



Australian Government

Aged Care Quality and Safety Commission

Aged care  
**reforms** 

# Aged Care Code of Conduct

Guidance for registered providers

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### **Disclaimer**

The information in this resource provides general guidance only. It's your responsibility to know your obligations and legal responsibilities under the *Aged Care Act 2024* and *Aged Care Rules 2025*.

# Purpose of this guidance

This guide helps registered providers and their responsible persons to comply with the Aged Care Code of Conduct (Code). It describes:

- the obligations of providers under the Code and what provider conduct the Code covers
- the requirements of the Code
- examples of behaviours and conduct expected of providers and their responsible persons and workers
- how the requirements relate to other provider obligations
- the role of the Aged Care Quality and Safety Commission (Commission).

This guidance can't cover every situation. To provide quality care and services in a way that upholds older people's rights, you need to use good judgement and follow the spirit of the behaviours in the Code. Providers, workers and responsible persons should:

- behave in a way that follows the behaviour requirements and ideas of the Code (the 'I must' statements)
- avoid the poor behaviours described in this guidance.

This guidance uses examples to help explain:

- how we expect you to behave under the Code, including how you support your workers to behave under the Code
- the types of poor behaviour that each of the Code's requirements is trying to stop.

These behaviours are a guide only. You need to use your judgement when considering conduct in relation to the Code. Some of the poor behaviours described in this guidance could be non-compliant with more than one requirement of the Code.

# Introduction

## Overview

- Complying with the Code is a condition of registration. It applies to all registered providers (providers) under the [Aged Care Act 2024](#) (Aged Care Act).
- Providers must also make sure their aged care workers (workers) and responsible persons comply with the Code.
- The Code has 8 expected behaviours for how providers, responsible persons and workers (including volunteers) must behave when they deliver funded aged care services.
- There are other aspects of the Aged Care Act which share similar concepts with the Code, such as the [Statement of Rights](#) and the [Aged Care Quality Standards](#) (Quality Standards).
- The Quality Standards are designed to deliver a better aged care experience. They explain what safe and quality care should look like. They also help providers to improve and deliver the care that older people need and expect.
- The Quality Standards apply to providers registered in categories 4, 5 and 6.
- The Statement of Rights explains the rights older people have when they use aged care. It's key to the rights-based Aged Care Act.

- Providers must:
  - understand the Statement of Rights in the Aged Care Act
  - have in place practices to ensure the provider is acting in line with the Statement of Rights.

## The Aged Care Code of Conduct

The Code includes 8 expected behaviours for how providers, workers (including volunteers) and responsible persons need to behave and treat older people receiving aged care.

They help providers to meet:

- community expectations
- the rights of older people
- standards and obligations for how providers should operate.

They are similar standards of behaviour to the National Disability Insurance Scheme Code of Conduct (NDIS Code).

The Code isn't a complete list of all the behaviours that are needed for safe, quality care. The Code is a broad framework of conduct (behaviour) that providers and their workers and responsible persons must follow.

The Code helps make sure older people have confidence and trust in the quality and safety of aged care, no matter who delivers that care.

## 1. Introduction

The Code:

- supports a person's right to choice, dignity and respect
- encourages kind, honest and respectful behaviour
- helps keep people safe when receiving aged care.

The Code places obligations relating to behaviour on individuals and providers, and gives the Commission a way to respond to behaviour that falls below what we expect. We can engage directly with providers, workers and responsible persons if they treat older people in a way that doesn't comply with the Code.

If we find that a provider, worker or responsible person has behaved in a way that doesn't meet the Code, we may take compliance or enforcement action. This may result in providers, workers and responsible persons being banned from the delivery of funded aged care services. We can also suspend, revoke (cancel) or not renew the registration of a provider (see [Chapter 4](#), Role of the Commission). The seriousness of these consequences shows how important it is for providers, workers and responsible persons to behave in a way that follows the Code. For providers, it also shows how important it is for them to comply with their obligations, including taking reasonable steps to make sure their workers and responsible persons comply with the Code.

### The Aged Care Code of Conduct

When delivering funded aged care services to older people, providers must:

- act with respect for individual's rights to freedom of expression, self-determination and decision-making in accordance with applicable laws and conventions
- act in a way that treats individuals with dignity and respect, and values their diversity
- act with respect for the privacy of individuals
- deliver funded aged care services in a safe and competent manner, with care and skill
- act with integrity, honesty and transparency
- promptly take steps to raise and act on concerns about matters that may impact the quality and safety of funded aged care services
- deliver funded aged care services free from:
  - all forms of violence
  - discrimination
  - exploitation
  - neglect
  - abuse
  - sexual misconduct
- take all reasonable steps to prevent and respond to:
  - all forms of violence
  - discrimination
  - exploitation
  - neglect
  - abuse
  - sexual misconduct.

### Statement of Rights

The [Statement of Rights](#) in the Aged Care Act focuses on what individuals accessing or seeking to access funded aged care services can expect from providers. The Statement of Rights places the older person at the centre of the aged care system. It's intended to ensure that providers deliver aged care and services in a way that:

- upholds these rights
- respects the identity of each older person
- empowers individuals to exercise their choices
- respects their preferences.

The Statement of Rights includes the right to:

- independence, autonomy, empowerment and freedom of choice
- equitable access
- quality and safe funded aged care services
- respect for privacy and information
- person-centred communication and ability to raise issues without reprisal
- advocates, significant persons and social connections.

Providers have obligations to uphold the rights of older people. This includes:

- as a condition of registration, having practices in place to ensure they deliver care and services in a way that upholds the Statement of Rights
- conforming with the Quality Standards (for providers registered in categories 4, 5 and 6)
- complying with the Code.

Providers should give a copy of the Statement of Rights and the Code to older people accessing, or seeking to access, funded aged care services, and:

- tell older people about the Code and what they're doing to embed a rights-upholding culture of safe, kind and respectful care
- encourage older people to raise concerns, make a complaint or give feedback about their care and services.

If we have evidence a provider hasn't met their obligations, we can use monitoring, compliance or enforcement action.

### Quality Standards

The [Quality Standards](#) are a set of requirements that define what safe, quality care looks like. They also help providers to improve and deliver the care that older people need and expect.

We audit providers registered in categories 4, 5 and 6 against the outcomes in the Quality Standards. Where outcomes aren't met, we may take regulatory action to address their non-conformance through a range of regulatory responses. The Code shares similar common concepts with the Quality Standards, such as:

- treating older people with dignity and respect
  - responding to feedback and complaints
  - making sure that safe and competent care is delivered.
-

# Following the Code in aged care

## Overview

- The Code applies to:
  - registered providers
  - aged care workers (including volunteers)
  - responsible persons of registered providers.
- Registered providers have an obligation under the Aged Care Act to comply with the Code and to take reasonable steps to make sure their workers and responsible persons comply with the Code.

## Who the Code applies to

### Registered providers

The Code applies to all registered providers (and associated providers of registered providers) delivering funded aged care services. Registered providers are accountable for their associated providers, aged care workers and responsible persons complying with the Code.

### Responsible persons

The Code applies to all responsible persons of a registered provider. For example:

- people responsible for nursing services who have a nursing qualification (including directors of nursing and nurse managers)
- anyone responsible for the day-to-day operations of a residential care home or service delivery branch (including employees and individuals otherwise engaged by an associated provider)
- service and residential care home managers
- executive managers
- chief executive officers
- board members.

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## 2. Following the Code in aged care

### Aged care workers

The Code applies to all aged care workers. An aged care worker delivers aged care services and is:

- employed, engaged or contracted by a registered provider (including as a volunteer)
- employed or otherwise engaged by an associated provider of the registered provider (including as a volunteer)
- a registered provider, for example where the worker is a sole trader.

Examples of aged care workers include:

- support workers, personal care workers, lifestyle coordinators and care companions
- registered health practitioners and allied health professionals, allied health assistants and nursing assistants
- kitchen, laundry, garden, maintenance and office staff
- service coordinators and case managers
- independent contractors (including registered health practitioners and allied health professionals)
- volunteers who deliver care, supports and services to older people.

### What does the Code mean for responsible persons?

Responsible persons have a key role in directing and controlling the high-level decisions and day-to-day activities of the organisation. This includes making sure the organisation's governance, systems, practices and culture support compliance with the Code.

Responsible persons should know if:

- the provider is complying with the Code
- reasonable steps are being taken to make sure they support aged care workers, including through training, to comply with the Code
- they're complying with the Code.

Responsible persons need to know when to raise concerns about behaviours and conduct that doesn't follow the Code. They also need to know how to respond to those concerns.

Responsible persons must also comply with the Code themselves and make sure their conduct is consistent with the Code.

They should understand what providers and workers need to do to comply with the Code.

Under section 180 of the Aged Care Act, some responsible persons of a registered provider, must make sure that the registered provider complies with their statutory duty under section 179 of the Aged Care Act. Sections [179](#) and [180](#) of the Aged Care Act impose a statutory duty on providers and certain responsible persons, with civil penalties for breaches of the duty to provide quality care.

The statutory duty only applies to responsible persons for non-government entities, who:

- are responsible for the executive decisions of the registered provider
- have authority or responsibility for (or significant influence over) planning, directing or controlling the activities of the registered provider.



### What does the Code mean for volunteers?

Volunteers are an essential part of the aged care system. They help support the wellbeing of older people. For people receiving care in their home, volunteers can:

- reduce social isolation
- help with household activities and shopping
- provide transport.

Older people who live at a residential care home can get help with activities of daily living and companionship.

Registered providers have an obligation to make sure volunteers they engage comply with the Code. Providers need to make sure volunteers:

- understand the Code
- know what is expected of them
- understand the consequences if there are issues with their conduct.

Volunteers engaged by providers are considered aged care workers. This means they can also face banning orders for not complying with the Code (see [Chapter 4](#), Role of the Commission). It's important that providers support volunteers to understand their role in the organisation and what good conduct looks like.

In line with the recommendations of the Royal Commission into Aged Care Quality and Safety, providers should train and supervise volunteers. This can include induction and ongoing training in:

- caring for and supporting older people
- the Code
- diversity and inclusion
- receiving and managing complaints and feedback
- identifying and reporting abuse or neglect.

### People who don't need to comply with the Code

People the Code doesn't apply to include:

- visiting medical practitioners, pharmacists and other allied health professionals that an older person has asked for but aren't contracted by the provider
- tradespeople who don't work under the control of the provider – for example, those visiting for a one-off maintenance task.

However, these people still need to behave in a respectful way. You can still raise concerns about these people with the provider or the Commission.

### Scope of the Code

The opening statement of the Code explains the requirements for providers, workers and responsible persons to act in a particular way when providing aged care.

There can be situations where the Commission assesses conduct that happens outside the delivery of funded aged care services. Such as, if there are serious concerns about an organisation's or person's ability to provide quality and safe aged care.

For example, we can consider conduct that happens:

- outside work hours or outside the residential care home. Such as:
  - an aged care worker inappropriately posting information about an older person on social media
  - an aged care worker bad-mouthing or criticising an older person to a friend, who also knows that older person

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## 2. Following the Code in aged care

- when an older person is looking to move into a residential care home or get a provider to deliver services (even if they don't live there yet or have a contract with a provider). For example, if a provider, worker or responsible person discriminates against the older person because of their race or religion
- when a provider or worker is dealing with an older person's supporters, family members or carers. For example, if a provider, worker or responsible person inappropriately won't let a family member visit an older person
- when a provider or worker deals with the Commission. For example, if a provider, worker or responsible person deliberately gives us incorrect information.

### Making sure workers and responsible persons comply with the Code

It's a condition of a provider's registration that they must:

- comply with the Code
- take reasonable steps to ensure your workers and responsible persons comply with the Code.

This includes making sure they support workers and responsible persons to:

- know about and understand the Code and relevant guidance
- deliver funded aged care services in line with the Code
- provide regular training and professional development that helps them understand and apply the behaviours under the Code
- understand what will happen to them (and their provider) if they don't comply with the Code
- resolve issues with their compliance with the Code (for example, through training and supervision to improve their skills).

Providers need to monitor how their workers and responsible persons deliver aged care in line with the Code.

Providers must also have systems to make sure they train and support their workers and responsible persons to understand the Code. Some of these requirements are part of Standard 2 of the Quality Standards which apply to providers registered in categories 4, 5 and 6.

# Practical guidance for providers

## Overview

- This chapter explains each of the required behaviours of the Code and why they're important. It includes practical guidance for providers in how they need to conduct themselves, and the expectations in place to support workers and responsible persons.
- This guidance doesn't cover every situation. It provides examples of positive and concerning behaviours and how they align or don't align with the Code.



## Requirement A

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I must act with respect for individuals' rights to freedom of expression, self-determination and decision-making in accordance with applicable laws and conventions

## Background

This behaviour focuses on making sure everyone involved in the care of older people respects and enables their rights to express themselves, decide how they live and make their own decisions. This is to be done in accordance with ‘applicable laws and conventions’.

This means that providers:

- mustn’t get in the way of an older person’s right to express themselves. Note that an older person’s right to expression doesn’t mean they can:
  - get in the way of the rights of others
  - offend or negatively affect others (such as by being discriminatory or saying discriminatory things). This is also in line with providers upholding the Statement of Rights
- must support older people to decide how they want to live and what happens to them. This includes supporting them to:
  - make choices and have control over the care and services they use
  - exercise dignity of risk if they want
- must support older people to make decisions. This includes upholding their right:
  - to involve the people they want in making those decisions
  - to use supported decision-making (if needed).

## Terms explained

### What are the ‘applicable laws and conventions’?

The applicable laws and conventions describe the human and legal rights each older person has in the community and as older people receiving aged care. For aged care this includes:

- state and territory laws about making decisions
- aged care legislation
- human rights conventions like:
  - [International Covenant on Economic, Social and Cultural Rights](#)
  - [International Covenant on Civil and Political Rights](#)
  - [Convention on the Rights of Persons with Disabilities](#).

Providers must follow the applicable laws and conventions that can affect the rights of older people. This also includes the Statement of Rights under the Aged Care Act.

### What is the right to freedom of expression?

This means that older people can make, hold and express their opinions without someone interfering. Older people are free to ask for, receive and share information and ideas:

- by using their voice
- in writing
- through art
- in other ways.

This includes older people expressing their religious beliefs, viewpoints, and opinions about the world.<sup>1</sup>

<sup>1</sup> Drawn from articles 19 and 20 of the International Covenant on Civil and Political Rights. See [The Attorney General’s Department website](#).

#### What is the right to self-determination?<sup>2</sup>

This means that older people can have their own political opinions and follow their own economic, social and cultural development. They can also have control over decisions that affect them.

The right to self-determination is about people having the independence and freedom to make their own choices.

In aged care this can include older people wanting to make choices about:

- what activities they do and what services they use
- how they spend their money
- who they spend time with.

#### What we expect from providers

To uphold this requirement of the Code, we expect providers to:

- deliver aged care in a way that values the older person and supports them to exercise their rights and express themselves
- offer older people opportunities to express their individuality and help them feel safe to do so
- support older people to discuss their care and to make decisions about what is best for them, including supporting them to exercise dignity of risk
- give older people information in a way they understand, and in a language they know, in line with their needs and abilities
- train and support aged care workers to:
  - deal with older people in a way that supports their rights
  - communicate in a way that is clear, easy to understand and helps older people make choices
  - use supported decision-making where needed
- have systems and processes to:
  - make sure older people know about their rights
  - make sure older people can access the information they need
  - help older people make decisions.

**Have conversations about what's important to older people and how they like to make decisions. It's a great way to improve their experience of the care and services you provide.**

<sup>2</sup> The right to self-determination is contained in article 1 of the International Covenant on Civil and Political Rights and article 1 of the International Covenant on Economic, Social and Cultural Rights. See [The Attorney General's Department website](#).

#### **Examples of behaviours that aren't consistent with Requirement A**

Providers need to understand and recognise the behaviours that don't comply with this requirement of the Code.

- Telling older people that they can't talk about their values or beliefs in front of other older people or workers, if those values or beliefs don't negatively affect other people's rights
  - Telling older people they can't attend activities that are key to their identity, such as going to church or doing their hobbies
  - Creating policies and practices so that older people can't bring their personal belongings or important items into a residential care home
  - Having policies that deny an older person's right to take part in consensual sexual activity, such as refusing to allow partners to stay or requiring bedroom doors to stay open
  - Not having systems to help supported decision-making
  - Putting a family member's wishes before those of an older person
  - Not educating aged care workers about older people's rights under the Statement of Rights
  - Denying an older person the right to make choices
  - Not helping an older person to understand the risks of making a specific, choice or supporting them to manage that risk safely
  - Using legal documents to discourage older people from exercising dignity of risk for day-to-day activities
  - Issuing letters that threaten older people to frighten them into making different choices (this is different from applying legal and contractual rights)
  - Keeping information from older people about their rights, for example, their right to:
    - access their own personal information
    - use contractual rights in their agreements
    - make a complaint or give feedback
  - Not having effective systems that make sure older people's decisions are recorded
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## Requirement B

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I must act in a way that treats individuals with dignity and respect, and values their diversity



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### 3. Practical guidance for providers

#### Background

This behaviour of the Code focuses on making sure everyone involved in caring for older people treats them with dignity and respect and values their differences.

Treating older people with dignity and respect includes:

- recognising older people's strengths
- supporting them to be independent
- communicating respectfully
- appreciating each older person's identity.

Each older person has a different life experience with different social, cultural, language, religious, spiritual, psychological and medical needs. This diversity affects the aged care services they need and how those services are delivered, but it shouldn't negatively affect how they're treated.

#### What we expect of providers

To uphold this behaviour of the Code, we expect providers to:

- consult with older people to understand and document:
  - what dignity and respect means for them
  - ways to support older people in a dignified and respectful manner
  - their expectations and wishes for their aged care experience
  - how to recognise and understand their diversity when delivering aged care. For example, this could include rostering specific workers who can meet an older person's personal care preferences, or catering for a specific dietary request or planned cultural activity

- make sure environments are inclusive, courteous and older person-focused
- use strategies to understand each older person's unique life experiences and identity
- encourage older people to express their diversity and to feel confident sharing their identity
- make sure workers:
  - deliver care that is free from disrespect, including judgemental, rude, belittling, insulting, discriminatory, abusive or unkind behaviour
  - understand cultural safety and are supported to deliver culturally safe care
  - know about and understand an older person's needs, choices and preferences
- have systems and processes to make sure you:
  - record older people's diversity as part of your care planning
  - use this information to guide how you provide care.

You can find more information about diversity in our provider fact sheet on [Standard 1: The individual](#).

**To treat everyone with dignity and respect you need to find out how they want you to treat them and who they want involved in their care.**

#### **Examples of behaviours that aren't consistent with Requirement B**

Providers need to understand and recognise the behaviours that don't meet this requirement of the Code.

- Not managing the behaviour of workers who are disrespectful, abusive or rude to older people
  - Refusing to provide services to an older person based on their personal choices, beliefs, characteristics or life experience (their diversity)
  - Not responding to people asking for culturally appropriate food
  - Having policies or practices that don't allow older people personal privacy
  - Denying an older person the ability to communicate
  - Refusing to support an older person to communicate with interpreters or family or use language apps because it's inconvenient or costs the service money
  - Refusing someone a place at a residential care home based on their:
    - cognitive ability (thinking and understanding ability)
    - cultural identity
    - sexual orientation
  - Not making sure you train workers to provide care that respects diverse older people
  - Encouraging older people to change their care preferences to fit what you provide
  - Refusing to provide continuity of care for older people with declining cognition, or forcing them to leave the residential care home or stay in hospital for an extended time (Older people should be supported to reside in their residential care home if they want to stay, including when their needs change. Forcing them to leave, without considering ways you can support them, may be in conflict with your security of tenure obligations)
  - Making service-wide changes that cause negative consequences for older people
  - Communicating with older people through newsletters, emails or other mediums in a way that's critical or rude
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## Requirement C

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I must act with respect for  
the privacy of individuals

## Background

This behaviour of the Code focuses on making sure you respect and protect older people's right to privacy.

Providers share and make available a lot of personal information as part of providing care to older people. Often this information includes highly sensitive personal and health information.

Protecting older people's privacy includes making sure they:

- have the personal and physical privacy to feel safe and comfortable
- aren't embarrassed or uncomfortable when receiving aged care services, if possible.

What we expect of providers

To uphold this behaviour of the Code, we expect providers to:

- comply with privacy laws and not share or disclose older people's personal information without their consent
- train aged care workers so they understand how the organisation keeps and shares records to protect privacy and confidentiality (which must follow the preferences of older people and the law)
- have controls that protect the privacy and confidentiality of information, particularly where it relates to individual people. This includes securely storing personal and sensitive information
- understand when you can share information about an older person without their consent. This includes when there is a reportable incident

- make sure workers:
  - understand the privacy policies and processes, and are confident to use them
  - know the privacy needs and preferences of older people
  - provide services in a way that protects personal privacy and dignity
  - explain and ask permission to perform procedures that include physical touch or going into someone's personal space
  - deliver timely care to stop people getting embarrassed and feeling uncomfortable, and to meet everyday personal privacy needs
- have systems and processes to:
  - manage requests for information from older people and others in a professional and sensitive way
  - respond to concerns about privacy breaches.

You can find more information on older people's privacy in our fact sheet on [Standard 1: The individual](#).

**A person's privacy affects how they feel about themselves and how isolated or exposed they feel. Personal privacy and confidentiality are key to building trust and comfortable professional relationships.**

#### **Examples of behaviours that aren't consistent with Requirement C**

Providers need to understand and recognise behaviours that don't uphold the privacy rights of older people.

- Not making sure that you securely manage records that contain personal information
  - Not making sure workers understand and use your policies and practices to protect the privacy and confidentiality of older people
  - Not providing a private area for older people to receive aged care services
  - Not managing workers who aren't giving older people personal privacy when providing their care
  - Providing documents that include information that identifies another person when responding to a complaint
  - Incorrectly sending personal information about older people to third parties as part of referrals and health records
  - Threatening to send personal information to an older person's family members if the older person doesn't follow your instructions
  - Sharing information with people without an older person's consent, when you aren't required to by law
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## Requirement D

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I must deliver funded aged care services in a safe and competent manner, with care and skill

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### 3. Practical guidance for providers

#### Background

This behaviour of the Code focuses on making sure that providers, workers and responsible persons provide care safely and competently, with care and skill. This means making sure the right people, with the right skills, are delivering aged care services.

The aim of this requirement is to safeguard older people from:

- incompetent or unqualified care
- unsafe practices and equipment
- environments that could cause risk.

This requirement also aims to make sure you deliver aged care services with attention, kindness and empathy. The way a provider cares for and interacts with older people can have a significant effect on their safety, health and wellbeing.

#### What we expect of providers

To uphold this requirement of the Code, we expect providers to:

- make sure workers are competent and have the right training and qualifications
- make sure there are enough qualified workers with the right mix of skills to meet older people's needs
- appropriately supervise workers
- review workers' training, learning and development needs regularly and when practices change
- support workers to take up training, learning and development opportunities
- give workers the time and the tools they need to provide quality care at all times

- make sure workers have access to safe, quality equipment, and are familiar with and competent at using this equipment
- make sure workers use equipment for its intended purpose
- support workers to provide safe care. This includes meeting work, health and safety laws
- support workers to apply concepts in the Quality Standards and the Statement of Rights. This includes providing rights-based, person-centred care
- have systems and processes that make sure:
  - workers meet the worker screening requirements
  - they don't hire workers who have a banning order or into a role that goes against the conditions of a banning order
  - when they recruit and select workers, they do referee checks and confirm their skills, experience and qualifications
  - workers understand their role and scope of practice
  - they regularly assess, monitor and review the performance of workers
  - they identify the training needs of workers. For example, by analysing the trends of complaints and feedback they receive.

**Providers are responsible for the care workers and responsible persons provide. They need to make sure workers and responsible persons can deliver quality and safe care, and have the right attitude, skills and qualifications.**

#### **Examples of behaviours that aren't consistent with Requirement D**

Providers need to understand and recognise behaviours that don't comply with this requirement of the Code.

- Not making sure responsible persons and workers are suitable to be employed in aged care
  - Not screening workers to make sure they are competent, caring and skilled
  - Not taking reasonable steps to confirm references and qualifications of job applicants
  - Not addressing poor conduct or gaps in worker competence
  - Not training workers and making sure they understand the Code
  - Not offering workers more training when you identify areas for improvement
  - Allowing or asking workers who don't have the right skills or competence to do tasks they can't or shouldn't do
  - Dismissing concerns from older people about workers rushing care or being inattentive
  - Not making sure equipment is maintained and repaired (especially if someone has identified a risk)
  - Not making sure the environment is safe for older people (including not addressing risks to their health and wellbeing)
  - Not making sure there is enough equipment
  - Not inducting new staff or agency staff to tell them about your policies and practices, and make sure they know how to deliver quality and safe care
  - Not identifying and addressing ongoing clinical problems
  - Not identifying and addressing worker concerns
  - Not having policies and practices to guide workers on clinical issues
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## Requirement E

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I must act with integrity,  
honesty and transparency

#### Background

Integrity, honesty and transparency are crucial to developing trust. Trust-based relationships are key to delivering quality care. This behaviour of the Code focuses on protecting older people from unfair treatment and from people taking advantage of them.

#### What we expect of providers

To uphold this requirement of the Code, we expect providers to:

- communicate and work with older people in a way that is accurate, honest and transparent
- provide timely information to older people so they can make choices
- make sure older people have access to the information they need and help to understand that information
- not take advantage of older people
- have processes to support older people being treated fairly
- make sure workers and responsible persons know their obligations under the Code and understand the consequences of not meeting the Code
- have controls that prevent, detect and respond to dishonesty and fraud, or possible dishonesty and fraud
- have policies that don't allow unethical conduct
- communicate openly with older people when things go wrong
- have systems and processes to identify and escalate inappropriate or unethical conduct
- make sure workers and older people feel safe to report inappropriate or unethical conduct of others.

#### Examples of behaviours that aren't consistent with Requirement E

- Making false or misleading claims about the costs, care, services and supports you can deliver
- Giving incorrect information or records to the Commission or to older people
- Changing documents about complaints, feedback or incidents that you send to older people, their supporters or the Commission
- Not supporting workers to treat older people fairly and with integrity
- Not taking action if workers treat older people unfairly or take advantage of them
- Not making sure that communications, agreements and advice are clear and accurate
- Making financial gains by not providing all the relevant information when making agreements
- Deducting fees that are different to the amounts specified in your agreement
- Making it difficult to understand fees or being unclear about the fees you have charged
- Providing false references for workers
- Engaging contractors who aren't appropriate to provide care but are cheaper for the organisation
- Using policies and practices that reduce costs but have significant negative effects on older people – for example, stopping all lifestyle activities or using inappropriate dressings on wounds to save money
- Benefitting from deliberately giving false information (fraud) – for example, wrongly claiming subsidies or supplements
- Withholding information from older people when things go wrong



## Requirement F

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I must promptly take steps to raise and act on concerns about matters that may impact the quality and safety of funded aged care services

## Background

This behaviour of the Code focuses on making sure that providers protect older people from unsafe or poor-quality care by identifying and responding to concerns and risks early.

Providers can identify concerns from:

- complaints
- feedback
- incidents
- observations
- continuous improvement activities.

Concerns can be about risks in the environment, clinical risks, near misses and incidents (including reportable incidents).

## What we expect of providers

To uphold these behaviours of the Code, we expect providers to:

- encourage and support older people, their supporters, families, carers and workers to provide feedback or make complaints
- make sure older people, their supporters, families, carers and workers feel safe to provide feedback or make complaints
- enable older people, their supporters, families and carers to give feedback or make complaints through a consumer advisory body, where required
- train workers to identify and make complaints or give feedback about their concerns
- take the right action in response to complaints and feedback about their concerns
- use an open disclosure process when things go wrong

- have an effective incident management system that meets the Quality Standards and their conditions of registration (depending on their registration category)
- continuously improve the care they provide in response to risks identified
- encourage workers and older people to provide feedback to help them continuously improve
- partner with older people to understand how to improve the safety and quality of the care they provide
- have systems and processes to:
  - help them identify and manage risks, including risks that relate to clinical governance
  - respond to complaints and feedback in a timely and responsive way
  - make sure anyone, including workers and responsible persons, that makes a disclosure that qualifies for whistleblower protections under the Aged Care Act is encouraged and supported and not punished or victimised
  - use an organisation-wide approach to involve older people in developing, delivering, evaluating and improving their funded aged care services.

**Encouraging feedback and being open to complaints from older people and their supporters and families helps providers to keep improving the quality of care and services they provide.**

#### **Examples of behaviours that aren't consistent Requirement F**

- Not using an effective complaints and feedback management system
  - Not taking steps to understand concerns and identify risk factors, including in the delivery of clinical care
  - Not acting against workers who are discouraging others from making complaints or giving feedback
  - Not taking reasonable steps in response to concerns about a worker whose behaviour doesn't meet the Code
  - Victimising or punishing an older person for providing feedback or making a complaint
  - Not supporting older people who make a complaint or give feedback about a concern
  - Not giving older people access to advocates
  - Refusing to take part in resolving complaints or issues
  - When engaging with us or with external complaints organisations:
    - not giving clear, direct or truthful answers
    - being deliberately uncooperative
    - being misleading
  - Not enabling older people to make anonymous complaints
  - Threatening to ban family members from visiting older people in response to providing feedback or making a complaint
  - Acting in an intimidating way towards a person who has raised a concern (including during meetings)
  - Withholding information from us about ongoing concerns and incidents, especially those that are relevant to our monitoring activities
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## Requirement G

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I must deliver funded aged care services free from all forms of violence, discrimination, exploitation, neglect, abuse and sexual misconduct

#### Background

This behaviour of the Code focuses on safeguarding older people from all forms of abuse.

This includes, but isn't limited to:

- physical and verbal violence
- controlling behaviours, including making someone do something by threatening them or using force
- sexual behaviours that influence or take advantage of older people
- psychological or emotional harm and abuse
- any sexual act between an older person and a worker
- use of inappropriate restrictive practices
- forced treatments and interventions
- humiliation and harassment
- financial abuse or exploitation
- physical and emotional neglect, on purpose or by accident
- wilful deprivation (deliberately not giving someone something they need)
- discrimination – for example verbal, written or in delivery of services, including racism or bullying
- abuse and violence – for example, between older people or from visitors.

#### What we expect of providers

To uphold this requirement of the Code, we expect providers to:

- encourage a culture of safe care, free from all forms of abuse
- encourage an inclusive culture and safe practices, for example through worker training and guidance
- show they're committed to stopping any form of abuse and have clear guidance for how workers and responsible persons should behave
- clearly state that workers and responsible persons aren't to commit any acts of abuse against older people
- make sure all workers and responsible persons know what this means (what sort of things they can't do)
- not act in a way that allows or encourages abusive acts against older people, directly or indirectly
- comply with worker screening requirements in the Aged Care Rules and make sure their workers and responsible persons comply with those requirements.

**Quality and safe care happens with strong leadership and commitment to a culture of safety. This creates a safe environment for workers, responsible persons and older people.**

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### 3. Practical guidance for providers

Sexual misconduct includes any unwanted acts or behaviours that are sexual. This includes physical and verbal actions done without consent. For example, by force, intimidation, coercion or manipulation.

In aged care, sexual misconduct is reportable under the Serious Incident Response Scheme as ‘unlawful sexual contact and inappropriate sexual conduct’.

Providers must report sexual misconduct to the police. Some categories of providers must also report these incidents to the Commission. You can find more information about reportable incidents and the [Serious Incident Response Scheme](#) on our website.

**Any sexual act done by an aged care worker to an older person is always inappropriate and inconsistent with the Code. It’s also a reportable incident and possibly a criminal offence.**

Unlawful sexual contact and inappropriate sexual conduct is:

- where the contact or conduct is caused by an aged care worker:
  - any conduct or contact of a sexual nature towards an older person – including, but not limited to, sexual assault, indecent acts or sharing an intimate image of an older person
  - any touching of an older person’s genital area, anal area or breast when it’s not a necessary part of delivering intimate care or services to the older person
- doing something with the intention of making it easier to get an older person to engage in sexual contact or conduct.

#### **Examples of behaviours that aren’t consistent with Requirement G**

- Using any form of violence, discrimination, exploitation, neglect, abuse or sexual misconduct
  - Including discriminatory clauses in agreements
  - Excluding older people from activities as a form of neglect or discrimination
  - Using inappropriate restrictive practices
  - Not reviewing how workers use lawful restrictive practices
  - Financially abusing an older person by inappropriately charging fees
  - Encouraging workers to use abusive practices, including having unkind, unfair or immoral policies
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## Requirement H

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I must take all reasonable steps to prevent and respond to all forms of violence, discrimination, exploitation, neglect, abuse and sexual misconduct

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### 3. Practical guidance for providers

#### Background

This behaviour of the Code focuses on making sure:

- you take steps to safeguard older people from harm
- when harm occurs, you respond appropriately. This includes responding to incidents of violence, discrimination, exploitation, neglect, abuse and sexual misconduct.

Requirement H is different to requirement G. Requirement H focuses on preventing and responding to incidents. Requirement G focuses on culture, processes and resources to help services be free from abuse and misconduct.

#### What we expect of providers

To uphold this requirement of the Code, we expect providers to:

- create an environment where older people feel safe and know how to make a complaint or give feedback about their concerns
- identify practices and training that help to prevent violence, discrimination, exploitation, neglect, abuse and sexual misconduct against older people
- have systems and processes to make sure that workers:
  - know about the provider's risk reduction strategies to prevent harm to older people
  - identify and report alleged and suspected incidents to the provider
  - know about their responsibilities under this and other professional codes of conduct

- know when and how to raise concerns about acts of violence, discrimination, exploitation, neglect, abuse and sexual misconduct
- have systems and processes to:
  - encourage older people to report any violence, discrimination, exploitation, neglect, abuse and sexual misconduct
  - identify and record incidents of violence, discrimination, exploitation, neglect, abuse, and sexual misconduct, including for specific categories of registered providers through an incident management system
  - for specific categories of providers, report reportable incidents to the Commission
  - respond to incidents of violence, discrimination, exploitation, neglect, abuse and sexual misconduct, by putting the older person first and making sure they get the help and support they need
  - continuously improve systems and processes to prevent, respond to and deliver services free from all forms of violence, discrimination, exploitation neglect, abuse and sexual misconduct
- cooperate with any investigations we, or other authorities, do (including the police).

#### **Examples of behaviours that aren't consistent Requirement H**

- Not training workers and responsible persons in the policies and practices that prevent harm to older people
  - Not training workers and responsible persons in the policies and practices to use to respond to incidents of violence, discrimination, exploitation, neglect, abuse or sexual misconduct
  - Not properly assessing an incident or managing a complaint or concerning feedback
  - Not responding to concerns about violence, discrimination, exploitation, neglect, abuse or sexual misconduct
  - Not making sure workers follow up or do a welfare check with older people who don't answer the door for scheduled appointments
  - Not responding to older people's concerns that they feel unsafe, sexualised, neglected or discriminated against
  - Not protecting older people from repeated harm
  - Not acting right away to safeguard older people who might be experiencing violence, discrimination, exploitation, neglect, abuse or sexual misconduct
  - Not taking reasonable steps to identify risks to older people and prevent harm
  - Not taking the right steps to respond to incidents
  - Not using your risk trends or incident records to learn how to stop harmful incidents happening
  - For certain categories of providers, not reporting reportable incidents
  - Keeping information about an incident from an older person or us (when required to share this information under the Aged Care Act)
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# Role of the Commission

## Overview

The Commission has regulatory oversight of the Code. This means we monitor providers and their workers and responsible persons to make sure they comply with the Code.

We can respond to non-compliance through our regulatory, complaints and other functions.

To regulate the Code, we:

- support and educate providers, responsible persons and workers on how to meet the Code
- monitor compliance with the Code
- receive and resolve complaints and feedback about behaviour that doesn't meet the Code
- manage information about behaviour that doesn't meet the Code. This includes identifying patterns of behaviour by analysing information we collect
- investigate behaviour that doesn't meet the Code
- take risk-led and proportionate compliance and enforcement action in response to non-compliant behaviour by providers, workers and responsible persons for not complying with the Code.

As much as possible, we'll coordinate our regulatory activity with other relevant organisations or regulators. We do this to support the safety, health and wellbeing of older people. Where appropriate, and in line with legislation, we send information to relevant organisations, including providers, or regulators to act, if needed.

## Our role

We help the Aged Care Quality and Safety Commissioner (Commissioner) and the Complaints Commissioner to perform their functions by regulating the delivery of funded aged care services.

The Commissioner's functions (powers and responsibilities) are in the Aged Care Act.

Two of the Commissioner's functions are:

- safeguarding older people who receive funded aged care services
- doing engagement and education activities.

The Complaints Commissioner has complaints (and other) functions.

### Our engagement and education function

We keep improving our engagement and education functions by learning from older people. This helps the sector to improve, empowers older people to use their rights, and supports providers, responsible persons and workers to meet their obligations under the Aged Care Act.

Our engagement and education function supports the sector to understand the Code and the behaviour we expect.

We use a range of regulatory powers to:

- prevent, detect and respond to non-compliance
- encourage or make providers change their behaviour.

We take action we think is appropriate, based on the level of risk and other factors.

### Our safeguarding function

Through the Commissioner's safeguarding functions, we monitor providers, workers and responsible persons to make sure they meet their obligations in line with the Aged Care Act.

Providers need to take action to reduce risks to older people in response to incidents, complaints and feedback. This includes concerns about the provider's own behaviour, and that of their workers and responsible persons.

We can take enforcement action with providers, workers and responsible persons if there is evidence that they aren't able or willing to comply with the Code.

We can identify concerns about behaviour that doesn't meet the Code through:

- complaints or feedback we receive from any source – including older people, their supporters, families or carers, workers, advocates
- information that raises concerns about the behaviour of a provider, worker or responsible person
- reportable incidents notifications
- change in circumstances notifications about the suitability of responsible persons
- referrals from other regulatory organisations
- our monitoring activities in line with the Quality Standards (for specific categories of providers).

We also analyse the information we collect to build risk profiles. These help us identify trends or patterns of behaviour that don't meet the Code.

In response to information that raises concerns, we can:

- assess the information to understand the role of the provider or person the concern is about
- discuss the behaviour with the:
  - provider, worker or responsible person
  - older person or their supporter
  - complainant.

Unless exceptions under the Aged Care Act or other legislation apply

- record the concerns and take no more immediate action
- take regulatory action, including requiring a person to give us information or documents about the concern

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#### 4. Role of the Commission

- investigate, then take compliance and enforcement action if we need to
- educate providers, workers and responsible persons about their obligations, including complying with the Code
- refer the matter to another responsible body, including:
  - the police
  - Ahpra (the Australian Health Practitioner Regulation Agency)
  - a state or territory health complaints body.

### Thinking about the roles of people and the organisation

When we receive information about concerning behaviour, we think about the role of the provider and their workers and responsible persons. This helps us to understand the circumstances and respond in an appropriate way.

### Concerns about workers and responsible persons

If we receive a concern about a worker or responsible person, we aim to identify the cause. This includes acts or omissions by the provider (things the provider did or didn't do).

An act or omission can show that the provider hasn't taken reasonable steps to make sure the worker or responsible person complies with the Code. Or it could show the provider hasn't met their obligations under the Aged Care Act in other ways.

For example, not providing information and training to their staff, as required in the Aged Care Act. Concerning behaviour by workers or responsible persons can be due to providers:

- making unsafe workload demands
- giving poor access to resources and training
- not supervising workers enough
- letting workers work outside their skills or experience
- not providing enough support
- not having the right policies and procedures.

### Concerns about a worker

Someone raises a concern with us about a worker giving medication to older people incorrectly. This raises concerns about the worker's competency. We think about the roles of the worker and the provider and decide that although the provider gave the worker written guidance on how to give the medication:

- it wasn't right for the provider to give the worker medication administration responsibilities
- the provider didn't supervise the worker appropriately.

We expect providers to be able to show that their workers are competent and have the qualifications, skills, experience and knowledge to effectively perform their roles.

Providers are responsible for making sure they:

- give the right tasks to the right people
- supervise workers when necessary to protect the safety and wellbeing of older people.

### Concerns about providers

If someone raises a concern with us about a provider, we also think about the roles workers or responsible persons may have had in that concern.

A provider can comply with their obligations in the Aged Care Act, have the right systems and processes, and take all reasonable steps to make sure their workers and responsible persons act in line with the Code. But, if a worker or responsible person goes against the provider's instructions and causes harm to an older person, we can take action against that person.

If both a provider and a worker haven't met the Code, we can respond with parallel compliance and enforcement action. This means we can take action against both the provider and the worker or responsible person, to make sure they change their behaviour to comply with the Code.

When deciding how to respond, we will think about the:

- roles of the people involved
- level of risk to older people.

### Compliance and enforcement action

We manage non-compliance (and possible non-compliance) with the Code in line with our:

- [Compliance and Enforcement Policy](#)
- [Managing Worker Risk Policy](#).

We respond to non-compliance with the Code in a way that:

- is risk-led and in proportion to the risk to older people
- puts older people and their rights first
- fixes and prevents non-compliance
- encourages continuous improvement
- encourages behaviour that protects the safety, health and wellbeing of older people.

We have a range of compliance and enforcement actions we can use. For example, we can:

- use monitoring and investigation powers to collect evidence about non-compliance
- give a provider a **required action notice**. This tells them they need to investigate or examine issues we've identified and report back to us
- give a provider a **compliance notice**. This tells them they need to do specific things (or stop doing things) to fix non-compliance with the Code and prevent more non-compliance
- vary (make changes to) a provider's registration, including imposing conditions on their registration that relate to the Code
- stop or restrict a provider from providing aged care services by:
  - removing categories from their registration
  - suspending or revoking their registration.

We can use some compliance and enforcement actions for both providers and responsible persons or workers. For example, we can:

- issue a **caution letter** to a provider, responsible person or worker. This letter:
  - says they might not be complying with the Code and gives the reasons why we think this
  - gives them an opportunity to fix the non-compliance (and stop it happening again)
  - warns them that we can take more action if they continue to be non-compliant
- issue **Required Action Notice**. This tells a provider or person to resolve a complaint or take specific action about a complaint
- accept an **enforceable undertaking** from a provider or a responsible person or worker. This is an agreement between us and the provider or person that they will do or not do specific things to:
  - comply with the Code
  - prevent more non-compliance
- apply for an **injunction** from a court. This is a court order that tells the provider or responsible person or worker to take a specific action, or stop taking a specific action, to comply with the Code
- issue a **banning order** to a current or former provider or individuals such as aged care workers or responsible persons. This can stop or limit a current or former provider, responsible person or worker from being involved in aged care generally or in a specified service type. Banning orders can also stop or restrict a responsible person or worker from a specified activity of a provider



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## 4. Role of the Commission

- apply to a court for a **civil penalty order**.  
A civil penalty is a fine a provider or person has to pay. A court can give a provider, a responsible person or a worker a civil penalty for not complying with the Code or a banning order.

### When we can use banning orders

A banning order is a type of enforcement action we can take. It stops or limits:

- a current or former provider delivering aged care services generally or in a specified service type or
- a person being involved in providing aged care services.

A banning order can:

- be permanent or for a specified period
- be for specific types of aged care or activities
- include conditions
- be varied (changed) or revoked (cancelled).

Banning orders are one of our most serious enforcement actions. They're generally only proportionate and appropriate for serious cases of non-compliance and where there is a high risk of harm to older people.

We can issue a banning order if:

- we have revoked a provider's registration
- we reasonably believe a provider:
  - hasn't complied, isn't complying, or is likely not to comply with the Aged Care Act
  - has been involved in, or is likely to become involved in, non-compliance by another organisation
- we reasonably think a person hasn't complied, isn't complying, or is likely not to comply with the Code

- we reasonably think that there's a severe risk to the safety, health or wellbeing of an older person if the provider or person continues to provide or work in aged care
- we reasonably think a provider or person isn't suitable to be involved in providing aged care
- the provider or person has been convicted of an offence involving fraud or dishonesty
- the provider or person is insolvent (unable to pay their debts) under administration.

We can take more enforcement action if:

- a provider or person doesn't comply with a banning order
- a provider doesn't make sure that a person doesn't take part in activities related to the banning order.

This includes applying for a civil penalty order or injunction.

We decide the appropriate compliance and enforcement action on a case-by-case basis. We collect information and evidence and assess a range of factors, including:

- the level of actual or potential risk of harm to the safety, health, wellbeing and quality of life of the older person
- the type of non-compliance and risk
- the provider, responsible person's or worker's willingness and ability to:
  - work with us
  - manage the risk and fix the non-compliance in a reasonable time.

You can find more information about our approach to compliance and enforcement in our [Compliance and Enforcement Policy](#).

### Publishing information about compliance and enforcement actions

The Aged Care Act requires us to publish specific information on our website.

This includes information about:

- how a provider performs in relation to their obligations
- compliance or enforcement action we've taken or plan to take
- a banning order against a provider or person, stopping or limiting them from providing aged care services.

You can find more information about the types of [compliance and enforcement decisions we publish](#), and [providers that are non-compliant](#), on our website.

The My Aged Care Website also includes information about compliance performance for providers, under the [find a provider search field](#).

### How we work with other regulators

At any time, we can refer a concern to another organisation. We do this when we think a concern is likely to be relevant to that organisation. When we make a referral, we share information in a way that meets our legal obligations.

Organisations we might make a referral to (and the types of referrals we make) include:

- the NDIS Quality and Safeguards Commission – if someone raises a complaint or concern about an aged care worker who also works for an NDIS provider
- Services Australia – in relation to management of aged care payments, including fraud investigation
- a state or territory coroner – where circumstances involve a reportable death
- Ahpra – for concerns about the behaviour of aged care workers who are registered health professionals
- the Australian Competition and Consumer Commission (ACCC) – for concerns about overcharging or unlawful charging of aged care fees
- state or territory authorities, including health complaints organisations, responsible for investigating the behaviour of unregistered health care workers
- the police – where the issue involves, or could involve, criminal behaviour.

As far as possible, we will coordinate our regulatory activities with other relevant organisations to reduce double handling.

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*The Aged Care Quality and Safety Commission acknowledges the Traditional Owners of country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.*

October 2025



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