Aged Care Quality and Safety Commission

Compliance and Enforcement Policy

September 2025



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1. Introduction

1.1 Purpose of this policy

We are the Aged Care Quality and Safety Commission (Commission), Australia's national aged care regulator. Our objectives include:

- safeguarding older people accessing funded aged care services
- respecting and upholding the rights of older people under the Statement of Rights
- ensuring older people are free from mistreatment, neglect and harm from poor quality or unsafe care
- assisting older people accessing funded aged care services to live active, self-determined and meaningful lives.

This policy explains how we deliver our safeguarding functions in relation to compliance and enforcement under the *Aged Care Act 2024* (the Aged Care Act). These functions are a critical part of protecting older people and upholding their rights. It also provides information about the types of compliance and enforcement actions we can use to respond to non-compliance and the factors we consider when using them.

This policy is for:

- older people and their supporters older people receiving, or looking into, governmentfunded aged care services, their family and representatives, and the wider community
- registered providers and former registered providers of aged care (providers) a provider is
 a person or organisation that is (or was) registered to provide funded aged care services in
 one or more of the 6 registration categories. It is also aimed at associated providers and
 representatives of providers, such as peak bodies
- people working in aged care (workers) this includes aged care workers, volunteers, contractors and responsible persons of registered providers and associated providers
- aged care digital platform operators (DPOs) we are responsible for regulating operators of online applications, websites or systems that help deliver aged care services. We have referred to DPOs in this policy where compliance and enforcement action is applicable



• staff of the Commission – people who work at the Commission and regulate the aged care sector.

You can find definitions of key terms in the Aged Care Act and the Commission's Glossary.

1.2 Our legislation

We carry out our compliance and enforcement activities under the:

- Aged Care Act
- Aged Care Rules 2025 (Aged Care Rules)
- Regulatory Powers (Standard Provisions) Act 2014 (Regulatory Powers Act).

The legislation's primary consideration is the safety, health, wellbeing, and quality of life of older people receiving care. It provides a robust and risk based regulatory framework for the delivery of aged care services, including accessible complaint mechanisms for older people, that will promote public confidence and trust in the sector.

1.3 Supporting documents

We have supporting policies and guidance documents to help us apply this Compliance and Enforcement Policy. This includes our:

- Regulatory Strategy, which sets out how we regulate and deliver on our goals and commitments
- **Supervision Model**, that explains how we respond to provider risks
- Managing Worker Risk Policy, that explains how we detect, assess and respond to risks
 that are caused by the way workers behave, act or do not act
- <u>Provider Registration Policy</u>, which explains our process and principles for registering a provider
- **Provider Governance Policy**, that explains what good provider governance is and how we respond to governance-related risks
- Complaints Handling Policy, which explains how:
 - we deliver a high-quality complaints-handling service
 - people can make complaints



- we respond to complaints.
- Managing Whistleblower Disclosures Policy, which explains how we receive, manage and use information that could qualify for whistleblower protections
- **Decision-making Framework**, which explains our decision-making principles and how we ensure high-quality and consistent regulatory decision-making
- **Being a Rights-based Regulator Policy**, which outlines how the rights of older people receiving aged care services are upheld in all the ways we regulate.

2. How we regulate

2.1 Our regulatory approach

Our regulatory approach is rights-based, risk-led and proportionate to the risk that non-compliance presents, while engaging with and developing partnerships with the aged care sector.

We monitor providers and workers to make sure they comply with their aged care obligations under the Aged Care Act and the Aged Care Rules. This includes any conditions of registration (for information on conditions please read our <u>Provider Registration Policy</u>).

We collect information and evidence, assess risk and respond to non-compliance in the right way at the right time. The following core concepts are factored into our compliance and enforcement decisions:

- willingness and ability to:
 - engage with us
 - manage the risk and remedy non-compliance
 - o do this in a reasonable timeframe
- the level of actual and/or potential risk of harm to older person/s when the risk is not being effectively managed
- the nature of the non-compliance and the risk.

Our regulatory approach combines:

• **Statement of Principles**: we regulate the aged care sector in line with the Statement of Principles, as set out in section 25 of the Aged Care Act.

- Respecting the rights of older people: we listen to older people and empower them to
 exercise their own rights and choices. We communicate with providers and workers to make
 sure everyone understands and respects the rights of older people in the Statement of
 Rights and deliver services that:
 - put older people first
 - treat people as unique
 - o enable older people to make their own decisions.
- Promoting aged care obligations: we engage with the aged care sector to build their capability and understanding of the aged care legislation and their aged care obligations.
- **Supervision and risk management:** we use our **Supervision Model** and risk management actions (including managing worker risk) to prevent harm and act quickly to address risk. These tools help us to:
 - carry out our functions
 - escalate risk
 - o make decisions about our priority areas of regulation.
- **Communication and improvement:** we encourage the sector to communicate with us. We promote continuous improvement and recognise providers and workers who are:
 - getting it right
 - always improving
 - exceeding standards in the care they provide.

You can read our **Regulatory Strategy** to learn more about our approach. It also describes how we use the right regulatory tools and actions at the right time to achieve the best outcomes for older people and uphold their rights.

2.2. Our Supervision Model

We safeguard older people and manage provider non-compliance and risk under our <u>Supervision Model</u>. This model guides us to escalate and respond to provider risks in a way that:

- is in proportion to the level of risk to older people
- protects older people receiving aged care.



We give all providers a supervision status (Figure 1). This status is based on our assessment of:

- the level of risk
- the provider's ability to manage the risk.

We continuously assess provider risks and their impact on older people. The supervision status of a provider will be adjusted as the provider's risk increases or decreases in relation to how well they are managing the risks to older people in their care. The provider's supervision status is a guide for us and helps inform our decision making for:

- how we case manage the provider
- which regulatory actions we use.

Regulatory response tailored to risk

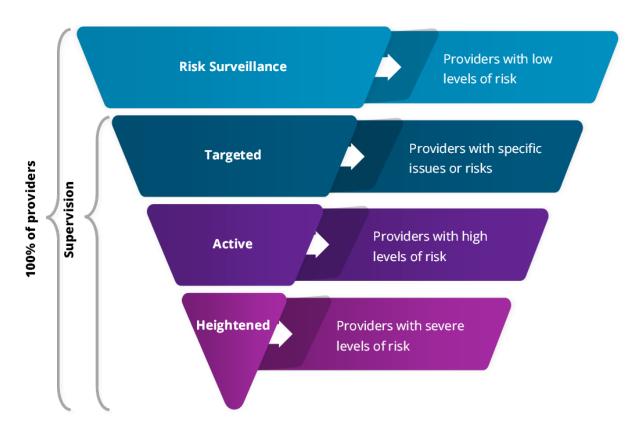


Figure 1. Supervision status and level of risk

2.3 Worker risk

We manage worker non-compliance and risk under our **Managing Worker Risk Policy**. Providers are responsible for:

- managing worker-related risk
- making sure workers comply with their obligations.

When we detect worker risk, we assess it to:

- understand the level of risk to older people
- decide how to respond.

When we manage worker risk, we often need to direct our responses to both the provider and worker to manage risk and prevent harm to older people.

3. Our compliance and enforcement principles

Our compliance and enforcement principles explain how we make sure that our compliance and enforcement actions are fair, balanced and effective. In our decision-making and regulatory actions, we uphold the following principles:



Transparent

We are transparent about what to expect from us, what we expect from providers and workers and the consequences of non-compliance. We communicate clearly with providers and workers about decisions that affect them and given them an opportunity to respond. We can publish compliance and enforcement actions to keep everyone informed about our regulatory activities and safeguard older people.

Risk-Based

We regulate in a risk-based way and based on evidence. We assess risks and their impact on older people. We identify, understand and address the root causes of risk in a timely and effective way.

Proportionate

The regulatory actions we take and the resources we use to intervene are in proportion to the risk we have identified. Providers or workers who present higher levels of risk or harm to older people face more intensive regulatory responses from us.

Collaborative

We work with our aged care stakeholders to understand their needs, seek their views and gather insights into areas we should address while also driving best practice.

Timely

We act promptly when there are risks to the safety and health of older people and we are clear with our expectations regarding the steps to remedy issues in a timely manner.

4. Compliance and enforcement outcomes

We want to support the aged care sector to continuously improve their aged care services to deliver high quality care. This means aged cares services are delivered in a way that:

- protects older people from harm
- puts older people first
- prioritises safety, health, wellbeing, and quality of life in the delivery of care of older people.

To do this, we can use our compliance and enforcement functions and take actions to:

- make sure providers and workers understand and comply with their obligations under the Aged Care Act and the Aged Care Rules
- uphold the rights of older people under the Statement of Rights
- remedy and prevent non-compliance and promote conduct that protects the safety, health and wellbeing of older people.



Compliance

The aim of our compliance activities is to engage with and help providers and workers to understand their obligations and deliver best practice aged care services. Our compliance activities focus on providers and workers taking actions that result in the following outcomes:

- remedy (fix) the non-compliance (including the deficiencies that resulted in the non-compliance)
- **restore** trust and confidence of older people in the care and services they receive
- prevent the non-compliance from happening again.



Enforcement

When providers and workers are not complying with their obligations, we can use enforcement action if it is proportionate to the level of risk and appropriate in the circumstances. For example, where non-compliance has resulted in significant harm to older people and/or is a serious failure or a systematic pattern of conduct.

The outcomes we want from our enforcement activities are:

- accountability of providers and workers for their non-compliance through penalties and/or restrictions or removal from the aged care sector
- deterring the aged care sector from not complying by taking stronger actions
- **denouncing** conduct that causes risk and harm to older people
- **safeguarding** older people and reduce risk to older people
- **protecting** the rights of older people.

5. How we respond to non-compliance

When we detect risk and non-compliance, we have a wide range of actions that we can use to encourage and secure compliance with the aged care legislation.

We balance our compliance and enforcement principles, the level of risk and other factors relevant to the non-compliance to determine which actions is most appropriate for a given case. This means



compliance and enforcement actions will vary in different situations depending on all the specific circumstances.

We can use more than one compliance or enforcement action, if it is appropriate, for example we can take regulatory action against a provider and a worker at the same time. We can also take compliance or enforcement action while we are dealing with and resolving a complaint.

We can take further compliance or enforcement action if there is evidence the provider or worker still is not complying with their aged care obligations.

5.1 Engagement

We can engage with the aged care sector to build knowledge and capability. When providers and workers engage with us in an open and cooperative way, we inform and educate them to manage risks to older people and remedy non-compliance. How often and how much we directly engage with a provider or worker will vary. It will depend on the level of risk, willingness to engage with us and nature of the non-compliance.

5.2 Monitoring tools

Monitoring tools are an important part of our compliance and enforcement functions. We use these tools to:

- actively monitor provider or worker compliance and risk
- conduct enquiries and reviews that are supportive and provide education
- quickly respond to risk and harm to older people
- collect and assess evidence and intelligence in different ways and from different sources across the aged care sector
- determine whether a provider, worker or DPO is complying with their aged care obligations

- ensure non-compliance is being remedied and risks are managed
- decide whether a matter needs to be escalated for a compliance and enforcement response.

Monitoring tools can include:

- requesting information and documents
- regulatory powers (monitoring and investigation powers)
- required action notices.

Requests for information and documents

We can ask a person to give us information or documents or copies of documents in writing, in person or by telephone, these can help us determine if a provider, worker or DPO is complying with their aged care obligations. This can include details about:

- financial viability
- clinical care and governance
- governing bodies and workforce
- aged care qualifications and evidence of completed training modules
- continuity of care
- policies and procedures
- what a provider or worker has done to remedy an issue.

We can send a formal written notice asking the person to give us specific information or documents. We can also issue a notice asking a person to a meeting to answer questions about an issue. If we give a person one of these notices and it is not complied with, we may take compliance or enforcement action in response to the non-compliance.

Regulatory powers

Under the Regulatory Powers Act (as triggered by the Aged Care Act), we have:

 Monitoring powers: we use these to gather information that is used to determine if providers and workers have complied, or are complying, with an aged care obligation, and to monitor if the information they have given is in purported compliance with an obligation of the Aged Care Act is correct.

• **Investigation powers:** we use these to collect evidence about non-compliance with an offence or civil penalty provision of the Aged Care Act (see **Appendix A** for a list of our offence and civil penalty provisions), or an offence provision of the *Crimes Act 1914* or the *Criminal Code* to the extent that the provision relates to the Aged Care Act.

We can enter a premises and exercise these powers. Entry can be made with consent from the occupier of the place or under a warrant. If the premises is a residential care home and consent is not granted by an occupier to enter, the Commissioner can authorise entry and a warrant can be obtained after entry in certain and limited circumstances.

When using monitoring or investigation powers at a premises we can do, but are not limited to, the following activities:

- ask a person to give us information by answering any questions
- ask for a document to be shown to us
- search the premises and anything on the premises
- examine or observe any activity at the premises
- inspect, examine, take measurements of or do tests on anything on the premises
- make any still or moving image or any recording of the premises or anything on the premises
- inspect any document on the premises
- take excerpts from, or make copies of, any of these documents
- take onto the premises equipment and materials we need to use these powers.

Required Action Notice

As well as our regulatory powers to collect information or investigate non-compliance, we can also issue a Required Action Notice to providers.

A Required Action Notice can be about:

 a matter that relates to the provider that is raised in a complaint, notification or other information we have about the provider

- the rights of a person, under the Statement of Rights, who is receiving funded aged care services from the provider
- the provider's conditions of registration or obligations under the Aged Care Act.

A Required Action Notice requires a provider to:

- examine or investigate the matter
- report to us on their examination or investigation of the matter in a reasonable timeframe stated in the notice.

We can require the matter to be examined or investigated by a qualified and independent expert. The provider must engage and pay for this expert.

We can decide to vary (change) or revoke (cancel) the Required Action Notice. We must consider any report from the provider when we make a decision to vary or revoke the Required Action Notice.

If a provider does not comply with a Required Action Notice in the time we have specified, we can take compliance or enforcement action. This can include:

- issuing a Compliance Notice
- applying to a court for a civil penalty order
- issuing an infringement notice.

5.3 Compliance actions

We can use compliance actions to set out our compliance expectations and/or compel providers, workers and DPOs to comply when other regulatory actions such as monitoring and engagement have failed to encourage and secure compliance.

Compliance actions include:

- **flexible non-statutory compliance actions** to educate, tell them to manage risks, remedy non-compliance and make changes to avoid more non-compliance where it is proportionate to the risk and can achieve the right outcomes.
- **formal statutory compliance actions** where there is an unwillingness or an inability to comply, we direct and compel them to take, or refrain from taking, specific actions, explain



consequences of non-compliance and reinforce the risk management controls that should be in place.

5.3.1 Non-statutory actions

Non-statutory actions are actions that are not governed by the Aged Care Act, but we have discretion to use them to respond to non-compliance. These actions are not directly enforceable in the same way a statutory action can be enforced, however if the non-compliance does not stop or happens again, we can escalate to statutory actions at any time.

Non-statutory compliance actions can include:

- closure letters
- reminder letters
- caution letters
- request for action letters.

We can use these actions when we find that a provider's, worker's or DPO's behaviour, actions or systems do not comply with their obligations however we have assessed the risk as being sufficiently low at the time of taking the action. For example, low risk can mean non-compliance where there is no immediate harm to older people, has been promptly brought to our attention, and has been voluntarily remediated.

These actions help providers, workers and DPOs to:

- understand their aged care obligations and continue to improve
- develop and use systems and risk controls to comply with their obligations and manage risk.

We usually use these actions with providers when they have a supervision status of **surveillance** or **targeted supervision**. However, we can use them in response to higher levels of risk or at **active** or **heightened supervision**, where appropriate.

Closure letters

We can use a closure letter to let a provider, worker or DPO know we have decided not to take action or take no further action in relation to their non-compliance. For example, when:

- we have issued a notice, and the provider, worker or DPO has complied with it and, as a result of their compliance with the notice, risk has been mitigated
- the non-compliance was low risk, and the provider, worker or DPO has remedied it by the time we review the issue
- we have monitored or investigated the issue, and we do not need the provider, worker or DPO to take further action.

Reminder letters

We can issue a reminder letter to a provider, worker or DPO to encourage and support them to comply with their obligations in the future by:

- educating and helping them understand their aged care obligations
- letting them know what we expect of them.

A reminder letter can include information about their aged care obligations and how to comply. It can encourage providers, workers and DPOs to:

- manage risk
- raise awareness
- continuously improve.

If a provider, worker or DPO continues to be non-compliant after receiving a reminder we can take further action.

Caution letters

We use caution letters to tell providers, workers or DPOs that we have concerns about their compliance with their aged care obligations. A caution letter:

- identifies the obligation they may not be complying with and the reasons for our concerns
- gives them an opportunity to remedy the issues themselves
- acknowledges that the recipient may have remedied the non-compliance
- warns them that we can act if the non-compliance continues or happens again.

Request for action letters

We can use a request for action letter to ask a provider, worker or DPO to comply with their aged care obligations. We ask them to take actions that we think are reasonable and necessary to remedy non-compliance and manage risk. For example, we can issue a request for action letter during an inspection that asks a provider or worker to:

- proactively manage a risk
- take action to make sure their activities comply with their obligations.

If a provider, worker or DPO continues to be non-compliant after receiving this letter we can consider escalating the matter to a compliance action.

5.3.2 Statutory actions

Statutory actions are compliance and enforcement actions in the Aged Care Act, the Aged Care Rules and the Regulatory Powers Act that we can use to respond to non-compliance. They have specific criteria and processes that we must follow when using them, and they are enforceable, this means there may be consequences (e.g. a penalty) if they are not complied with.

We use statutory compliance actions to be more targeted in our approach and direct and compel a provider or worker who is not willing or is unable to take action to remedy non-compliance and manage risk.

Statutory compliance actions can include:

- dealing with complaints through resolution and specific action letters
- reportable incidents remedial action letters
- compliance notices
- varying registration
- enforceable undertakings
- injunctions.

We generally use statutory actions where the non-compliance:

has a high level of risk



- needs us to get involved
- needs a timely and specific response from a provider or worker.

We usually use statutory actions with providers when they have a **targeted** or **active** supervision status. However, we can also use a statutory compliance action for a provider with a **heightened** supervision status to remedy non-compliance, manage risk and safeguard older people.

Dealing with complaints - resolution and specific action letters

When we are dealing with and resolving a complaint, we can send the provider or worker a:

- **resolution letter** that tells them to try to resolve the complaint and report back to us within a specific timeframe
- **specific action letter** that tells them to take other specific action in relation to the complaint within a specific timeframe.

If the provider or worker does not comply with the letter, we can consider taking other actions to resolve the complaint or, if appropriate escalate for compliance or enforcement action.

For more information Complaints and how we help resolve complaints please refer to our **Complaints Handling Policy**.

Reportable incidents - remedial action letters

There are 8 types of reportable incidents. They are incidents that have happened (or are alleged or suspected to have happened) while aged care services were being delivered to an older person. Providers must report these incidents to us in accordance with the Aged Care Act and the Aged Care Rules.

We assess notifications of reportable incidents. If we have concerns, we can give the provider a **remedial action letter**. This letter requires or asks them to take specified remedial action within a specific timeframe.

'Specified remedial action' means we tell the provider what they need to do to remedy the issues in relation to the incident. This can include remedial action to ensure the safety, health and wellbeing of older people in their care affected by the incident.

If the provider does not comply with the letter, we can consider escalating to a compliance or enforcement action.

Compliance notices

We can issue a compliance notice to a provider to respond to non-compliance if:

- we are satisfied that the provider has not complied, or is not complying, with the Aged Care
 Act, or we have information that suggests they may have not complied, or may not be
 complying with their obligations; and
- the non-compliance or possible non-compliance relates to a matter that relates to the Commissioner's functions. For example, we can issue a compliance notice for non-compliance that relates to a condition of registration and our safeguarding functions, specifically to ensure providers comply with their obligations under the Aged Care Act.

If a provider receives a compliance notice, they must take the actions, or refrain from taking the actions, specified in the notice to address the non-compliance or possible non-compliance.

The compliance notice gives a timeframe for the provider to take or not take action. We will also give the provider a reasonable amount of time to respond to us in writing about the notice, which will be used to inform a decision to vary or revoke the compliance notice.

If the provider does not comply with the notice in the given time, we can take compliance or enforcement action. This can include:

- applying to a court for a civil penalty order
- issuing an infringement notice
- other appropriate action.

We can decide to vary or revoke a compliance notice. We must consider the response from the provider before making this decision.

Compliance Notice - Significant failures and systematic patterns of conduct

If we are satisfied a provider is:

- not complying with the Aged Care Act and
- the non-compliance is conduct that involves a significant failure or is a part of a systematic
 pattern of conduct



we can give the provider a compliance notice (see section on compliance notices) which includes details about these issues.

Conduct involves a *significant failure* if it represents a significant departure from the conduct that could reasonably be expected from a provider, having regard to the requirements providers are subject to under the Aged Care Act.

When determining whether a provider's conduct is part of a **systematic pattern of conduct**, regard must be had to the following:

- the number of times the provider's conduct has not complied
- the period over which the non-compliance occurred
- the number of individuals affected by the non-compliance
- the provider's response, or failure to respond, to any complaints about the non-compliance.

Varying registration

To compel (make) a provider remedy non-compliance and manage risk, we can consider using our power to vary a provider's registration. This includes the ability to:

- vary or revoke a condition we have put on the provider's registration
- impose a new condition on the provider's registration
- remove the provider from a registration category
- reduce or extend the provider's registration period
- remove an approved residential care home from the provider's registration.

For example, for certain providers it is a condition of registration that they must conform with the Aged Care Quality Standards. We audit a provider against these Standards when they apply for registration or a renewal of registration. If we find there is non-conformance with the Standards, we can impose a new condition on the provider that relates to remedying and preventing further non-compliance with this condition.

Before we vary a provider's registration we must consider if it appropriate to do so in all the circumstances. This means we will base our decision on the whole picture rather than isolated facts. We look holistically at the circumstances of the provider, their aged care obligations and our functions to reach a view about whether to vary a provider's registration.

We need to give a provider a written notice if we are going to vary a provider's registration in a way that could have a **significant adverse impact** on their delivery of aged care services. The notice will set out the reasons why we are considering varying the provider's registration and invite the provider to make submissions in response to the notice.

Significant adverse impact means that varying the provider's registration could have a serious and negative effect on their ability to deliver aged care services. For example, a variation that would have a significant adverse impact on the provider's delivery of services includes the removal of an approved residential care home from the provider's registration.

To decide if an adverse impact is significant, we look at each matter on a case-by-case basis. We may consider:

- the type of impact. For example, if it will cause financial loss because they can no longer operate in a category
- the provider's need to allocate resources to meet more regulatory requirements (for example, if the variation will divert money and/or staff away from other areas of service delivery)
- the size of the impact (for example, if the variation will affect one or more categories of registration or only a specific aged care obligation in one service type)
- how long the impact will last (for example, is it for a short period of time e.g. one month or is it permanent?)
- if the impact can be or has been reduced (for example, are there actions the provider can take to reduce the impact?).

We do not need to give the provider written notice if:

- the decision is to:
 - vary or revoke a condition we have put on their registration
 - o impose a new condition on their registration, and
- we reasonably believe that there will be an immediate and severe risk to the safety, health or wellbeing of one or more older people if we do not vary the provider's registration.

If a provider does not comply with a condition imposed on their registration, we can take enforcement action, such as applying to a court for a civil penalty order.

For further information on varying registration, including information about a provider's ability to apply to us for a variation of registration, please refer to our <u>Provider Registration Policy</u>.

Enforceable undertakings

Enforceable undertakings involve a provider or worker acknowledging they are not complying with their obligations and agreeing to voluntarily take action to remedy this.

We can accept an enforceable undertaking from a provider or worker to:

- do (or not do) certain things
- comply with their aged care obligations
- manage risk.

Entering into an enforceable undertaking shows that a provider or worker:

- is committed to complying with their aged care obligations
- is able to comply with their obligations
- can manage risks to older people and deliver quality and safe care.

If they do not comply with the terms of the enforceable undertaking, we can take other regulatory action, such as enforcing the undertaking through court proceedings and court orders.

Injunction

An injunction is a court order that tells someone they must do, not do or stop doing something. We can apply to a court for an injunction:

- restraining a provider or worker from certain behaviour
- requiring them to do a certain thing to comply with specific aged care obligations.

For example, if a provider or worker has not responded to other regulatory action we have taken, we can apply for an injunction because we need to take this action to:

- respond to significant non-compliance
- stop serious non-compliance from happening.

5.4 Enforcement actions

Enforcement actions are a stronger form of statutory action than compliance actions. In general, we use our enforcement actions when there is non-compliance that:

- is a high to severe risk
- has caused or has the potential to cause serious harm to older people.

This can include situations where a provider, worker or DPO:

- has repeatedly not complied with their obligations
- has failed or is unwilling to take the actions needed to reduce risks to older people
- is not suitable to provide aged care services.

Enforcement actions can include:

- infringement notices
- vary a provider's registration to a registration category or residential care home
- revoke approval of a residential care home
- suspend or revoke registration
- notice to agree to certain matters
- determination relating to suitability of responsible persons
- banning orders
- civil and criminal court action
- compensation orders

We can use them alongside a compliance action. We can also use more than one enforcement action at the same time, if it is appropriate and allowed under legislation.

Which enforcement action we use depends on all the factors in relation to the non-compliance and how effective the enforcement action is at achieving our enforcement outcomes (see section on Compliance and enforcement outcomes).

We usually use enforcement actions with providers when they have a supervision status of **active** or **heightened supervision**.

Infringement notices

We can issue an infringement notice to a provider or worker for non-compliance with certain aged care obligations that are an offence or a civil penalty provision in the Aged Care Act (see **Appendix A** for a list of our offence and civil penalty provisions). This includes a failure to:

- give reports
- give notice of a change in circumstances
- cooperate with persons performing functions or exercising powers under the Aged Care Act, including during investigations or compliance checks
- comply with a required action notice or compliance notice
- comply with notices requiring the provision of information or documents
- provide reasonable facilities and assistance for assurance activities.

An infringement notice explains the non-compliance and requests the provider to pay an amount of money. The provider can choose to pay the amount in the notice. If they do not, we can take other enforcement action including commencing civil penalty proceedings.

Varying a provider's registration to remove a registration category or residential care home

We can, if it is appropriate in all the circumstances to do so, vary a provider's registration to:

- remove the provider from a registration category
- remove an approved residential care home from the provider's registration.

A provider cannot provide government funded aged care services in a registration category or residential care home that we have removed from their registration.

Where the risk from the non-compliance is, or could become, severe, we can consider using this power as an enforcement response to stop a provider:

- delivering specific aged care services
- running a residential care home.

Revoking approval of a residential care home

Providers can only deliver services in a residential care home if we have approved it.

The definition of a residential care home is that it:

- is the place of residence of older people who, by reason of sickness, have a continuing need for aged care services, including nursing services
- is fitted, furnished and staffed for the purpose of providing those services.

We can revoke (cancel) our approval of a residential care home if:

- the home no longer meets the definition of a residential care home
- the provider and/or the residential care home no longer meets any other requirements prescribed in the Aged Care Rules (e.g. requirements for ownership of the home and the buildings that comprise the home).

Before we make the decision, we must:

- give the provider a notice in writing telling them that we are considering making this decision and the reasons why
- consider any submissions made by the provider in response to the notice.

If we make this decision, we tell the provider in writing that we have revoked the approval of the residential home.

Suspending or revoking registration

We can suspend or revoke a provider's registration if we reasonably believe (for suspension) or we are satisfied of (for revocation), one of more of the following matters:

- they have not complied, are not complying, or are going to not comply with the Aged Care
 Act
- they submitted a registration application containing information that was false or misleading
- they are insolvent (unable to pay their debts) under administration
- they are unsuitable to provide aged care services based on specific registration and renewal requirements
- they have responsible persons who are not suitable to deliver aged care services, having regard to particular matters prescribed in the Aged Care Act or the Rules.

We can also suspend or revoke a provider's registration in other circumstances, as specified under the Aged Care Rules.

We suspend registration to protect older people. Suspending a provider's registration temporarily stops them receiving aged care funding and taking more older people into care. It gives them time to take actions such as:

- remedy their non-compliance, address risks and other issues relating to the non-compliance
- show they can safely continue providing care
- show they can effectively manage risks to older people.

Suspending a provider's registration can have serious consequences for older people and workers as well as the provider. We balance these with the need to stop harm to people receiving aged care.

If a provider does not take action to remedy the issues for which we suspended their registration, we may consider revoking their registration.

Revoking a provider's registration stops them providing funded aged care services. We consider revoking a provider's registration where:

- other actions we have taken have not been successful
- there is still serious and ongoing non-compliance and risk to older people.

We revoke a provider's registration to:

- remove them from the aged care sector
- safeguard and protect older people
- keep trust in the sector.

When we revoke a provider's registration, we can also give them a banning order to ban them from delivering aged care services. We can do this to stop providers trying to:

- re-register
- deliver other aged care services as associated providers (this is an entity that delivers services on behalf of a registered provider).

Before we decide to suspend or revoke the registration of a provider, we must tell the provider that we are considering suspension or revocation. This must:

- include the reasons why we are considering making the decision
- invite the provider to make written submissions to us in relation to the matter within 14 days (or a longer period stated in the notice)
- inform the provider that if no submissions are made within the required timeframe, any suspension or revocation may take effect as early as 7 days after the end of that timeframe.

In deciding whether to suspend or revoke the registration, we must consider any submissions made by the provider.

When deciding whether to suspend or revoke a provider's registration we must have regard to:

- the nature, significance and persistence of any non-compliance or proposed non-compliance
- action that can be taken to address any non-compliance or proposed non-compliance
- the extent (if any) to which the entity is delivering funded aged care services in a way that may cause harm to, or jeopardise, public trust in the Commonwealth aged care system
- the safety, health or wellbeing of older people receiving the provider's services
- any other matter we think is relevant.

Notice to agree to certain matters

If we are considering revoking a provider's registration, we can give them a notice to agree to certain matters (notice to agree). The notice to agree will:

- require the provider to agree, in writing, to do any one or more things specified in the notice
- inform the provider that, if the provider does not agree to do those specified things in accordance with the notice, we will revoke the registration.

We can require a provider to:

- appoint an eligible advisor who has appropriate qualifications, skills or experience to help the provider to comply with their aged care obligations in relation to either or both of the following matters:
 - the funded aged care services delivered by the provider

- the governance and business operations of the provider
- do other things set by the Aged Care Rules.

If the provider does not agree to do the things we specify in the notice to agree, we will revoke their registration.

Determination relating to suitability of responsible persons

We can decide that a provider's responsible person is no longer suitable to be involved in providing aged care services.

Before deciding a responsible person is not suitable, we must consider the 'suitability matters' under the Aged Care Act and can consider other the relevant information to make our decision.

Before we make the decision, we must:

- give the responsible person and the provider a notice in writing telling them that we are considering making this decision and the reasons why
- consider any submissions made by the person and the provider in response to the notice.

If we make this decision, we tell the provider they must remove that person from the position they hold (stop them being one of their responsible persons). We can also ban the person from being involved in any type of aged care services.

It is an offence for a provider not to remove a responsible person after we have said they are no longer suitable. In these circumstances, we can refer the provider to be prosecuted in court.

Banning orders

We can stop or limit a current or former provider or a current or former worker (or other individuals) from being involved in aged care by giving them a banning order.

If we give someone a banning order it means they are banned from providing aged care services or working in aged care. A banning order can be for a specific service type and include conditions. This means we can stop someone being involved in certain types of aged care or specific activities or for a specific time period.

We can issue a banning order if:

we have revoked a provider's registration

- we reasonably believe a provider:
 - o has not complied, is not complying, or is likely not to comply with the Aged Care Act, or
 - has been involved in, or is likely to become involved in, non-compliance by another entity
- we reasonably believe a worker has not complied, is not complying, or is likely not to comply
 with the Aged Care Code of Conduct
- we reasonably believe that there is a severe risk to the safety, health or wellbeing of an older person if the provider or worker continues to be a provider or worker
- we reasonably believe a provider, worker or other individual is not suitable to be involved in providing aged care
- the provider or worker has been convicted of an offence involving fraud or dishonesty
- the provider or worker is insolvent under administration.

Banning orders can be temporary or permanent. We can vary or revoke them.

In most cases, before we issue a banning order, we:

- give the provider or worker a 'notice of intention' to make a banning order
- tell them why we are considering making the banning order
- give them an opportunity to respond.

However, we can give a banning order without a notice of intention if:

- we reasonably believe that there is an immediate and severe risk to the safety, health or wellbeing of older people if the banning order is not made; or
- we have revoked the provider's registration.

We can take enforcement action if:

- a provider or worker does not comply with a banning order
- a provider does not make sure that someone does not take part in activities related to the banning order.

For example, we can start court proceedings for court orders such as a civil penalty and injunction.



Civil action

Where there is serious non-compliance by a provider, worker or DPO, we can use civil court actions under the Aged Care Act. This is a process that we take through the court. The court can make orders requiring the provider, worker or DPO to pay a penalty or do certain things.

We can apply to the court for:

- a civil penalty order (a monetary fine imposed by a court). *See Appendix A for a list of our civil penalty provisions*
- an order to enforce an enforceable undertaking
- an order to grant an injunction.

Criminal action

The Commonwealth Director of Public Prosecutions prosecutes criminal offences under the Aged Care Act (see **Appendix A** for a list of our offence provisions).

We can refer a provider's non-compliance with an aged care obligation that carries a criminal offence under the Aged Care Act to the Commonwealth Director of Public Prosecutions for prosecution after considering the:

- circumstances
- evidence
- Prosecution Policy of the Commonwealth.

Compensation orders

Providers have a duty under the Aged Care Act to make sure (as far as reasonably possible) that their conduct (what they do or do not do) does not negatively affect the health and safety of older people in their care. This means that they must takes steps to prevent harm that could cause injury, illness or death. A provider will have contravened this duty if they, without reasonable excuse, engage in conduct that does not comply with the duty and that conduct amounts to a serious failure. Conduct amounts to a 'serious failure' if it exposes an older person to a risk of death, serious injury or illness, and involves a significant failure or is part of a systematic pattern of conduct.



If a court decides that a provider failed to comply with this duty, an older person who suffered a serious injury or illness due to the provider's conduct could be entitled to compensation from the provider.

If appropriate, and with the older person's consent, we can apply to the court for the older person to make a compensation order. The older person can also apply to the court directly.

Before we apply for a compensation order for an older person, we discuss the options with them. We do this to help the older person get the best possible outcome.

5.5 Decision making

To make good regulatory decisions we use best practice decision-making procedures. Our decisions follow administrative law principles and the requirements in the legislation. This means we will consider all relevant factors and the requirements under the Aged Care Act before we make a compliance or enforcement decision.

We provide procedural fairness to providers, workers or DPOs whose rights or interests could be negatively affected by our decisions. This means before we make a final decision, we notify providers, workers and DPOs whose rights or interests could be negatively affected, except in circumstances where:

- where the legislation excludes this from occurring
- we need to act quickly to prevent harm to older people.

When affording procedural fairness:

- we give them the opportunity to be heard on the factors relevant to the decision, which
 includes being granted an opportunity to present information and submissions in response
 to the concerns we have raised
- our decisions are always impartial and free from actual or apparent bias.

After we make a decision, the provider or worker can:

- ask us to reconsider certain decisions
- ask for an external review of certain decisions we have made.



For further information about how we make decisions please refer to our **Decision-making Framework**.

5.6 Transparency of our activities

We are open about our regulatory activities so that the public can see how we regulate the aged care sector to protect the safety, health, wellbeing and quality of life of older people. We are transparent about our monitoring activities and responses to non-compliance. We openly share the results of our work to protect older people, where we are allowed to under the legislation. This helps to deter poor behaviour and non-compliance in the aged care sector.

We inform the public about our compliance and enforcement actions by publishing:

- our regulatory decisions
- the compliance status of providers.

For more information on the types of compliance and enforcement decisions that we publish please refer to the <u>Commission's website</u> and the <u>My Aged Care Website</u>.

This helps people receiving aged care and their supporters to make informed decisions about the providers and services they choose.

5.7 Working together

We work closely with other agencies and regulators to share information, intelligence and best practice in aged care. Where appropriate, and in line with legislation, we refer information or further action to relevant agencies or regulators.

You can find some of the agencies we work with, and when we refer information or action to them, in **Table 1** below.

Table 1: Agencies or regulators we work with for an integrated approach to aged care

Agency or regulator	What we refer to and work with them about
Department of Health, Disability and Aging and the Department of Social Services	Regulating:

Support at Home, the Commonwealth Home Support Program, and National Aboriginal and Torres Strait Islander Flexible Aged Care Program providers in financial viability concerns about a provider 24/7 nursing and care minutes obligations. Managing or regulating: aged care payments including fraud investigation. For example, when compliance officers have found that a provider has received an overpayment in financial subsidy, which could be a sign of fraud closing a service, to make sure providers: stop receiving subsidy payments or make arrangements for older people relocating to other services. National Disability Insurance Scheme (NDIS) Quality and Safeguards Commission When older people, workers and providers need both the Commission and the NDIS to be involved. Federal, state or territory police force Matters involving: a possible crime performing and coordinating emergency and rescue operations. Concerns about: the behaviour of health practitioners national registration and accreditation.		
aged care payments including fraud investigation. For example, when compliance officers have found that a provider has received an overpayment in financial subsidy, which could be a sign of fraud closing a service, to make sure providers: stop receiving subsidy payments make arrangements for older people relocating to other services. National Disability Insurance Scheme (NDIS) Quality and Safeguards Commission When older people, workers and providers need both the Commission and the NDIS to be involved. Federal, state or territory police force Matters involving: a possible crime performing and coordinating emergency and rescue operations. Australian Health Professionals Registration Authority. Concerns about: the behaviour of health practitioners		Home Support Program, and National Aboriginal and Torres Strait Islander Flexible Aged Care Program providers • financial viability concerns about a provider • 24/7 nursing and care minutes
Quality and Safeguards Commissionneed both the Commission and the NDIS to be involved.Federal, state or territory police forceMatters involving:• a possible crime• performing and coordinating emergency and rescue operations.Australian Health Professionals Registration AuthorityConcerns about:• the behaviour of health practitioners	Services Australia	 aged care payments including fraud investigation. For example, when compliance officers have found that a provider has received an overpayment in financial subsidy, which could be a sign of fraud closing a service, to make sure providers: stop receiving subsidy payments make arrangements for older people
 a possible crime performing and coordinating emergency and rescue operations. Australian Health Professionals Registration Authority Concerns about: • the behaviour of health practitioners 		need both the Commission and the NDIS to be
• the behaviour of health practitioners	Federal, state or territory police force	a possible crimeperforming and coordinating emergency
		the behaviour of health practitioners

Australian Competition and Consumer Commission	Overcharging or unlawful charging of aged care fees.
State authorities	Investigating the behaviour of unregistered health care workers.
State coroners	Investigating the circumstances of reportable deaths.
Office of the Inspector-General of Aged Care	 Matters such as: exchanging information and documents collaborating, cooperating and helping support the performance of our functions
Independent Health and Aged Care Pricing Authority	Collaborating and sharing information to help make decisions about funding hospitals and aged care services.
Commonwealth Ombudsman	Making sure we act fairly and follow the proper processes.



Appendix A: Civil Penalty and Offence Provisions

Civil penalty provisions

A civil penalty provision explains that a person or provider may have committed a civil penalty offence if they:

- do not do something they should
- do something that they should not.

Breaching a civil penalty provision can lead to civil proceedings (resulting in a monetary penalty). Non-compliance with a civil penalty provision does not result in a criminal conviction.

Civil penalty provision	Description	Maximum penalty units
Section 142(3)	A registered provider breaching a condition of registration.	250 penalty units
Section 142(4)	A registered provider breaching a condition of registration which involves a significant failure or is part of a systematic pattern of conduct.	500 penalty units
Section 166(5)	A registered provider failing to comply with reporting requirements.	250 penalty units
Section 167(5)	A registered provider failing to inform Commissioner or System Governor of change in circumstances prescribed by the Rules.	30 penalty units
Section 173(2)	A worker failing to comply with Code of Conduct.	250 penalty units
Section 174(2)	A responsible person failing to comply with Code of Conduct.	250 penalty units

Section 177(4)	A registered provider failing to cooperate with a person performing functions under the Act or specified functions under the National Health Reform Act.	30 penalty units
Section 179(3)	A registered provider engaging, without a reasonable excuse, in conduct that does not comply with their duty (under s179(1)) where such conduct amounts to a serious failure.	Individual – 150 penalty units Other than an individual – 1000 penalty units
Section 179(5)	A registered provider contravening, without a reasonable excuse, their statutory duty (under s179(1)) and the contravention results in the death of, or serious injury to or illness of, an individual to whom the duty is owed.	Individual – 500 penalty units Other than an individual – 4,800 penalty units
Section 180(4)	A person who, without a reasonable excuse, engages in conduct that does not comply with their duty (s180(1)) and where such conduct amounts to a serious failure.	150 penalty units
Section 180(6)	A person who, without a reasonable excuse, engages in conduct that amounts to a serious failure to comply with the duty (under s180(1)) and where such conduct results in death, serious injury or illness.	500 penalty units
Section 188(2)	An operator of an aged care digital platform does not check and display the required information.	500 penalty units
Section 189(2)	An operator of a digital platform that is a constitutional corporation fails to comply with its obligations relating to digital platforms under s189(1).	250 penalty units
Section 430(4)	A person failing to provide all reasonable facilities and assistance to a Commission officer, or to a	100 penalty units

	person assisting a Commission officer, when exercising powers of entry without warrant or consent.	
Section 480	A registered provider failing to comply with a required action notice.	30 penalty units
Section 487	A registered provider failing to comply with a compliance notice.	60 penalty units
Section 490(2)	A person failing to comply with a notice to attend.	30 penalty units
Section 495(2)	A person failing to comply with a notice to give information or produce documents.	30 penalty units
Section 500(1)	A registered provider failing to comply with a banning order issued against it.	1000 penalty units
Section 500(2)	A registered provider failing to take reasonable steps to ensure that an individual doesn't breach a banning order they are subject to.	1000 penalty units
Section 512(2)	A registered provider failing to comply with the requirement to provide facilities and assistance for assurance activities.	30 penalty units
Section 529(1)	A registered provider knowingly providing false or misleading information or documents in purported compliance with the Act.	100 penalty units
Section 530(1)	A registered provider knowingly producing a false or misleading document to another person in purported compliance with the Act.	100 penalty units





Section 550(1)	Disclosing information that qualifies for protection under s547.	30 penalty units
Section 551(1):	Causing detriment to a person solely or partly because the entity believes or suspects that the person has, or intends to, make a protected disclosure under s547.	500 penalty units
Section 551(3):	Threatening to cause detriment to a person solely or partly because the entity believes or suspects that the person has, or intends to, make a protected disclosure under s547.	500 penalty units
Section 591	Providing false or misleading information or document in applications, claims or requests.	60 penalty units



Offence Provisions

An offence provision explains that a person or provider may have committed a criminal offence if they:

- do not do something they should
- do something that they should not.

Not complying with an offence provision can result in a criminal conviction and a fine from a court.

Offence provision	Description	Maximum penalty
Section 36(1)	A person exercises influence or engages in conduct with the intention of dishonestly obtaining benefit or detriment.	60 penalty units
Section 36(3)	A person ceases to be a supported and uses a person's information with the intention of dishonestly obtaining benefit or detriment.	60 penalty units
Section 169	A responsible person becomes aware of a change of circumstances that related to suitability matter and fails to notify the provider of the change.	30 penalty units
Section 171	A registered provider fails to comply with a determination made in relation to a responsible person.	300 penalty units
Section 172	A registered provider fails to consider suitability matters of a responsible person at least once every 12 months.	300 penalty units
Section 178(1)	A registered provider uses a refundable deposit, and it is not permitted under this section.	300 penalty units
Section 178(2)	A responsible person uses a refundable deposit in the way not permitted under this section.	Imprisonment for 2 years

Section 430(3)	A person failing to provide all reasonable facilities and assistance to a Commission officer, or to a person assisting a Commission officer, when exercising powers of entry without warrant or consent.	30 penalty units or imprisonment for 6 months, or both
Section 438 (5)	A specified person does not comply with an order to provide any information or assistance to an authorised officer in relation to data held or accessible on a computer or storage device.	Imprisonment for 2 years
Section 490(1)	A person fails to comply with a notice to attend.	30 penalty units
Section 491(4)	A person fails to take an oath or make an affirmation for the purposes of answering questions.	30 penalty units
Section 495(1)	A person fails to comply with requirement to give information or produce documents.	30 penalty units
Section 518(4)	A financial institution fails to comply with a notice given about payment.	300 penalty units
Section 535(1) and (2)	Unauthorised use or disclosure of protected information.	Imprisonment for 2 years or 120 penalty units, or both
Section 543	Failure to retain a record after cessation for 7 years and it was condition of registration to retain the record.	60 penalty units

What is a penalty unit?

A penalty unit is the base amount used to calculate the monetary penalty payable for a contravention of an offence or a civil penalty provision.

For example, one penalty unit currently equals \$330, so if the maximum penalty for failure to comply with a provision is 500 penalty units the amount will be:

500 (penalty units) x \$330 = \$165,000 (as of September 2025).

The penalty unit amount is subject to regular indexation under section s4AA of the *Crimes Act* 1914.





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