

Code of Conduct for Aged Care – Webinar Q&As

The information is current as at 16 November 2022. This document will be regularly updated. For more information on the Code of Conduct for Aged Care, please refer to the Commission’s [aged care reform](#) web page. The table below provides an overview of the service types that will be subject to 4 reforms, including Code of Conduct, under the [Aged Care and Other Legislation Amendment \(Royal Commission Response\) Act 2022](#) that are directly relevant to the regulation of aged care.

Reforms from a regulatory perspective	Residential	Short-term Restorative Care – Residential	HCP	Short-term Restorative care – Home Care	CHSP	NATSIFAC	Transition Care	MPS	Explanatory Notes
Code of conduct	✓	✓	✓	✓			✓	✓	The Code of Conduct responsibilities under the Aged Care Act 1997 will not apply to service providers of CHSP and NATSIFAC or their workforce from 1 December 2022. This is because the responsibilities under the Aged Care Act apply to approved providers. CHSP and NATSIFAC service providers are not approved providers under the Aged Care Act. It is expected that similar provisions will be extended to all Commonwealth-funded aged care services as part of the planned introduction of a new aged care Act.
Strengthened Governance	✓	✓	✓	✓			✓	✓	The new governance obligations do not currently include CHSP and NATSIFAC services, which will be considered as part of the Support at Home Reforms. This reform also does not apply to approved providers that are Aboriginal Community Controlled Health Organisations or state/territory or local government authorities (which may be some MPS services)
SIRS in home services	<i>SIRS already in place</i>	<i>SIRS already in place</i>	✓	✓	✓	✓	✓	✓	The Serious Incident Response Scheme is already in place for residential care services and settings.
Restrictive Practices consent provisions	✓								Applies to residential aged care only.

Code of Conduct for Aged Care

The Aged Care Quality and Safety Commission Amendment (Code of Conduct and Banning Orders) Rules 2022 is available at <https://www.legislation.gov.au/Details/F2022L01457>. Guidance resources are available on the Commission's website <https://www.agedcarequality.gov.au/reforms> for approved providers, workers and governing persons, and for consumers. Stay up to date with the latest information on the Code of Conduct for Aged Care on the Commission's [aged care reform web page](#).

Scope

<p>1. Is the Code of Conduct required to be complied with for allied health providers, such as physiotherapists, whose services are being paid for by Home Care Package funds?</p>	<p>The Code applies to workers directly engaged by a provider or engaged by a contractor or subcontractor of the provider. If the aged care provider has engaged an allied health practitioner and they are being funded through home care package funds, then this practitioner will be covered by the Code.</p>
<p>2. Will the Code apply to individuals working in aged care as independent contractors, students and back of house staff such as finance and payroll?</p>	<p>Yes - the Code sets out standards of expected behaviours and applies equally to aged care workers who are:</p> <ul style="list-style-type: none">• employed or otherwise engaged (including on a voluntary basis) by the approved provider, or• employed or otherwise engaged (including on a voluntary basis) by a contractor or subcontractor of the approved provider to provide care or other services to consumers. <p>Examples of people who are subject to the Code include:</p> <ul style="list-style-type: none">• executive management team members, chief executive officers, board members

	<ul style="list-style-type: none"> • anyone responsible for day-to-day operation of the service, service and facility managers • those responsible for nursing services, allied health professionals contracted by the provider to provide care to consumers, kitchen, laundry, garden, maintenance and office personnel employed by the provider, support workers, personal care workers, lifestyle coordinators and care companions • service coordinators, case managers, consultants, trainers and advisors for regulatory support or systems improvement • independent contractors engaged by the provider including some health professionals, volunteers of the provider who deliver care, supports and services, and students falling under the category of people otherwise engaged by the employer. <p>People who are not subject to the Code: Visiting medical practitioners, pharmacists and other allied health professionals who have been requested by, or on behalf of, the consumer but are not contracted by the approved provider, and; trades people who perform work otherwise than under the control of the provider, for example, someone visiting for a one-off maintenance task.</p>
<p>3. How are online platforms that connect people with independent support in the community regulated when support workers with ABNs provide services?</p>	<p>The Code applies equally to aged care workers who are directly employed by an approved provider, or engaged by a contractor or subcontractor of an approved provider, to deliver care or other services to consumers.</p>

<p>4. How are the platforms regulated when support workers work on ABNs and are individuals providing services?</p>	<p>Where workers are not employed or otherwise engaged by the approved provider, they are not subject to the Code.</p> <p>The following people are required to comply with the Code:</p> <ul style="list-style-type: none"> • approved providers under the Aged Care Act. This includes approved providers of residential care, home care and flexible care (including care delivered under the Multi-Purpose Services, Transition Care and Short-Term Restorative Care programs) under the Aged Care Act. • governing persons of approved providers being individuals who are: – a member of the group of persons who are responsible for the executive decisions of the organisation, or – a person who has authority or responsibility for, or significant influence over, planning, directing or controlling the activities of the organisation. • aged care workers being individuals who are: – employed or otherwise engaged (including on a voluntary basis) by the approved provider, or employed or otherwise engaged (including on a voluntary basis) by a contractor or subcontractor of the provider to provide care or other services to consumers.
<p>5. Will the Code apply to Independent Support Workers engaged directly by consumers under a Self-Managed model?</p>	<ul style="list-style-type: none"> • No, if the Independent Support Worker is not employed or otherwise engaged by the approved provider they are not subject to the Code.
<p>6. Will an existing CHSP provider who is also sub-contracted by Home Care Package providers still be required to implement the Code of Conduct by 1 December?</p>	<p>Not when providing services under CHSP but yes, if they are a sub-contractor providing services for a Home Care Package provider.</p>

<p>7. When will the Code, or something like it, apply to NATSIFACP & CHSP providers?</p>	<p>It is expected that provisions similar to the Code of Conduct will be extended to all Commonwealth-funded aged care services (including CHSP and NATSIFACP) as part of the planned introduction of a new Aged Care Act (which is in very early drafting stages and will take some time to finalise).</p> <p>CHSP and NATSIFACP providers are still required under the terms of their grant agreement to provide care that is safe and respectful, and to behave in a way that would generally be consistent with the requirements of the Code.</p>
<p>8. Why does the Code apply to previous workers?</p>	<p>Workers can move in and out of aged care and move between employers. The legislation includes provisions that enable the Commission to respond to a worker's non-compliance with the Code of Conduct in the past, even if that worker has moved on from the role they were performing at the time of the concerns about their conduct. It is important to note that this would apply to non-compliance only from the time the Code becomes law – 1 December 2022.</p>
<p>9. Does the Code apply to previous conduct — or to convictions of workers before 1 December? What if there is a conviction after the date, although the conduct was before 1 December?</p>	<p>The Code of Conduct provisions commence on 1 December 2022. Conduct prior to that date cannot be considered under the Code (unless there are concerns about suitability) because the Code was not in place. All information coming to the Commission from 1 December, including through reportable incident notifications under the Serious Incident Response Scheme, can and will be considered in the context of the Code provisions.</p> <p>Conduct prior to 1 December 2022 can be considered regarding the individual's suitability to be involved or engaged in aged care.</p>

<p>10. Does the Code of Conduct apply to consumers, so they and their families know what behaviour is expected of them?</p>	<p>No. The Code describes the behaviour expected of aged care providers, their governing persons (e.g. board members and Chief Executive Officers) and aged care workers.</p> <p>The Code describes how providers and workers who provide care must behave towards and treat consumers.</p> <p>Approved providers can use documents such as residential or home care agreements to include expectations about how consumers and families engage with aged care workers.</p>
<p>11. What if you are a worker who delivers both aged care services and NDIS services and supports?</p>	<p>If you are a provider or a worker that delivers both aged care services and NDIS services and supports, you are required to comply with the Code of Conduct for Aged Care and the NDIS Code of Conduct.</p> <p>In some circumstances, aged care workers and approved providers will be delivering NDIS services and supports to participants in residential aged care settings. In these circumstances, both the Code of Conduct for Aged Care and NDIS Code will apply. Given the similarities between the Codes, this should not place any additional expectations on staff or cause confusion.</p> <p>It's important to remember that the NDIS Code of Conduct and the Code of Conduct for Aged Care are substantially the same, so appropriate behaviour will be understood in a similar way in both aged care services and NDIS services.</p> <p>We are working closely with the NDIS Commission as we implement the Code of Conduct for Aged Care.</p>

<p>12. What is the evidence available from the NDIS experience that an Industry Code results in enhanced quality of service provision and a more consistent upholding of individual's (consumer) rights?</p>	<p>The NDIS Quality and Safeguards Commission has published its own resources regarding the NDIS code and reports on its activities. Refer to their website https://www.ndiscommission.gov.au/</p>
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Application

<p>13. Do all staff have to sign the code of conduct?</p>	<p>There is no requirement in the legislation for staff to sign the Code of Conduct. Providers are required to take reasonable steps to ensure that their workers and governing persons comply with the Code. Providers are free to make their own decisions about how they inform their governing persons and workers about the Code and ensure that those individuals understand and are fulfilling their obligations under the Code. Providers should be prepared to demonstrate to the Commission what steps they have taken in this regard, if required to provide evidence.</p> <p>Aged care providers may have different requirements for their staff. Providers may require their staff to sign off that they will comply with the Code as part of their employment relationship.</p> <p>The Commission considers a worker's compliance with the Code and does not make any decisions regarding a worker's employment contract.</p>
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<p>14. If a provider already has a Code of Conduct, is this new Code of Conduct in addition to that, or can it be incorporated into the organisation's Code of Conduct?</p>	<p>Approved providers are welcome to incorporate the wording of the legislated Code into their own existing code of conduct.</p> <p>From 1 December 2022, approved providers have new responsibilities under the Aged Care Act 1997 to take reasonable steps to ensure that their aged care workers and governing persons comply with the Code.</p>
<p>15. How differently will the assessors look at compliance with the Code compared with what providers are already being assessed on?</p>	<p>The Code complements other provider responsibilities in the Aged Care Quality Standards (Quality Standards), Charter of Aged Care Rights and the Serious Incident Response Scheme (SIRS). Assessments made by quality assessors look at a provider's performance against the Quality Standards.</p> <p>Where risks are identified about the conduct of a worker, provider or governing person, the Commission will consider the information in relation to the Code provisions. The Commission will take a risk-based approach and respond in a way that is proportionate to the risks that the non-compliance poses to the safety, health, well-being and quality of life of aged care consumers where required, in accordance with the Commission's Compliance and Enforcement Policy.</p> <p>The Commission has access to a range of compliance and enforcement actions to respond to different situations. The Commission may undertake an investigation where needed to inform an appropriate and proportionate compliance and enforcement action.</p> <p>The Commission may take compliance and enforcement actions in response to a provider's non-compliance (or possible non-compliance) with their responsibility to comply with the Code or to take reasonable steps to ensure that their aged care workers and governing persons comply with the Code.</p>

	<p>In relation to <u>providers</u>, the Commission may, for example:</p> <ul style="list-style-type: none"> • issue a direction notice • issue a compliance notice in relation to the Code • issue a non-compliance notice • issue a notice of requirement to agree to certain matters • accept a written undertaking given by a provider • impose a sanction including a revocation sanction. <p>In relation to <u>aged care workers and governing persons</u>, the Commission may issue a banning order for the most serious cases of poor conduct.</p> <p>Some compliance and enforcement actions may be used for <u>both providers and/or individuals</u>. For example, the Commission may:</p> <ul style="list-style-type: none"> • issue a caution letter • issue an infringement notice • seek an injunction from a court • apply to a court to impose a civil penalty order or offence.
<p>16. Will there be a database that all workers would need to be registered on or is it only for those that have been banned?</p>	<p>No, a worker registration database is not being introduced from 1 December 2022. Instead, from that date, there will be a register of individuals who are subject to a banning order. However, the Government has made a commitment to introduce a registration scheme for aged care workers and it is therefore expected to be established in the future.</p>
<p>17. Will approved providers be able to check that a prospective employee, contractor or subcontractor does not have a banning order or previous breach of Code of Conduct as part of their recruitment process?</p>	<p>A register of banning orders will be published by the Commission on our website from 1 December 2022.</p>

<p>18. Are those who make reports to the Commission required to do so non-anonymously?</p>	<p>No, a person wishing to raise a concern with the Commission can choose to identify themselves or, if they prefer, can raise the concern anonymously or confidentially. The choice is theirs. More information is available on our website https://www.agedcarequality.gov.au/aged-care-complaints-faqs</p>
<p>19. Will a provider know/ be advised if a staff member is being investigated?</p>	<p>If the Commission is conducting an investigation that relates to the conduct of an aged care worker or governing person of a provider, then the Commission will engage with both the relevant worker/governing person and the provider, as appropriate, as part of the investigation.</p>
<p>20. What is the weight of evidence you will need for a breach of the Code of Conduct, e.g. balance of probabilities?</p> <p>Often in aged care, it is really difficult for consumers or their families/representatives to prove inappropriate conduct by staff if they are the only witnesses, or if there is evidence of a breach (e.g. lacerations on a resident) but no one witnessed the abuse by staff.</p>	<p>The Commission will have a range of powers to seek information and investigate non-compliance with the Code.</p> <p>The Commission’s standard of proof for non-compliance with the Code will be on the balance of probabilities. This is the civil standard on proof. In accordance with its Regulatory Strategy, the Commission takes a risk-based proportionate approach to non-compliance.</p> <p>Additionally, regulatory, compliance and enforcement decisions may be made regarding non-compliance with the Code. These decisions will be made in accordance with administrative law principles.</p>
<p>21. Will the Commission refer matters to other agencies?</p>	<p>At any stage, the Commission may make a referral to another organisation where the Commission identifies that it holds information that is likely to be of relevance to that organisation. Release of information will be consistent with the Commission’s legal obligations.</p> <p>The following are examples of referrals that may be made:</p> <ul style="list-style-type: none"> • to the NDIS Quality and Safeguards Commission, where the Commission has made a banning order against an aged care worker or governing

	<p>person, where a NDIS participant is a party to a reportable incident under the SIRS, or where a complaint or concern is raised about an aged care worker who also works for a NDIS provider</p> <ul style="list-style-type: none"> • to the relevant State Coroner where there are circumstances involving a reportable death • to the police where matters intersect with criminal conduct. • to the Australian Health Practitioners Regulation Authority for concerns about the conduct of aged care workers who are registered health professionals • to Services Australia, about aged care payments management including fraud investigation • to State authorities responsible for the investigation of conduct of unregistered health care workers, including health complaints bodies. <p>The Commission will, as far as practicable, coordinate any regulatory activity with any applicable professional body or other regulator, as appropriate and to reduce unnecessary duplication.</p>
<p>22. Will people named in previous mandatory reporting to the Commission as proven perpetrators of abuse against consumers be subjected to banning orders?</p>	<p>There are different situations in which the Commission may issue a banning order. A banning order may be issued if there is reasonable belief that a person is unsuitable to be involved or engaged in aged care. The legislation sets out the factors that must be considered when assessing a person's suitability. We may consider an individual's history of abuse against consumers in this process, or in the case of governing persons, we may consider information such as a history of financial misconduct. Because of how the legislation has been drafted, evidence in relation to an individual's suitability may predate 1 December 2022.</p> <p>If we were to issue a banning order because an individual did not comply, or is not likely to comply with the Code, then we can only consider conduct dated after 1 December 2022 – as the Code does not apply retrospectively.</p>

<p>23. If someone is already on the NSW Health Care Complaints Commission prohibition list, will they automatically be permanently banned under the new Code?</p>	<p>The Commission will consider information about compliance with the Code of Conduct from 1 December 2022 (when the provisions in the Act commence).</p> <p>The Commissioner may make a banning order to restrict an individual from being involved in aged care based on their suitability and experience (including prior to 1 December 2022) in providing aged care or other relevant forms of care. The Commission may consider information from other regulators as part of this process.</p>
<p>24. If a nurse/ allied health or medical practitioner has a restricted practice on AHPRA, will that be reflected on the register?</p>	<p>The Commission will consider information about compliance with the Code of Conduct from 1 December 2022 (when the provisions in the Act commence).</p> <p>The Commissioner may make a banning order to restrict an individual from being involved in aged care based on their suitability and experience (including prior to 1 December 2022) in providing aged care or other relevant forms of care. The Commission may consider information from other regulators as part of this process.</p>
<p>25. Does the banning order influence a professional's registration status (such as RN registration)?</p>	<p>This will depend on the decision of the relevant agency or professional body, and is separate from a decision to ban a worker from working in aged care. The application of a banning order is limited to aged care or specified types of aged care, or in some cases, specified activities as an aged care worker or as a governing person of an approved provider.</p>
<p>26. If a banned person changes their name e.g. gets married, how will you check the register for this?</p>	<p>Where the Commission receives new information that indicates existing information on the banning order register is inaccurate, out-of-date, incomplete, irrelevant or misleading, the Commission can correct the information on the register of banning orders. Individuals may also request a correction of information on the register of banning orders.</p>

<p>27. Is there a time limit for how long people remain on the register?</p>	<p>The Commission will publish in the banning order register all banning orders that are in force. The duration for which a banning order is ‘in force’ will depend on the effective period of the banning order.</p> <p>Further details regarding the publication of the banning order register – including information on banning orders no longer in force – will be made available on the Commission website.</p>
<p>28. Can expelled members of one facility’s association go on to join another facility’s board?</p>	<p>Where a banning order against an aged care worker or governing person is in force, that individual will be required to comply with that banning order. The conditions of the banning order would determine how it applies to the individual and the period it applies for.</p> <p>While it would depend on the circumstances of the case, it is likely this would mean that the governing person would not be able to join the board of another aged care provider or service while the banning order remained in force.</p> <p>When a banning order is in force, any conduct that the aged care worker or governing person engages in that breaches the banning order or a condition of the banning order may attract a civil penalty of up to 1,000 penalty units.</p> <p>If the banning order or a condition of the banning order is breached, then the Commission can take enforcement action such as seeking an injunction, taking civil penalty proceedings or issuing an infringement notice.</p>

<p>29. Can you please give additional information about infringement notices?</p>	<p>An infringement notice is a notice given to a provider/worker that sets out details of an alleged contravention of a civil penalty or offence provision by that provider/worker, a penalty amount, and the period within which to pay the penalty amount.</p> <p>Further information is available in the Commission’s Compliance and Enforcement Policy - https://www.agedcarequality.gov.au/sites/default/files/media/compliance-and-enforcement-policy-14-july-2021.pdf</p> <p>Once an infringement notice has been issued, it is then up to the provider/worker to either pay the specified amount or challenge the notice and seek to have it set aside.</p> <p>If the provider/worker pays the amount stated in the notice, then court proceedings cannot be brought against that provider/worker in relation to the alleged contravention.</p>
<p>30. Will you require all appropriate workers to be members of their professional body? E.g. Recreational/Divisional therapists and leisure and lifestyle workers join Diversional and Recreational Therapy Australia (DRTA)</p>	<p>There is no requirement in the legislation for workers to be members of their professional body.</p>
<p>31. What if a worker hears they have been reported to the Commission? What happens next and what support is available to the worker?</p>	<p>The Commission receives many pieces of information in the course of its work, including in handling complaints and SIRS notifications and undertaking quality assessment and monitoring activities. Just because a worker’s name has been provided to the Commission doesn’t mean that we will take action. In some instances we may engage with the approved provider (as the employer) and ask them to look into the matter. Where we do decide to undertake an investigation about the conduct of an</p>

	<p>aged care worker, the Commission will engage directly with the worker as part of the investigation.</p> <p>The Commission will always give procedural fairness to the worker where appropriate. This means that the worker will understand the concerns that have been raised, have the chance to provide information to the Commission and be given reasonable opportunity to be heard before the Commission makes any decision that affects the worker's interest.</p>
<p>32. If I am concerned about another worker's conduct, what do I do?</p> <p>What if I don't report my concerns?</p>	<p>If you are concerned about another worker's conduct, it is important to speak up. You may do so by raising the issue with your employer or by directly contacting the Commission.</p> <p>As a worker, you have a responsibility under the Code to take all reasonable steps to prevent and respond to all forms of violence, discrimination, exploitation, neglect, abuse and sexual misconduct.</p> <p>To be consistent with the Code, if you witness conduct of concern you should take appropriate action to respond to the incident and prevent it from happening in the future.</p> <p>You may also have obligations under the Serious Incident Response Scheme to make a report. It is strongly recommended that you talk to your employer if you are uncertain what to do.</p>

<p>33. If I work in home services and I have a suspicion that a family member or neighbour may be taking advantage of a person receiving care (for example, they are taking money out of their account) but I don't have any proof – is there anything more I need to do other than sharing my concerns with my manager?</p>	<p>Sometimes as an aged care worker you may see things that concern you. If possible, start by speaking with the consumer themselves, to see if they need support to take some action. Whether or not you can speak with the consumer, it is always best to share your concerns with your employer, most likely with a manager. In some instances, it may be appropriate to speak with the Police and your employer (as an aged care provider) might need to make a SIRS notification.</p> <p>The organisation you work for has to meet other relevant responsibilities, which may include to:</p> <ul style="list-style-type: none"> • Capture any incidents (whether actual or suspected) that cause, or could cause, harm to any person in their Incident Management System • Report the incident (whether actual or suspected) to police within 24 hours if there are reasonable grounds to do so, and • Support the health, safety and wellbeing of consumers, including by referring them to appropriate services such as the Older Persons Advocacy Network (OPAN) and 1800 ELDERHelp (1800 353 374).
<p>34. If a worker is accused of assaulting a resident with dementia and they then leave that workplace, can they then move to a new workplace with no record of the alleged assault?</p>	<p>In the first instance, employers should undertake appropriate pre-employment checks of successful job applicants. This would include reference checks and confirmation that workers have a current police certificate (showing that they do not have an assault conviction) or an NDIS worker screening clearance. Approved providers must also ensure that workers advise them if they receive an assault conviction during the term of their employment.</p> <p>All allegations of assault should be properly investigated irrespective of whether a care recipient is living with dementia, and may result in criminal charges where there has been unlawful behaviour.</p>

	<p>The Code of Conduct also applies to aged care workers regardless of whether they move across workplaces in the sector. In the most serious cases, the Commission will be able to ban individuals from working in aged care.</p> <p>The Commission can also take action regarding non-compliance with the Code, irrespective of police involvement.</p>
<p>35. What if I notice a colleague being abusive towards a resident but the resident doesn't want to report this and get the worker into trouble.</p> <p>What does the Code say I should do in this situation?</p>	<p>As a worker, you have a responsibility under the Code to take all reasonable steps to prevent and respond to all forms of violence, discrimination, exploitation, neglect, abuse and sexual misconduct.</p> <p>It would be inconsistent with the Code if you witness abusive behaviour of another worker but fail to take appropriate action to respond to the incident and prevent it from happening in the future.</p> <p>In this situation, you should respond by raising the issue with your provider or directly with the Commission.</p> <p>It is never okay for a worker to be abusive towards a consumer. If you know about this type of behaviour, you must take action.</p>

Education, training and resources

<p>36. Will there be a mandatory training module for workers?</p>	<p>Mandatory training is not planned at this stage, given the Code of Conduct requirements are consistent with existing obligations that workers are already expected to meet.</p> <p>However, providers are required to take reasonable steps to ensure that their workers and governing persons comply with the Code. Providers are</p>
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	<p>free to make their own decisions about how they inform their governing persons and workers about the Code and ensure that those individuals understand and are fulfilling their obligations under the Code. Providers should be prepared to demonstrate to the Commission what steps they have taken in this regard, if required to provide evidence.</p>
<p>37. Can you share website link for information coming in future?</p>	<p>The Commission has a webpage dedicated to the current program of reforms https://www.agedcarequality.gov.au/reforms. There are also specific pages on Code of Conduct for providers, workers and consumers.</p>
<p>38. When will the educational materials (Alis training resources) be available to access?</p>	<p>A range of educational information, including an Alis module, videos and fact sheets are being released to support the implementation of the Code of Conduct. These resources will be available on the Commission’s website. Stay up to date with the learning modules by visiting https://www.agedcarequality.gov.au/online-learning#learning-modules</p>
<p>39. Will Alis the online training be available for free for home care agencies, which are not approved providers, but supporting the workforce to approved providers?</p>	<p>Alis access is free for approved providers and their workers. An annual license is available for learners who are not employees of an approved provider for a minimal fee. Further information is available at https://www.agedcarequality.gov.au/online-learning#frequently-asked-questions</p>
<p>40. Does the Commission intend to send out a general communication to advise consumers of the Code directly? Or will the provider be expected to make this communication? If so, is there going to be any time limit set to this communication?</p>	<p>A range of information for consumers including videos and fact sheets is being released to support the implementation of the Code of Conduct. These resources will also be available on the Commission’s website.</p> <p>The Commission also expects that in addition to this, and in the course of providers’ normal interactions with consumers, there will be a conversation about the Code as a new requirement applying to aged care providers, governing persons and aged care workers.</p>

<p>41. Will the Code be translated into languages other than English?</p>	<p>Yes, translated versions of the Code in 25 community languages will be available on our Code of Conduct information for workers and consumers webpages.</p>
<p>42. Will the commission provide a brief suitable media clip that providers can provide to workers to demonstrate reasonable measures have been taken?</p>	<p>An introductory video for workers is being made as part of a suite of information and resources to support the sector to implement the Code of Conduct. There is an information page on the Commission’s website for workers.</p> <p>A Code of Conduct webinar specifically tailored to workers was hosted by the Commission on 11 November and a recording is available on our YouTube channel.</p>
<p>43. When will educational training materials be available online?</p>	<p>Draft guidance documents are currently available for providers (on the provider Code webpage) and workers and governing persons (worker Code webpage). Final versions, including one for consumers, will be published by the end of November.</p> <p>We will continue to support the sector leading up to and beyond 1 December through publication of a range of information specifically tailored to different audiences – providers, workers and consumers – as summarised below.</p> <p>For workers:</p> <ul style="list-style-type: none"> - Frequently Asked Questions - worker fact sheet - web based quiz - video - case studies, and an - online learning module through our free Aged Care Learning Information Solution (Alis).

	<p>The Commission is also translating some of the educational resources into 25 languages. Easy English versions will also be created with simplified language and the use of images.</p> <p>For providers:</p> <ul style="list-style-type: none"> • online resources such as the guidance materials, fact sheets, videos and posters • a readiness checklist, scenarios and a web-based quiz • online learning programs through our free Aged Care Learning Information Solution (Alis) • further webinars on key reform measures. <p>For consumers:</p> <ul style="list-style-type: none"> • a fact sheet, video and quick reference guide • translated and Easy English resources.
<p>44. Are you able to do an information video that we could share with our residents during resident meetings etc. concerning the Code?</p>	<p>An animated, plain language introductory video for consumers is being made as part of a suite of information and resources to support the sector to implement the Code of Conduct.</p> <p>There is an information page on the Commission’s website for consumers.</p>
<p>45. Must the Code be informed to our workers as a stand-alone document? Or can providers incorporate the wording of the Code into its own existing code of conduct?</p>	<p>Approved providers are welcome to incorporate the wording of the legislated Code into their own existing code of conduct.</p>

<p>46. What if a resident or family asks for information about the Code and how they can raise concerns?</p>	<p>We will be supporting people who receive aged care services, their families and carers to learn about the Code and what it means for them. Resources we are producing specifically for consumers and family members include a fact sheet, video and quick reference guide.</p> <p>We will also be publishing translated and Easy English resources for consumers.</p> <p>If a resident or a home care recipient wants further information on their rights but feel uncomfortable raising their concerns with their aged care provider or they would like some support, there are people who can help. The Commission is able and willing to assist, as well as some others – as outlined below.</p> <ul style="list-style-type: none"> • A consumer can ask a friend or family member to help them raise a concern directly with their aged care provider or they can involve an independent advocate, at no cost. • They can contact the Older Person Advocacy Network (OPAN) to be connected to a local, independent advocate by using OPAN’s online form or calling 1800 700 600. An advocate can help them make informed decisions about the care experience they want, switch between services or talk to their aged care provider about any issues of concern. • They can also raise their concerns with the Commission by: <ul style="list-style-type: none"> • calling 1800 951 822 (free call) for all enquiries • sending an email to info@agedcarequality.gov.au • using the online form
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	<ul style="list-style-type: none">• sending a letter to Aged Care Quality and Safety Commission, GPO Box 9819, in your capital city. <p>People can raise issues confidentially, if they feel more comfortable doing so.</p>
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