

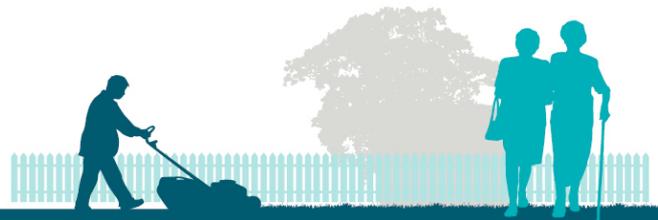


Australian Government
Department of Social Services

An overview to improve aged care services for your community

**Building capacity for the emerging aged care needs of
culturally and linguistically diverse communities**

DSS 1548.03.18



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References to the *Aged Care Act 1997*, *Aged Care Principles* and any other legislation are current as at 22 April 2015. Amendments to the legislation may change references listed in this document.

A current version of this Act can be access on the Comlaw website.

An overview to improve aged care services for your community

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The Australian Government [Department of Social Services \(DSS\)*](#) engaged Outcomes Plus Pty Ltd to undertake this project to build capacity for the emerging [aged care*](#) needs of [Culturally and Linguistically Diverse \(CALD\)*](#) communities.

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- [Partners in Culturally Appropriate Care \(PICAC\)*](#) in every state and territory.
- Alzheimer's Australia.
- Australian Population & Migration Research Centre at the University of Adelaide.
- Council on the Ageing (COTA), Federation of Ethnic Communities' Councils of Australia (FECCA), the state and territory [Ethnic Communities Council \(ECC\)*](#) and migrant resource centres.

We would also like to express our appreciation to the many CALD organisations and community groups that have generously given their time to help us to understand the specific issues and concerns of their communities in accessing [aged care services*](#).

*see explanation in Glossary, Section 10

1 Background

This overview to improve aged care services for your community (**Overview**) is the first part of a reference document prepared specifically for CALD community groups and/or organisations in Australia.

This **Overview** is for CALD community groups and organisations who are interested in responding to their community's aged care needs.

This **Overview** is a broad document that will:

- Help you to understand the aged care industry in Australia.
- Show you how to apply to become an [approved provider*](#) of [home care*](#) places and/or [residential aged care*](#) places.
- Guide you through the Aged Care Approvals Round (ACAR) application process so your CALD community group and/or organisation can seek to access culturally appropriate aged care services subsidised by the Australian Government.

*see explanation in Glossary, Section 10

Changes were announced in the 2015-16 Budget to ensure the aged care system in Australia continues to meet the needs of an ageing population. Home Care Providers will benefit from reduced red tape as they will not have to apply for home care places through the annual Aged Care Approvals Round after 2015.

This **Overview** refers to a second reference document, the guide to improve aged care services for your community (the **Guide**), which provides more information about things raised in this **Overview**, including the legislative requirements to become an aged care approved provider. The **Guide** is available on the [DSS website](#).

It is hoped that this material will also be of assistance to all prospective providers of aged care services and particularly those from CALD communities seeking to address their emerging aged care needs.

This **Overview** has:

- Asterisks (*) – that tell you a word or phrase is explained in the glossary.
- GO TO> signs – that tell you where you can find further information either in this **Overview**, the **Guide** or in other places.

2 The aged care industry in Australia

In Australia, there are different types of aged care services:

1. Home care places delivered in a person's home and subsidised by the Australian Government under the [Aged Care Act 1997 \(the Act\)*](#).
2. Residential aged care places delivered in an aged care facility and subsidised by the Australian Government under the Act.

3. Community care programmes delivered in a person's home or in a community setting, and jointly funded by state/territory governments and the Australian Government.¹
4. Other services delivered in a person's home or a residential aged care facility that are privately funded.

This **Overview** is about home care places and residential aged care places (1 & 2 above). To provide these types of aged care services (with some funding from the Australian Government), you will need to comply with the Act.

This **Overview** will help your community group or organisation to understand the requirements of the Act. It outlines how to apply to become an aged care approved provider and how to apply for home care places and residential aged care places.

To receive an allocation of aged care places, your community group or organisation will also need to receive approval to be a provider of aged care. This approval allows an entity (your organisation) to receive subsidy payments from the Australian Government to provide aged care services.

If your community group or organisation does not want to become an aged care approved provider, there is information about other ways you might help your community to access aged care services – home care and/or residential aged care.

*see explanation in Glossary, Section 10

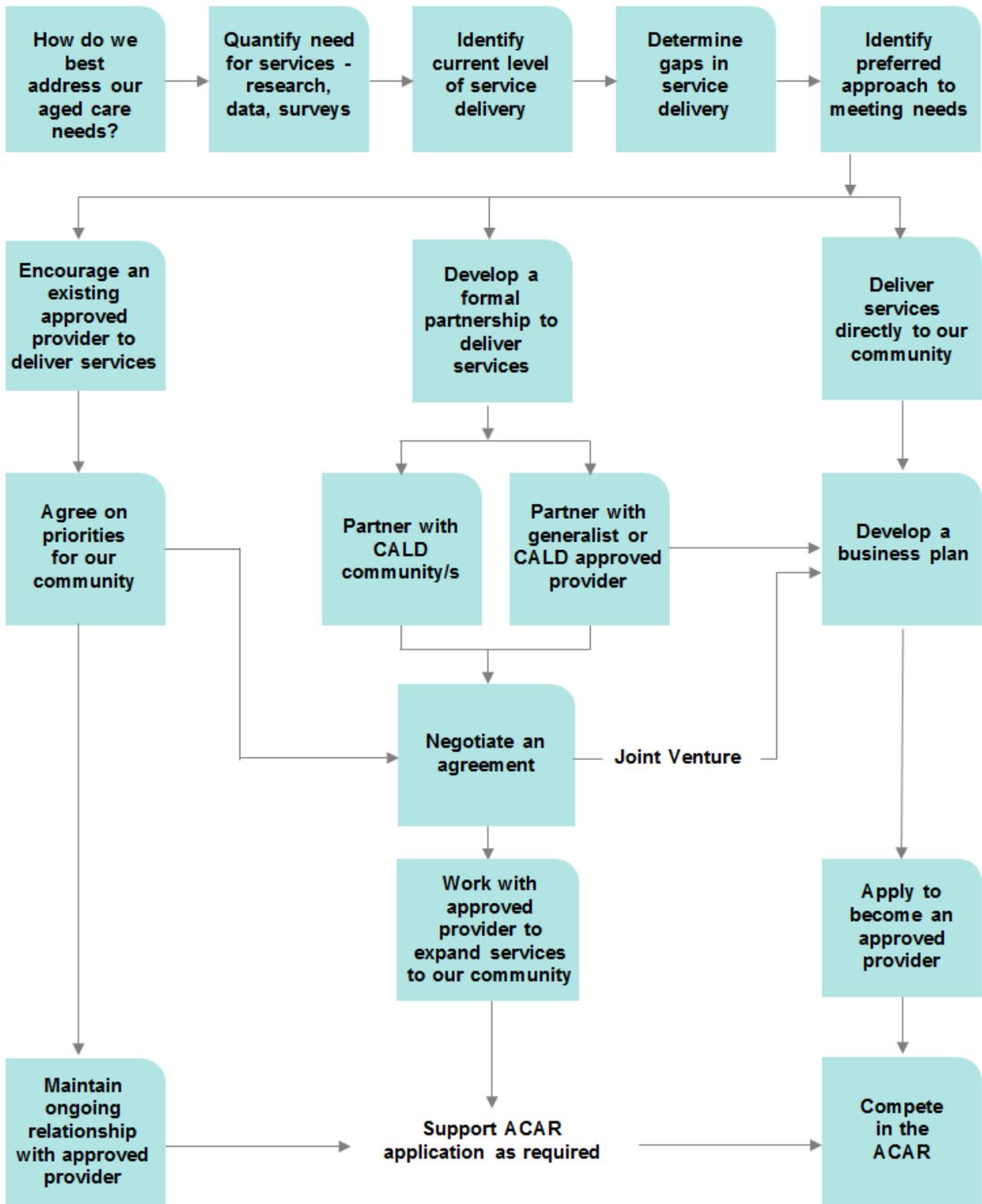
3 Options for meeting your community's aged care needs

The following process will assist CALD community groups and organisations to decide the best way they can help their community to access culturally appropriate aged care services.

Figure 1 outlines options for meeting a community's aged care needs. It lists five steps starting with the question of how best to address aged care needs, which leads to quantifying this need, which leads to identifying current service delivery, which leads to determining service delivery gaps and then identifying how to meet this need.

¹ **Note:** Community care programmes, such as Home and Community Care (HACC)*, National Respite for Carers Programme (NRCP), Day Therapy Centres (DTC), Assistance with Care and Housing for the Aged (ACHA) programme have been consolidated to form the Commonwealth Home Support Programme (CHSP)*, which commenced 1 July 2015 in most states, as part of the changes to aged care.

Figure 1: Options for meeting your communities aged care needs



At the end of these five steps, there are three options.

Option one involves encouraging an existing approved provider (or providers) to deliver services, agreeing on community priorities and maintaining a relationship with the approved provider (or providers).

Option two involves developing a formal partnership with other CALD communities or an existing approved provider (generalist or CALD), negotiating an agreement with this partner and working with this partner to expand services to your community.

Option three involves delivering services directly to your community, developing a business plan and applying to become an approved provider.

With option one and two, your organisation would support an ACAR application as required.

With option three, your organisation would apply for residential aged care and home care places in the ACAR.

The following pages of the **Overview** will briefly go through this process.

4 Understand the aged care needs of your community

Good research and data collection will define your community's aged care needs.

Sometimes people think that aged care services are needed for a particular community because of their own personal experience caring for their parent or relative. Sometimes this experience can be shared by a number of families within a community.

While this personal experience is important, research and data collection present stronger evidence that will better support applications for aged care service places.

Research and data collection that supports personal experience includes:

- Demographic data from the Australian Bureau of Statistics (ABS) about people most likely to need aged care services:
 - Data on people over 80 years old provides a picture of immediate need.
 - Data on people over 70 years old is used for medium term planning and by the Australian Government.
- Projections about the increase in the number of older people in the next 10 to 20 years that identifies particular CALD groups relevant to your community.
- Surveys of your community and information collection, for example from existing aged care services or governments.
- Research from governments and universities, for example population planning and migration data.
- Formal feedback from aged care services, network meetings, organisations such as PICACs or a peak body such as the ethnic communities council in your state/territory.

- Waiting list information from your own organisation with information about special needs for older people and phone log requests.



GO TO> [the ABS demographic analysis](#)

GO TO> [the Guide for more information about understanding the needs of your community](#)

Assessment of your findings against the Australian Government's [planning ratio*](#) will provide the actual evidence in identified service gaps in identified regions. The Australian Government's planning ratio is 125 aged care places per 1,000 people aged 70 years and over, comprising of 80 residential aged care places and 45 home care places by 2021-22. The Australian Government determines the number of places to be allocated each year in order to meet this ratio.

This research and data collection will help you to identify how your community accesses these services and how these services provide culturally appropriate care.

The conclusion CALD community groups or organisations may come to is that there are only a few or no approved providers that are sensitive to the particular needs of their community – that there is a gap in service delivery.

You are now ready to identify your preferred approach to filling this gap and determining how these needs can best be met.

*see explanation in Glossary, Section 10

5 Think about how the aged care needs of your community can best be met

You can meet the needs of your community in different ways. The research and data you have collected will help your community group or organisation to:

- Encourage or help existing approved providers to meet the needs of your community by talking to them and agreeing on the aged care needs of your community.

OR

- Partner with other organisation/s to improve access to culturally appropriate aged care services such as like-minded CALD community group/s or organisation/s, or existing approved providers.

OR

- Apply to become an approved provider and apply for home care places and/or residential aged care places.

Before examining these options, your community group or organisation will need to assess the resources you might need for each option. These resources might include property, staff, reporting systems, skills and finance.

a. Encouraging or helping existing approved providers

Existing approved providers may need support from CALD community groups or organisations to provide culturally specific services.

Encouraging or helping existing approved providers to meet the needs of your community, could include:

- Helping to recruit appropriate care workers.
- Marketing specific aged care services to your community.
- Providing support to the existing approved provider in the development of their ACAR application.
- Fundraising by your community for expenditure items.

This approach may expand the delivery of services to your community, however your organisation may have limited influence over how the services are operated.

An approved provider may seek your active support to expand their services and/or to apply for additional home care places or residential aged care places. In this situation, it is important to have an agreement that explains your expectations of the approved provider and how future relationships will be managed.

GO TO> [the Guide \(Section 7.4\) for more information about agreements with approved providers](#)

b. Partnering with other organisation/s

Sometimes there will be two or more CALD community groups or organisations that can work together to deliver aged care services.

Sometimes there are existing approved providers that provide or are interested in providing tailored home care places and/or residential aged care services for people from CALD communities. Existing approved providers may also deliver ethno-specific aged care services to older people.

There may also be CALD approved providers who are interested in extending their provision to other CALD communities.

It is important to be clear about the relationship with your partner organisation from the start, especially:

- The services to be delivered by the partnership.

- What you agree to contribute in the partnership, for example, culturally appropriate training, volunteers, fundraising.
- What your partner organisation is expected to contribute, for example, carers who have appropriate training in culturally appropriate care and/or speaking a specific language.

GO TO> [the Guide \(Section 7\) for more information about some of the problems or issues with partnerships](#)

An agreement with a partner organisation is often put in writing as either a letter of intention or a formal obligation. The form of the agreement depends on the parties and their need to be legally bound to the terms of the agreement. Examples of these are a service agreement or a [Memorandum of Understanding \(MoU\)](#)*.

It is important that the partnership provides the best outcome for your CALD community. Check that your partner organisation's values and principles are aligned with your community.

*see explanation in Glossary, Section 10

c. Delivering aged care services

CALD organisations can form the view that the best way to meet their community's aged care needs is to establish their own home care service or residential aged care facility.

This may take the form of ethno-specific services, culturally related services (e.g. based on religion or language) or multicultural services that deliver culturally appropriate care to a range of communities in a given area.

For organisations wanting to become an approved provider, delivering home care places can be a logical starting point: because this requires a lot less funding it can be a good way to build organisational capacity. However, competition for home care places is very high compared to residential aged care places.

CALD organisations that already deliver community-based services may be able to extend their business and apply to become an approved provider to deliver home care places.

GO TO> [Becoming an approved provider and competing in the Aged Care Approvals Round \(ACAR\) is discussed further in the following sections of this document and in the Guide](#)

A new residential aged care facility requires land and a much larger investment: for example, a typical 90 place aged care facility in 2014-15 will cost around \$20 million (plus land).

CALD organisations are able to apply for a capital grant from the Australian Government to build, modify or expand a facility. However, financial assistance is limited in the form of a capital grant to approved providers who are unable to meet the cost of necessary capital works through all other sources of funding. Capital grants are offered through the ACAR and there is strong competition for these funds. To receive a capital grant you need to be an approved provider and have an allocation of residential aged care places. A capital grant can be applied for at the same time as an application for residential aged care places.

GO TO> [Capital grants are discussed further in the following sections of this document and in the Guide](#)

A business plan is needed if you decide to apply to become an approved provider.

This business plan should address issues such as who will be the recipients of the service, how the business will operate, where the resources will come from.

Establishing your own service is a big undertaking but there are many stories of CALD organisations who have successfully established aged care services.

d. Combining options

Depending on the size, care needs and geography of your community you may find it appropriate to combine some of the above options to better meet community needs.

For example, based on your research findings and resources, your best option may be to establish a home care service but not a residential aged care service. In this case you could become a home care approved provider and you may consider entering into a partnership with a residential aged care approved provider.

Whether you plan to apply for home care places to offer assistance to a [care recipient*](#) at home or to establish a residential aged care facility, you are required to have approved provider status.

*see explanation in Glossary, Section 10

6 Apply to become an approved provider

Many CALD community groups and organisations want to deliver aged care services to their own community but are not sure how to do this. To apply to become an approved provider you will need to have a well-considered approach to a range of issues including your obligations under the Act, providing quality care, sound financial management and respecting care recipient rights.

GO TO> [the Guide \(Section 8 and Section 9\) for more information about applying to become an approved provider](#)

Before you apply to become an approved provider and provide aged care services, you will need to prepare a business plan. This will involve some of the following:

a. Legal entity

You will need to establish and nominate a legal entity (e.g. a company or an incorporated association) to deliver aged care in your approved provider application.

b. Key executives and Board/Committee members

Regardless of the type of legal entity you have established, you will need to make sure that the people responsible for executive decisions have appropriate experience and understanding. All Board or Committee members need to be included in your approved provider application. If you need to employ other people after the application has been approved, or if [key personnel](#)* are no longer to be associated with the approved provider, DSS will need to be notified of those changes.

*see explanation in Glossary, Section 10

Completing the Approved Provider Form

The approved provider form currently has two sections, with questions for:

- The organisation that will deliver the proposed aged care service.
- Individuals who will be responsible for making decisions and controlling the operations of the proposed aged care service.

You should be aware that this form may change from time to time. Applications must be made only on the approved form. The approved provider form can be found on the [DSS website](#).

Your responses to these questions will provide information that will allow the Australian Government to assess the suitability of the organisation and the individuals listed, to deliver aged care services. If you have not previously delivered aged care services, do not be overwhelmed by the questions. It is important to remember:

- While individuals may not have previously worked in aged care, they may have worked in similar organisations or in other industries, so their skills and experience will often be transferable to the role they will undertake in the proposed aged care business.
- One person is unlikely to possess all the skills and experience necessary to operate an aged care business – you will need a number of key individuals working as a team.
- If your proposed aged care business does not have infrastructure or the people with the required skills when you are completing the application form, you can outline how you will create this infrastructure and bring in people with the required skills.

- An individual who is bankrupt or insolvent under administration is a disqualified individual and cannot be one of the approved provider's key personnel.

7 Acquiring aged care places

Changes were announced in the 2015-16 Budget to ensure the aged care system in Australia continues to meet the needs of an ageing population. Home Care Providers will benefit from reduced red tape as they will not have to apply for home care packages through the annual Aged Care Approvals Round after 2015.

7.1 Aged Care Approvals Round – the ACAR

The Australian Government allocates new home care places and residential aged care places through a competitive application process known as the Aged Care Approvals Round (ACAR). Competition is strong – more applications for places are sought than those that are available.

At the commencement of an ACAR, a call for applications known as an [Invitation to Apply*](#) is typically published on the [DSS website](#), major metropolitan newspapers and select CALD-specific publications. The invitation to apply will provide guidance on the number of places to be made available, closing dates for applications and provide links to the application forms.

A typical ACAR will require responses to a number of questions, including questions about your intentions and/or experience in operating an aged care service.

It is important to allow appropriate time to plan your approach when competing in the ACAR. While the timing of the ACAR varies each year, organisations are encouraged to consider and plan any proposal as required. It may take some months to consider important issues such as quantifying need, your service model, business fundamentals and how you will meet your obligations under the Act.

*see explanation in Glossary, Section 10

7.1.1 How often do ACARs occur?

The ACAR is generally an annual process, however the timing of each ACAR varies from year to year. An announcement of the Government's intention to open an ACAR may be made in advance, however organisations are encouraged to consider the needs of their community as often as required. Historically, the ACAR application period has opened and closed within a timeframe of approximately six weeks. In preparation for an ACAR, your organisation could undertake the following:

- Complete the necessary research.
- Identify a suitable site or property for construction or redevelopment (for residential services).
- Have well developed financing arrangements that identify the anticipated finance model to be used to fund any necessary capital works. This should include the amount of money to fund the works, the source of the funds, and in the instance where the amount is a repayable debt, the anticipated:

- Period of repayment.
- Interest rate.
- Ability to pay off the debt (taking into consideration the income from the service once it is operational).

7.1.2 Are approved providers required to pay for home care places and residential aged care places allocated through an ACAR?

The Australian Government will pay the subsidy rate for home care places and residential aged care places to successful applicants once the places are operational and care is being provided to approved care recipients. Approved providers are responsible for the costs associated with the development of the service.

7.1.3 What information do I need to provide in the ACAR application?

The Invitation to Apply for an ACAR will provide links to guidance material and application forms. The guidance material will assist you to complete the relevant application forms. Prospective applicants are encouraged to read through all of the available guidance material before preparing their applications.

The form may specify a word limit for each question. This can be a challenge as you may want to provide more information in your response than will fit in the word limit. It is important that you communicate your proposal clearly and concisely if a word limit is specified.

There are some important things you need to think about before you respond to the questions. Some of these things are summarised below.

7.1.4 Number of home care places and/or residential aged care places

The guidance material in an ACAR will contain a document known as the [Regional Distribution of Aged Care Places*](#). This shows the number of home care places and residential aged care places that have been made available in each aged care planning region. It also identifies all geographic locations, special needs groups (such as CALD) and key issues that are a focus for that ACAR. The Department does not guarantee the exact number of places listed in the Regional Distribution of Aged Care Places will be allocated to each region. The final allocation of places will reflect the best use of all available places, based on the outcomes of the overall assessment of applications.

In your application, you must state how many home care places and/or residential aged care places you want to deliver and demonstrate why your application best meets the needs of the aged care community in the region. In determining the number of places to apply for, applicants should consider:

- Whether or not places have been made available for allocation in the planning region you are seeking to establish or expand a service.
- Your research results – demographic data, surveys, interviews with aged care agencies, analysis against the Australian Government planning ratio.
- The financial viability of your proposed aged care service, for example, your service may not be financially viable if it is too small.

- The likely demand for the service, for example, the number of people from your community who have been assessed by the ACAT and are waiting to receive a service.
- The location of any other approved providers offering the same service.

*see explanation in Glossary, Section 10

7.1.5 Location of your new aged care service

To deliver home care services, the location of your administrative offices is not that important. You may not have to provide much information about this in your ACAR application.

However, if you are applying to establish a new residential aged care service, or expand an existing service, you will need to discuss the appropriateness of the location. This is a key piece of information in a residential ACAR application. The Australian Government will consider your response based on factors such as:

Does your organisation have access to, or ownership of, a suitable property?

- Is the land suitable for a residential aged care facility? You will need to think about the size of the land, characteristics of the surrounding area and access to services such as public transport, medical clinics and community club rooms.
- Is the site appropriately zoned for aged care use, if not, is there a possibility of rezoning?
- Is the site subject to hazards such as bushfires or flooding? Can these hazards be mitigated through risk management?

More certainty about the right to use (for example lease) or own a suitable property, may improve the likely success of your ACAR application. It takes time to build, commission and staff a facility. So an organisation that does not have land, or a legal option to purchase or lease land, may have a lower chance of success.

7.1.6 Capital grants

Approved providers are required to fund the cost of construction, maintenance and upgrade of aged care facilities. There is, however, limited financial assistance in the form of a capital grant available to approved providers who are unable to meet the cost of necessary capital works.

Capital grants are available as part of the ACAR. These grants are available under the Rural, Regional and Other Special Needs Building Fund, which DSS administers.

Capital grants are generally only available to organisations that cannot afford to fund necessary capital expenditure without a grant from the Australian Government.

Capital grants are to:

- Purchase land (associated with the proposed aged care facility).
- Construct new residential aged care buildings.
- Upgrade or extend existing aged care buildings.

- Purchase furniture, fittings and equipment (usually associated with the new or modified residential aged care facility).

DSS allocates capital grants through a competitive assessment process. Applicants cannot be allocated a grant unless they:

- have approved provider status

and

- have an allocation of residential aged care places at the service.

Applicants can apply for an allocation of places at the same time they apply for a capital grant. While an application for approved provider status can be made at any time, applicants need to take into account the fact that it can take more than three months for an application to be fully assessed if the Department requires further information from the applicant.

A grant will only be allocated to an organisation who is approved to provide residential aged care by the time the results of the ACAR are announced and whose application for an allocation of places is successful. Grants are not available to applicants who have already contracted, commenced or completed the building of an aged care facility.

7.1.7 Financial viability

Applicants for residential aged care places and/or capital grants will be asked to demonstrate their financial situation by providing their latest financial statements and trading history (if any), and financial projections of their financial situation should the application be successful.

In your ACAR response, you will also have to forecast:

- The likely profit or loss from trading.
- Cash flows (including borrowing interest and repayments).
- Your organisation's financial position at certain key points in the future.

This forecast information could be as much as four years after the new residential aged care facility has been built.

In your application, you may also need to demonstrate that you have secured finance, or have clearly identified the anticipated structure for the finance model to be used to fund any necessary capital works. This should include the amount of money to fund the works, the source of the funds, and in the instance where the amount is a repayable debt, the anticipated:

- Period of repayment.
- Interest rate.
- Ability to pay off the debt (taking into consideration the income from the service once it is operational).

The Australian Government is keen to make sure that an approved provider allocated residential aged care places has the finances and resources to complete the project within a set time.

7.1.8 Key elements in an ACAR form

There are usually 11 key elements in an ACAR form that the DSS Secretary will consider when deciding how best to allocate available home care places and residential aged care places. These elements are listed below (Table 1) with links to the **Guide**.

GO TO> [the Guide \(Section 10\) for more information about ACAR application questions and some possible strategies for your response](#)

Table 1: 11 key elements in an ACAR form

Key element	Guide reference
Demonstrate a need exists for the number of home care places and/or residential aged care places applied for in your ACAR application.	Section 4 Section 5
Describe whether the people who manage, or propose to manage, the aged care service have the necessary expertise and experience.	Section 10.8
For residential aged care places, whether the premises used (or to be used) are suitably planned and located for the provision of aged care services.	Section 10.6 Section 12.2
Your ability to provide the appropriate level of care.	Section 9 Section 10.8
If you have provided aged care services – your conduct as a provider and compliance with their responsibilities (including key personnel).	Section 10.8
The measures that you propose to implement to protect the rights of care recipients.	Section 9.2 Section 10.8

Key element	Guide reference
How you will provide diversity of choice for current and future care recipients including those with special needs (Note: CALD communities are a special needs group * under the Act).	Section 10.8
Whether the allocation will increase diversity of choice for current and future care recipients, and their carers and families, having regard to the different kinds of services offered in the region.	Section 10.8
Whether, if the application is approved, the service to which the application relates would be more likely to be able to offer continuity of care to current and future care recipients	Section 10.8
Whether, if the application is approved, the places allocated will be operational in a timely manner.	Section 11.4 Section 12.8
For residential care, financial viability of the proposed service or the provider's capacity/willingness to underwrite its future viability.	Section 12.6

*see explanation in Glossary, Section 10

8 Conclusion

Australia is one of the most culturally diverse nations in the world, with a large and rapidly growing population of older people born overseas.

This diversity requires many different responses to meet the needs of older people from CALD backgrounds.

This **Overview** will help CALD community groups and organisations to plan for the future of aged care services for their communities.

The **Guide** will help organisations wanting to apply for home care places, residential aged care places or capital grants in an ACAR.

A checklist is attached (Table 2) to guide you through the application process so your community can apply to access culturally appropriate aged care services funded by the Australian Government.

9 Checklist

Table 2: Checklist for providing aged care services

	Task	Completed
1	Understand the aged care needs of your community	
a	Research the need for aged care services by your community.	
b	Identify unmet need for aged care in your community.	
c	Work out what is required to fill this gap.	
2	Think about how the aged care needs of your community can best be met	
a	Encourage existing approved providers to meet your community's identified need.	
b	Decide to partner with other CALD community group/s or organisation/s, or an existing approved provider. State what you want from a partnership: <ul style="list-style-type: none"> • Determine what you will provide in the partnership. • Identify your partner organisation. • Enter into an agreement or legal contract. Prepare a business or implementation plan.	
c	Decide to deliver the services and to apply to become an approved provider. Prepare a business plan.	
3	If you decide to apply to become an approved provider of aged care services	
a	Decide on the type of legal entity your community group or organisation will become.	
b	Identify individuals who will become Board/Committee members.	
c	Identify individuals who will operate the business on a day-to-day basis OR identify the skills and experience you will look for in additional people to be involved.	

	Task	Completed
d	Complete an approved provider application.	
4	Submit an Aged Care Approvals Round application	
a	Identify responsibility for: <ul style="list-style-type: none"> • Research (if not covered in 1). • Identifying if aged care/ home care places are advertised in the region. • Determining how many home care places or residential aged care places are needed. • Building costing and fit-out, as required. • Identifying the number and types of resident rooms (e.g. single/ ensuites) amount of communal and service space and a cost estimate (concept or architectural plans are not required for an ACAR application). • Identifying the location and securing the right to property. • Arranging finance (finance may only be agreed in principle as a financier may need more information). • Writing the application. • Making financial projections. 	
b	Write the application.	
c	Obtain letters of support and other evidence to attach to the application, where permitted by the Invitation to Apply documentation, if applying for residential aged care places.	

10 Glossary

Some of the words and phrases used in this document have a specific meaning in aged care.

Aged care

Older people living in Australia may receive aged care. This personal and/or nursing care supports older people to stay as independent and healthy as they can be.

Aged care can also help if you are caring for someone older by giving you a helping hand to look after the person you care for.

Aged care is delivered through many different programmes funded by the Australian Government and state/territory governments. Home care and residential aged care services are outlined in this **Overview** document.

Aged Care Act 1997 (the Act)

The Act is the legislation that allows Australian Government funding to be provided for aged care. The Act, in conjunction with the Aged Care Principles, is the primary legislation for regulating the industry.

Aged Care Assessment Team (ACAT)

ACATs are teams of health professionals who assess the needs of older people and approve them to receive home care services and/or residential aged care services and transition care.

An ACAT assessor may be a doctor, nurse, social worker and/or other health professional.

Aged care services

Aged care services provide care and services in an older person's home or in a residential setting. Some aged care providers deliver services for groups of older people in a community environment. These services are usually called planned activity groups such as centre based respite, community access groups or respite services.

Approved provider

An approved provider is an organisation that has been approved by the Australian Government to operate aged care services (including home care and residential aged care) under the Act.

Care recipient

A care recipient is a person who receives aged care services from an approved provider.

Commonwealth Home Support Programme (CHSP)

Community care programmes, such as Home and Community Care (HACC), National Respite for Carers Programme (NRCP), Day Therapy Centres (DTC), Assistance with Care and Housing for the Aged (ACHA) programmes have been consolidated to form the Commonwealth Home Support Programme (CHSP) which commenced on 1 July 2015 in most states, as part of the changes to aged care.

Culturally and linguistically diverse

There are many elements to cultural and linguistic diversity within the Australian community.

A standard set of Cultural and Language Indicators has been developed by the ABS (country of birth of person, main language other than English spoken at home, proficiency in spoken English, Indigenous status, ancestry, country of birth of father, country of birth of mother, first language spoken, language spoken at home, religious affiliation, and year of arrival in Australia). These indicators provide a range of information that is pertinent to the measurement of cultural and linguistic diversity, and of related advantage or disadvantage in terms of access to government services.

Department of Social Services (DSS)

The Australian Government department responsible for administering the *Aged Care Act 1997*.

Ethnic communities council (ECC)

An ethnic communities council (ECC) is a non-government peak advocacy body representing ethnic and multicultural communities. ECCs operate in each state and territory.

Existing approved providers

Existing approved providers are aged care organisations that deliver residential aged care and/or home care services to the community. Existing approved providers may provide general access places or they may target people from any of the nine special needs groups, including care recipients from CALD backgrounds. Some approved providers tailor part of their aged care services to the specific special needs groups although this is not the focus of the organisation.

Home and community care (HACC)

Community care programmes, such as Home and Community Care (HACC), National Respite for Carers Programme (NRCP), Day Therapy Centres (DTC), Assistance with Care and Housing for the Aged (ACHA) programmes have been consolidated to form the Commonwealth Home Support Programme (CHSP) which commenced on 1 July 2015 in most states, as part of the changes to aged care.

Home care

Home care packages assist older people to remain living at home by improving access to the types of services that will allow them to continue to live active and independent lives. From 1 July 2015, all home care packages will be delivered on a Consumer Directed Care (CDC) basis.

CDC is a new way of providing home care. It gives older people greater flexibility and choice about the types of care and services they access, how the care is delivered, and who delivers it to them and when. Under CDC, care recipients determine the level of involvement they would like to have in managing their own package.

CDC will provide care recipients with greater transparency of what funding is available under their package of care and how those funds are spent through the use of an individualised budget. Care recipients will be encouraged to identify goals, which include independence, wellness and re-ablement.

Invitation to Apply

An Invitation to Apply for aged care places and/or a capital grant is made available on the [DSS website](#) in accordance with the Act. The Invitation to Apply includes information on how to make an application.

Key personnel

Key personnel is a defined term in the Act and is summarised as a member a group of persons who:

- are responsible for entity executive decisions; or
- have authority or responsibility for (or significant influence over) planning, directing or controlling entity activities; or
- are likely to be responsible for, nursing services and entity operations.

Memorandum of Understanding (MoU)

A memorandum of understanding (MoU) is an agreement between two or more parties. It defines a relationship between them for the purpose of future common action. It is not normally legally binding although it can create legal obligations.

Partners in Culturally Appropriate Care (PICAC)

The Australian Government provides support to PICACs to assist aged care service providers to deliver culturally appropriate care to older people from CALD communities. There is a PICAC coordinator in each state and territory.

Planning ratio

The planning ratio is a formula used by the Australian Government to calculate the need for aged care places based on the older population of a region. The national planning ratio target is 125 operational aged care places per 1,000 people aged 70 years and over split between 45 home care places and 80 residential aged care places by 2021-22.

Regional Distribution of Aged Care Places

The Regional Distribution of Aged Care Places (RDoACP) details the number of residential aged care places and home care places that have been made available in each aged care planning region. The RDoACP also identifies all geographic locations, special needs group(s) and/or key issue(s) that are a focus of the ACAR.

Residential aged care

Residential aged care is the provision of services to an older person living in a residential aged care facility.

The type of services to be delivered are specified under the Act and the Principles and includes:

- Appropriate staffing to meet resident nursing and personal care needs.
- Meals, laundry and cleaning services.
- Involvement in social activities.
- Access to medical and allied health.
- Accommodation with appropriate furnishings, furniture and equipment.

Service provider

A service provider is an organisation funded to provide aged care services to older people.

Special needs group

For the purposes of the Act, special needs groups are:

- People from Aboriginal and Torres Strait Islander communities.
- People from culturally and linguistically diverse backgrounds.
- People who live in rural or remote areas.
- People who are financially or socially disadvantaged.
- Veterans.
- People who are homeless or at risk of becoming homeless.
- Care-leavers.
- Parents separated from their children by forced adoption or removal.
- Lesbian, gay, bisexual, transgender and intersex people.
- People of a kind (if any) specified in the Allocation Principles.

From time to time, the Australian Government may prioritise some of these groups in the allocation of new aged care places.