client’s interactions with My Aged Care, including:

- Assessments
- Approvals
- Service recommendations
- Service delivery status
- Client goals
- Reablement and linking support periods (where available)

The Client tracker and Client summary information can be printed in a similar format as it is displayed within the portal by using the *print page* button on the right hand side of each heading.

The Client Tracker will be collapsed by default, and can be expanded using the arrows on the right of the heading.
2. The 'Client details' tab contains basic demographic and contact information about the client. It is also where you can view details about the people connected to the client in the system, such as the client’s primary contact person, GP, carer, emergency contact, representative or other support person.

The client details tab also has links to current notes, the client’s current support plan, and any services that are in place.

If a client’s status is ‘Deceased’, the client’s record will be read-only and you will not be able to make any edits. A banner will be displayed on all tabs of the client record. If the client’s status is incorrect please contact the My Aged Care service provider and assessor helpline on 1800 836 799.

The Department has been notified that this client is deceased. Please contact us on 1800-836-799 if this is incorrect.
3. The ‘Referrals for my organisation’ tab displays service referrals that have been issued to or accepted by your organisation.

<table>
<thead>
<tr>
<th>Social Support Group:</th>
<th>Meals: At Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referral Accepted on 11 February 2019</td>
<td>Referral Accepted on 11 February 2019</td>
</tr>
<tr>
<td>About this referral</td>
<td>About this referral</td>
</tr>
<tr>
<td>Issued Date</td>
<td>Issued Date</td>
</tr>
<tr>
<td>11 February 2019</td>
<td>11 February 2019</td>
</tr>
<tr>
<td>Due Date</td>
<td>Due Date</td>
</tr>
<tr>
<td>26 February 2019</td>
<td>26 February 2019</td>
</tr>
<tr>
<td>Frequency</td>
<td>Recommended service frequency</td>
</tr>
<tr>
<td>2 days per week</td>
<td>1 day per week</td>
</tr>
</tbody>
</table>

4. The ‘Plans’ tab contains detailed information about current and previous screening and assessments the client may have had, including client goals, recommendations and motivations, as well as the resulting support plan.

Select the arrow next to each heading to display detailed information captured during the assessment.
Providers will be able to access read-only versions of a client’s support plan and previous screening and assessments. This information can be printed if required.

For all assessments completed prior to Release 12 (July 2018), the printed assessment will continue to display in the existing format.

5. The ‘Attachments’ tab contains documents that have been attached to the client record. To upload an attachment to the client record, select ‘Add an attachment’ from this tab.
There are four different attachment types that can be added to a client's record:

- **Assessment Attachments** are any documents that are relevant to the client's assessment, for example, clinical notes or a discharge summary.
- **Other Attachments** are documents that relate to the client's general circumstances, for instance, documents related to the nomination of a representative or Occupational Therapist drawings used in home modifications.
- **Correspondence** are documents/letters that are generated in My Aged Care, in relation to home care packages.
- **Sensitive Attachments** are documents for clients of a sensitive nature.

Where a client record has a **Sensitive Attachment**, provider(s) who have received a referral for or are providing services to a client will be notified that a **Sensitive Attachment** exists for the client. Contact the assessor, or the My Aged Care provider and assessor helpline to access information within the **Sensitive Attachment**.

If an attachment has been uploaded in error, please contact the My Aged Care service provider and assessor helpline on 1800 836 799 for deletion.

6. The ‘Approvals’ tab contains a view of a client’s approvals for aged care services under the **Aged Care Act 1997**.

![Approvals Table]

- **Current care approvals**
  - **Residential Permanent**
    - Delegate decision completed and submitted to DHS
  - Approval start date: 11 February 2019
  - Processing status: Being Processed
  - Source system: Gateway
  - DHS prior approvals last updated: Never
If a client has a Home Care Package approval, the details of pending packages and assigned packages will be displayed underneath ‘Current care approvals’. Further details of the changes to Home Care Packages can be found on the *Increasing Choice in Home Care* page on the Department of Health website.

### Package pending (not assigned)
- **Agreed minimum package**: Home Care Package Level 2

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Priority for home care services</td>
<td>Medium</td>
</tr>
<tr>
<td>Expected time to approved package</td>
<td>Calculation Pending for Home Care Package Level 4</td>
</tr>
<tr>
<td>Interim package</td>
<td>Home Care Package Level 2 assigned on 19 February 2019</td>
</tr>
</tbody>
</table>

### Assigned package awaiting take-up

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interim Home Care Package Level 2 - Take-up by 16 April 2019</td>
<td></td>
</tr>
<tr>
<td>Package assigned</td>
<td>19 February 2019</td>
</tr>
<tr>
<td>Take-up deadline</td>
<td>16 April 2019</td>
</tr>
<tr>
<td>Status</td>
<td>Assigned effective 19 February 2019 with reason: Package Assigned</td>
</tr>
</tbody>
</table>
7. The ‘Services’ tab contains a record of:
   - Services the client is currently receiving
   - Services that are pending (Not yet in place)
   - Service referrals yet to be accepted
   - Previous services the client has received.

8. The ‘My Aged Care Interactions’ tab will show the client’s history of interactions with My Aged Care, for example, a phone call to the My Aged Care contact centre.

9. The ‘Notes’ tab contains notes that have been created about the client.
There are different types of notes, listed in the table below.

<table>
<thead>
<tr>
<th>Note type</th>
<th>Who can add?</th>
<th>Who can view?</th>
<th>Description</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client story</td>
<td>Assessor</td>
<td>Client</td>
<td>A summary of the client’s current circumstances.</td>
<td>Mrs Jones has just been discharged from hospital and is seeking help at home.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Assessor</td>
<td></td>
<td>Lives with her husband and has early onset dementia.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observations</td>
<td>Provider</td>
<td>Provider</td>
<td>Observations from service provider and/or assessors’ interactions with the client.</td>
<td>There is a dog on the property.</td>
</tr>
<tr>
<td></td>
<td>Assessor</td>
<td>Assessor</td>
<td></td>
<td>Mrs Smith seems more energetic than she did during my last visit.</td>
</tr>
<tr>
<td>Other</td>
<td>Client</td>
<td>Client</td>
<td>Additional information about the client.</td>
<td>Jennifer has planned respite on 01/08/2017.</td>
</tr>
<tr>
<td></td>
<td>Provider</td>
<td>Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Assessor</td>
<td>Assessor</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

⚠️ When the My Aged Care contact centre staff or assessors add a ‘Sensitive note’ about a client, all service providers who are sent a referral will see a flag informing them that there is a sensitive note about the client, and instructing them to call the My Aged Care contact centre for more information.

- This client has a sensitive note on their record. Please call My Aged Care on 1800 200 422 for further information.
10. The ‘Tasks and Notifications’ tab will display all tasks and notifications for a singular client.

You will only be able to see tasks and notifications that are associated to your outlet and for clients you are providing services to. Assessors will be able to see all tasks and notifications for clients.

3.2 Viewing tasks and notifications

You can view tasks and notifications in the provider portal. The steps to view tasks and notifications are outlined below.

Administrators at the organisation or outlet level can manage task and notification email preferences for their organisation/outlets. This process is described in Section 2.4.2 *(Managing task and notification preferences)* of the Provider Portal User Guide Part One – Administrator Functions.
Step One: From the provider portal homepage select ‘Tasks and notifications’.

Step Two: In the ‘Notifications’ tab, you will be able to view notifications from the last 30 days that are relevant to your role.

The earliest date that the notifications are displayed from is visible under the filter options.

Any notifications older than 30 days will be removed and will no longer be visible in the portal.
Alternatively, if you want to see all tasks and notifications for a singular client, navigate to the ‘Tasks and Notifications’ tab in the client’s record to see all relevant tasks and notifications for that client.

In the ‘Notifications’ tab, you can sort notifications by:

- Received date
- Category
- Title/Description
- Aged Care User ID
- Client name

---

You will only be able to see tasks and notifications that are associated to your outlet and for clients you are providing services to. Assessors will be able to see all tasks and notifications for clients.
Notifications that have been marked as important for your outlet by your outlet administrator will be displayed with a visual indicator. The managing preferences section in this guide explains how to set notifications as important.

You can also remove individual or bulk notifications from your portal by selecting the ‘Remove’ icon.

2. You can search for specific notifications using the filter options, or using custom filters in ‘Advanced Search’. Select the arrows to the right to expand or collapse the filter options.

You can filter notifications by ‘Date Received’ and navigate directly to the associated client record by selecting ‘View client record’.

To apply custom filters, select ‘Advanced Search’ and choose filters from the drop down menu and select ‘Add Filter’ for each filter you want to apply.
The hyperlink under the notification description will take you directly to the individual record and the section of the portal where you can view more information about the notification, or complete any action that may be required.

For example, selecting the ‘Incoming referrals’ link in a ‘New referral’ notification will take you directly to the ‘Incoming referrals’ tab where you can view and action the new referral.

You must be assigned an administration role to manage task and notification preferences for your organisation or outlet. For further information please visit the Department’s website or My Aged Care Provider Portal User Guide: Part One – Administrator functions.
3.3 Completing identity verification

During the registration process, a client record is created. Client identification information is verified against records held at the Department of Human Services to ensure that duplicate client records are not created.

To complete the identity verification process, assessors or providers (whoever visits the client first) need to sight two types of client identification documents.

The steps for recording that client identification has been sighted are outlined below.

⚠️ It is expected that whoever has contact with the client in the first instance (i.e. an assessor or service provider) will sight the client identification and record this information on the client record via the assessor or provider portal.

**Step One:** From the provider portal homepage, select ‘Find a client’.

![Provider Portal Screenshot](image-url)
You can search for a client by their first name, last name and by the clients aged care ID.

Alternatively, you can access the client record from your ‘Accepted services pending’ tab in the ‘Service referrals’ section.
Step Two: Once you have navigated to the client record of the client for whom you wish to conduct a wallet check, select ‘Conduct a wallet check now’.

![Client summary]

The client has not yet completed a wallet check. Conduct a wallet check now.

**Recommendations and approvals**

- **Help at home - Entity level support (Comprehensive Home Support Programmes)**: Started on 12 February 2019 - Aged Care Inc - Outlet 1, 02 2821 2463
- **Meals**: Started on 12 February 2019 - Aged Care Inc - Outlet 1, 02 2821 2463
Step Three: Select the appropriate option from the list:

- ‘My client has identification’
- ‘My client has no valid identification this time’
- ‘My client will be unable to produce valid identification’.

If your client is able to provide you with identification, select ‘My client has identification’ and go to Step Four.

If your client is unable to provide you with identification, you can select ‘My client has no valid identification this time’, or ‘My client will be unable to produce valid identification’ and go to Step Five.

Step Four: If you selected ‘My client has identification’, select the identification documents you sighted from the list provided, and enter the date you performed the wallet check.

Step Five: Select ‘Save details’ and this information will be updated on the client record.

Until client identification documents have been sighted, the status of the Wallet Check will remain incomplete on the client record.
3.4 Adding service information

Service delivery information should be recorded on the My Aged Care client record for all clients accepted for service. This includes service commencement date, service frequency, intensity and service end dates where a service has ceased. This information should be recorded within 14 calendar days of acceptance, and providers will receive notification reminders prompting them to enter this information if it is not completed within this timeframe.

⚠️ For Home Care Packages and Residential Care Permanent services, the service commencement date will be automatically populated from Department of Human Services records and will be read-only.

To add information about the services being delivered to the client follow the steps below.

**Step One:** Select ‘Service referrals’ from the provider portal homepage. Alternatively if you know the client’s name you can use the ‘Find a client’ tile.

**Step Two:** Select the ‘Accepted services pending’ tab.
Once you have located the relevant client’s service referral in the ‘Accepted services pending’ tab, you can add service delivery information for the service.

**Step Three:** Select the arrow on the ‘Client card’ to view the expanded client card view and select ‘Add service information’

Alternatively, you can select ‘Add service information’ in the expanded list view.

The ‘Add service information’ screen will be displayed.

1. **Step Four:** When adding service information for residential care including Respite, Transition Care, Short Term Restorative Care, and Commonwealth
Home Support Programme services you must enter the ‘Service start date’, input a ‘Frequency’, and select an “Intensity” from the drop-down list (all three inputs are mandatory). Enter any additional information in the remaining fields and select ‘Save changes’.

Add service information

To supply specific service delivery information select ‘Other – Specify’ and enter additional service delivery information in the free text field.

Once saved, the client will move from the ‘Accepted services pending’ tab to the ‘Services in place’ tab, and the populated service information will display under the ‘Services’ section within the client record.

When updating Home Care Package information you must enter a ‘Frequency’ and select an “Intensity” from the drop-down list.

The ‘Service start date’ will update once the commencement date has been received from the Department of Human Services.

Enter any additional information in the remaining fields and select ‘Save changes’.
Once saved, the client will only move from the ‘Accepted services pending’ tab to the ‘Services in place’ tab if a ‘Service start date’ is present. The populated service information will now display under the ‘Services’ section within the client record.

Service information for a Home Care Package will contain further information about the package, such as if the approval is for a higher level than the assigned package then this means that the client has accepted an interim package and may remain on the national priority system to receive a package at their approved level. Further information can be found on the Department’s [website](https://www.agedcare.health.gov.au/myagedcare).

The service start date is automatically updated when the Aged Care Entry Record (ACER) is processed by the Department of Human Services. To avoid errors in receipt of your funding, you must ensure you have accepted a referral for service for a client prior to submitting the ACER.
3.5 Updating service information

The ‘Services in place’ tab in the ‘Service referrals’ section of the provider portal displays accepted services that have service delivery information recorded.

1. Navigate to the ‘Services in place’ tab by selecting ‘Service referrals’ from the home page, the banner at the top of the screen from any page within the portal, or the menu bar in the top left.

2. For the service you are updating, expand the ‘Client list’ to view the expanded client list view and select ‘Update Service Information’.
Alternatively, you can select ‘Update Service Information’ in the expanded card view.

3. Update service information and select ‘Save changes’. This information will now be updated on the ‘Services in place’ tab and the ‘Services’ tab in the client record.

Service delivery information can also be updated from the ‘Services’ tab in the client record by selecting ‘Update service information’ for the relevant service.
Ceasing a client’s service with the reason of ‘Client deceased’ will change the client’s status to ‘Deceased’ and make the client record read only. Any unaccepted service referrals will be recalled and the client’s access to the client portal will be revoked.

**Important:** Where a client is active in the national priority system or has been assigned a Home Care Package, this will remove the client from the national priority system and withdraw any assigned Home Care Packages.

### 3.5.1 How do I record a note of changes made to client service information?

My Aged Care contact centre staff, assessors and providers can view and add different types of notes about clients in the My Aged Care portals.

If there is significant change to a client’s service delivery information, it is recommended that providers update the service information (shown in the previous steps) and add a note to the client record.

If a client’s needs or circumstances have changed significantly since their last assessment, a review of the client’s Support plan may be required. The process for requesting a review of a client’s Support plan is described in Section 3.8.

Providers can add the following notes to the client record:

- **Observations:** Observations from service provider and/or assessors’ interactions with the client. Assessors and providers can view these notes.

- **Other:** Additional information about the client. Assessors, providers and clients can view these notes.

Providers can only view notes of type ‘Client story’, ‘Other’ and ‘Observations’.

When My Aged Care contact centre staff or assessors add a ‘Sensitive note’ about a client, a flag will appear on the client record advising the provider to call the My Aged Care contact centre for more information. Information on the content of the sensitive note will only be provided where relevant to the provider.
To add a note to the client record, follow the steps below.

1. Navigate to the client record (refer to *QRG: Navigating and viewing information in the client record*) and select ‘Notes’.

   Notes on the client record will be displayed.

2. Select ‘Add a Note’, and choose the note type and a description. Once this information is populated, you add the note to the client’s record by selecting ‘Save’.
Alternatively, from the ‘Client details’ tab, select ‘Add a note’ from the ‘Current notes’ section.

<table>
<thead>
<tr>
<th>Client summary</th>
<th>Client details</th>
<th>Referrals for my organisation</th>
<th>Plans</th>
<th>Attachments</th>
<th>Approvals</th>
<th>Services</th>
<th>My Aged Care interactions</th>
<th>Notes</th>
</tr>
</thead>
</table>

### About Mike

**Personal information**
Born 11 February 1932, Australian, born in Australia, married (registered/de facto), with partner.

**To contact Mike**
Contact details

**Primary contact person**
Mike HILL (self)

**Communication requirements**
- Prefer to speak English

### Address details

- **Home address:** MIRELLA W A 196 GOZZARD STREET GUNGAHIL, ACT, 2912
- **Service delivery address:** MIRELLA W A 196 GOZZARD STREET GUNGAHIL, ACT, 2912
- **Send any correspondence to:** MIRELLA W A 196 GOZZARD STREET GUNGAHIL, ACT, 2912

### Relationships

### Current notes

![Add a note button]

⚠️ You can add notes of type ‘Other’ and ‘Observations’ to the client record of any clients that have been referred to your outlet. For example, clients in your ‘Incoming referrals’ tab.

These notes will be visible to My Aged Care contact centre staff, assessors, and other providers delivering services to that client. The blue ‘?’ is a help hint which explains the various note types and who gets to see them, as there is a different audience per note type.

For further information about note types and who can view them, refer to the *Quick Reference Guide – Navigating and viewing information in the Client Record* available on the Department’s website.

For further information about note types and who can view them, refer to Section 3.1 (*Finding a Client*).
3.5.2 How do I request an extension to the client’s care?

Periods of Transition Care can be extended to a maximum of 42 consecutive days; whilst periods of Residential Respite care can be extended for a maximum of 21 day non-consecutive periods. Providers can request a care extension via the My Aged Care provider portal. This request will be sent to the Delegate for approval.

A care extension may only be granted for the approved level of care (ie. Residential Respite Low or High). If a client needs a higher level of respite, they will require a new assessment. This can be facilitated by requesting a Support Plan review in the provider portal.

Care extensions are effective from the commencement date within the request pending the Delegate’s approval. Extension requests cannot be backdated.

To request a care extension, follow the steps below.

1. Find the client you wish to request a care extension for, by navigating to the ‘Services in Place’ tab and expanding the card or list view for the client and select ‘Request transition care extension (care type referenced will vary depending on relevant extension type)”
Alternatively, locate the client through the ‘Find a client’ functionality, and navigate to either the ‘Services’ or ‘Approvals’ tab of the client record and select ‘Request transition care extension’.

2. Complete all mandatory information indicated in the extension request pop up. The mandatory information will depend on the care type the extension relates to. Once completed, selected ‘Submit request’.

You will receive confirmation that the care extension request has been submitted to the Delegate.
You will also receive a notification that the request has been submitted:

You will receive an email notification when the Delegate has made a decision on the care extension request.
3.5.3 How do I request a review of a client’s support plan?

If a client’s needs or circumstances have changed significantly since their last assessment and their support plan no longer reflects their current situation, you can request a review of the client’s support plan. The assessor will conduct a review of the client’s situation which may lead to a new assessment of the client’s needs.

⚠️ Providers are encouraged to contact the assessment organisation prior to submitting the request and to provide as much information as possible to inform of the client’s need for, and urgency of, a support plan review or new assessment.

This information is available in the detailed assessment history information in the client’s support plan in the ‘Plans’ tab of the client record. If a client has not previously had an assessment through My Aged Care, a request for review will be sent to the My Aged Care contact centre.

To request a review of a client's support plan, follow the steps below.

1. Select ‘Service referrals’ from the homepage.
2. Select ‘Services in place’, locate the client for whom you wish to request a review and select ‘Request a review’.

3. Alternatively, a link to request a review will display at the top of any page in the client’s record.
4. Complete all mandatory fields within the review request.

Once you select a subsidised care type under “What type of subsidised aged care is the client receiving?” a second list for “Primary reason for Support Plan Review Request” will display. Different questions will need to be completed at this step depending on which option is selected.
If the client is receiving a Home Care Package or combination of Home Care Package and Commonwealth Home Support Programme (CHSP), it will be mandatory for a care plan and budget to be attached to the review request. The request will not be able to be submitted without this information.

Select browse to choose a document for upload. Complete all mandatory fields and click “upload” to complete.
Once the documents are successfully uploaded, they will display in the review request.

**Primary reason for Support Plan Review Request**
- Request for additional CHSP services or changes to CHSP services for clients who are only receiving CHSP services currently
- Request for additional CHSP services for clients who are in receipt of a HCP
- There is a change in a client’s circumstances and they have an immediate need for access to Home Care Package services
- There is a significant change in the client’s needs and additional Aged Care Act 1997 (the Act) based aged care services are required

Please identify what services the client is currently receiving.

Please identify options explored with client to increase their current support.

Please provide a copy of the client’s care plan and individualised budget.

**Care plan: Care Plan.docx**
**Individualised budget: Budget.docx**
Clicking the icon next to the attachment name will delete the attachment immediately. A confirmation message will not display.

5. Once all mandatory fields have been completed, tick 'I have reviewed the information on this page and I confirm that it is correct' then continue to 'send review request'

6. A confirmation will display if the request is submitted successfully.

You cannot submit a request for review if there is already an existing assigned review for the client in the assessor portal or an assessment is currently being undertaken.

You should discuss the request with the assessor who conducted the client’s most current assessment.

This information can be found in the client’s assessment information, with more detailed information available in the assessment history information available in the support plan in the ‘Plans’ tab of the client record.
For further information about a client’s Support plan review, refer to *When to request a Support Plan Review* fact sheet, available on the Department’s website.
Attachment A: First time login to the provider portal

Before you log in to the provider portal for the first time, you need to activate your account by completing the following steps.

⚠️ If you are using VANguard FAS for secure authentication step two below does not apply. For more information on VANguard FAS, visit https://agedcare.health.gov.au/programs/my-aged-care/vanguard-federated-authentication-service-fact-sheet

⚠️ You must have an individual AUSkey linked to your organisation to access the provider portal. For more information, visit https://abr.gov.au/AUSkey/.

Step One: Go to the ‘Information for service providers’ section of the Department’s website (https://agedcare.health.gov.au/our-responsibilities/ageing-and-aged-care/programs-services/my-aged-care/information-for-service-providers) and select the ‘My Aged Care Provider Portal’ link. The provider portal can also be accessed at: https://myagedcare-serviceproviderportal.dss.gov.au

Step Two: An Australian Government ‘Authentication Service’ screen will be displayed. Select your AUSkey credentials from the drop down list, then enter your AUSkey password and select ’Continue’.
Step Three: A ‘Request activation code’ screen will be displayed. Enter the email address that is linked to your portal user account, and select ‘Continue’.

Step Four: You will receive an email with an activation code. You will only need to use this activation code when logging in for the first time.

⚠️ If you do not receive an email with your activation code, contact your Organisation Administrator or the My Aged Care service provider and assessor helpline on 1800 836 799.

Step Five: Enter the activation code you received, and select ‘Confirm’. Your account has now been successfully activated.
Your activation code is only valid for five days. If you require a new activation code, select ‘Resend activation Code’.

**Step Six:** Select ‘Go to the My Aged Care provider portal’ to be directed to the provider portal.

**Step Seven:** The provider portal home screen will be displayed.
You have now set up access to the provider portal. The next time you log in, follow the steps in Section 1.6.
Attachment B: Generating reports and accessing forms

Providers can generate reports and access forms via the provider portal. You are also able to use the ‘Reports’ feature to print documents, including completed National Screening and Assessment Form (NSAF) PDF reports and client record PDFs.

1 Generating reports

Team Leaders and Staff Members can generate reports. The steps to generate a report are outlined below.

**Step One:** Select ‘Reports and documents’ from the homepage. The ‘Reports and forms’ page will be displayed.
Step Two: The ‘Reports and forms’ page features a ‘Reports’ tab, a ‘Forms’ tab and a ‘Links’ tab. The reports tab displays a list of ‘Recently Requested Reports’ and ‘Reports’.

<table>
<thead>
<tr>
<th>Reports and documents</th>
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<tbody>
<tr>
<td>Reports</td>
</tr>
</tbody>
</table>

My Reports

<table>
<thead>
<tr>
<th>Name</th>
<th>Requested Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>No Records found</td>
</tr>
</tbody>
</table>

Reports List

<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Formats</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>PDF</td>
</tr>
</tbody>
</table>

The ‘Recently Requested Reports’ will display client record PDFs or NSAF reports that have been generated by the user.

Reports available under the ‘Reports and forms’ tab are the Workload Management report and Quality Indicators reports.

For information on how to generate quality indicator reports please refer to the National Aged Care Quality Indicator Program Manual 1.0.

Step Three: To generate a report, select the name of the report in the ‘Reports’ list.

<table>
<thead>
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<tbody>
<tr>
<td>Reports</td>
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My Reports

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<td>PDF</td>
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For further information, go to My Aged Care 1800 836 799 | www.agedcare.health.gov.au/myagedcare
**Step Four:** Select the Outlet ID, enter a start and end date, and an output type (CVS or PDF), then select ‘Request report’. If you do not want to generate the report, select ‘Cancel’.

---

**2 Viewing reports**

The steps to view reports are outlined below.

**Step One:** Select ‘Reports and documents’ from the homepage. The ‘Reports and forms’ page will be displayed.
**Step Two:** In the ‘Recently Requested Reports’ list, select ‘View’ beside the report you would like to view.
3 Accessing forms

The steps to access forms are outlined below.

**Step One:** Select ‘Reports’ from the homepage.

![Welcome Ben](image)

**Step Two:** Select the ‘Forms’ tab. A list of all forms available will be displayed.

![Reports and documents](image)

Forms

Application for Emergency Care - February 2017 [pdf 311.34KB]