



Office of the Commissioner
Our Ref: LHW2025-09-08

Adjunct Professor Bernice Redley
Health Complaints Commissioner
Level 26, 570 Bourke Street
MELBOURNE VIC 3000

Dear Professor Redley

I am writing in response to your letter of exchange, dated 25 July 2024, which detailed the responsibilities of the Health Complaints Commission and how the Health Complaints Commission intersects with the Australian Health Practitioner Regulation Agency (Ahpra). The letter also outlined potential arrangements for contact, disclosure and the exchange of information between our two organisations.

I am in agreement with the arrangements you have proposed and have outlined below the Commission's proposed process for referring information between our organisations and other mechanisms for maintaining an ongoing relationship.

I trust the exchange of these letters will encourage information sharing between our staff and ensure that regulatory matters are managed by the most appropriate organisation. This in turn will ensure that older people using Commonwealth-funded aged care services are well cared for and protected and may also lead to improved complaints handling for both organisations.

The Aged Care Quality and Safety Commission (the Commission) is an Australian Government statutory authority within the Health, Disability and Ageing portfolio. The Commission is the national regulator of funded aged care services, and the primary point of contact for older people and providers in relation to quality and safety in funded aged care.

With the transition to the *Aged Care Act 2024* (Aged Care Act), the Commission will assist the Aged Care Quality and Safety Commissioner and Complaints Commissioner in the performance of their functions including continuing to regulate aged care providers, responsible persons, and aged care workers. For your reference in Appendix 1, I have added a list of my functions under the *Aged Care Quality and Safety Commission Act 2018* and *Aged Care Quality and Safety Commission Rules 2018*, which will continue to operate until the Aged Care Act 2024 commences.

Under the Aged Care Act, as the Aged Care Quality and Safety Commissioner, I am responsible for:

- upholding the rights of older people according to the Statement of Rights in the Aged Care Act.
- protecting and enhancing the safety and wellbeing of people accessing funded aged care services
- engaging with people accessing funded aged care services and their supporters and representatives to develop best practice models for registered providers and aged care workers
- registering providers to deliver funded aged care services
- monitoring and enforcing the obligations of entities under the Aged Care Act including registered providers, responsible persons, aged care workers and aged care digital platform operators.
- administering the Serious Incident Response Scheme (SIRS)
- building the capability of registered providers, responsible persons and aged care workers, and empowering older people accessing funded aged care services.

The Complaints Commissioner is responsible for dealing with complaints and feedback received by the Commission about the delivery of funded aged care services, including complaints about providers, responsible persons and aged care worker compliance with the Aged Care Act.

As our organisations both have functions to resolve complaints and regulate registered providers and aged care workers, it is likely there will be some overlap in our respective jurisdictions. This includes regulation of Ahpra registered workers, including allied health professionals and nurses, who may be either working in aged care or directly employed by aged care providers. The Commission may receive information through our complaints function or other regulatory activities, which may indicate risk when professional obligations are not being met.

Information Sharing

I propose that an informal approach be taken to communication between our organisations. In determining whether information should be referred, or to determine the finer points of jurisdiction, I suggest that officers within our organisations are able to contact each other by telephone or email as necessary on a case-by-case basis. A low threshold for informal contact will promote a freer flow of information and will also ensure that referrals are made only where appropriate.

However, where formal referrals are being made, or information that is protected under relevant legislation is being released, I suggest this should occur via email to the nominated contact point below. The email should clearly indicate that the information is being shared as part of a referral for consideration of further action.

Contact details:

Customer Contact Team

Aged Care Quality and Safety Commission

P: **1800 951 822**

E: **info@agedcarequality.gov.au**

Where part of a referral or consultation constitutes sharing of information which is protected information under relevant legislation, I note there are restrictions on the use of that information. These restrictions mean that a person may be guilty of an offence if they make a record of, disclose or otherwise use protected information disclosed to them, and for the purpose for which the person records, discloses or uses the protected information is not for the purpose for which the information was disclosed. Where restricted information is shared, the status of this information will be highlighted along with any relevant obligations associated with its management.

I trust that when protected information is released to your office that appropriate procedures are in place to ensure this information is protected against misuse and is not unlawfully disclosed. I undertake that any personal or sensitive information that your office provides to me will be protected against misuse and will not be unlawfully disclosed and will be managed in accordance with the Commission's Protected Information Policy and the *Privacy Act 1998*.

Ongoing relationship

I am pleased to confirm that we have exchanged letters, taking effect from the date of this signed letter.

I look forward to continuing to build upon the collegial relationship between our organisations and welcome any other thoughts you may have regarding the ongoing relationship between our two organisations.

Yours sincerely



Liz Hefren-Webb
Commissioner

17 September 2025

Appendix 1

This EoL has been developed in the context of the Aged Care Quality and Safety Commission's (ACQSC) transition to the *Aged Care Act 2024* (Aged Care Act). Until the Aged Care Act and the *Aged Care Rules 2025* commence, the ACQSC will continue its regulatory operations in accordance with the *Aged Care Quality and Safety Commission Act 2018* (Commission Act) and the *Aged Care Quality and Safety Commission Rules 2018* (Commission Rules). The below information describes the ACQSC's role and functions under the Commission Act and Commission Rules.

The ACQSC is an Australian Government statutory authority within the Department of Health, Disability and Ageing. The ACQSC is the national regulator of the providers of funded aged care services including residential care, home care, and flexible care (as defined in the *Aged Care Act 1997*).

The ACQSC's primary responsibility is to regulate the performance and compliance of approved providers and the workforce in accordance with the legislative frameworks, as applicable to the ACQSC's scope as the national regulator for aged care. The ACQSC receives and resolves complaints about aged care providers, services and workers. The ACQSC invests in education and engagement to empower older people who receive aged care services. It also supports providers to understand their obligations and responsibilities, holding them accountable for their performance.

As an independent regulator, the ACQSC performs its functions and exercises its powers as set out in the Commission Act and the Commission Rules), to protect and enhance the safety, health, wellbeing and quality of life of older people who receive care and services provided by funded aged care providers.

The ACQSC's functions under the Commission Act and the Commission Rules include:

- i. To protect and enhance the safety, health, well-being and quality of life of aged care consumers
- ii. Approving providers and ensuring they are compliant with their responsibilities under the Commission Act and *Aged Care Act 1997*
- iii. Ensuring approved providers, governing persons and aged care workers comply with the Aged Care Code of Conduct
- iv. Engagement with older people and their supporters
- v. Resolving complaints about aged care providers
- vi. Accrediting aged care services,
- vii. Educating providers and informing older people and their supporters.

25 July 2024

PRIVATE AND CONFIDENTIAL

Janet Anderson PSM
Commissioner
Aged Care Quality and Safety Commission

Dear Janet

In response to your request to formalise our information sharing arrangements, I have outlined below the process for referring information between our organisations.

The Health Complaints Commissioner (HCC) is an independent statutory body operating under the *Health Complaints Act 2016* (HC Act).

The HCC:

- supports safe and ethical healthcare in Victoria
- resolves complaints about health services
- manages complaints about the handling of health information under the Health Records Act 2001
- provides an accessible service and free alternative to legal proceedings
- regulates 'general health service providers'
- investigates providers who pose a serious risk to the health, safety or welfare of the public
- monitors and reviews trends in complaints data
- provides information and educates consumers and providers about their rights and responsibilities.

The definition of 'health service' includes 'a health related aged care service'. In summary, "general health service providers" are health service providers who provide a health service in Victoria that is not the practice of a health profession within the meaning of the *Health Practitioner Regulation National Law*.

The Australian Health Practitioner Regulation Agency and the National Boards regulate registered health practitioners, while the HCC manages complaints through the HCC's resolution process that may involve registered practitioners.

Information sharing contact:

Any requests from your office should be directed to Imogen Knowles, Acting Assistant Commissioner in the first instance. Imogen will then nominate an officer from her team to respond.

Where part of a referral or consultation constitutes sharing of information which is protected information under relevant legislation, I note there are restrictions on the use of that information. These restrictions mean that a person may be guilty of an offence if they make a record of, disclose or otherwise use protected information disclosed to them and for the purpose for which the person records, discloses or uses the protected information is not for the purpose for which the information was disclosed.

My office has appropriate procedures in place to ensure information is protected against misuse and is not unlawfully disclosed. I undertake that any personal or sensitive information that your office provides to me will be protected against misuse and will not be unlawfully disclosed.

I look forward to working with your office in the future.

Yours sincerely



Bernice Redley
Health Complaints Commissioner

cc – Imogen Knowles, Angela Palombo