

CLIENT INFORMATION PACK

What is Support at Home?

Government-funded aged care that helps you live well in your own home · Rosewood Gardens

Support at Home is an Australian Government aged care program. It helps older people stay:

Safe at home	Independent for as long as possible
Connected with family & community	Supported with health & daily living

What services can it provide?

Personal care (showering & dressing)	Nursing care	Physio, OT & podiatry
Help with medication	Cleaning & laundry	Meal preparation
Shopping	Transport & social support	Respite care
Assistive equipment	Home safety modifications	Coordinated, regular care

Who may be eligible?

You may be eligible for a **free** aged care assessment when you are:

65 years or older, and having difficulty with everyday activities without help	50 years or older and homeless, or at risk of homelessness
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You may consider applying when you have experienced:

Reduced mobility	A fall or near fall	A hospital admission
A new health condition	Increasing weakness or pain	Memory problems
Difficulty showering / dressing	Difficulty cooking, cleaning, shopping	Less help available from family

Good to know — Eligibility is based on your age, needs and circumstances. It is **not restricted only to pensioners**. An aged care assessment decides if you are eligible and which program suits you.

The Help-at-Home Programs

Five ways support is funded — the assessor decides which suits your needs

1 • CHSP — Commonwealth Home Support Program (entry level)

Basic help for people who need a small amount of support. May include:

- Occasional cleaning & basic home maintenance
- Delivered meals & transport
- Social activities & personal care
- Respite & some allied health services

Best when you need only **one or two basic services** and your needs are not complex.

2 • Support at Home — Ongoing Services

For people who need regular, coordinated or more complex care.

- 8 classifications — level 1 = lowest funding, level 8 = highest
- The assessor sets your level from your actual care needs
- Funding is a quarterly budget (covers a 3-month period)

3 • AT-HM — Assistive Technology & Home Modifications

Separate funding for approved equipment, products and home changes. May include:

Personal alarm / safety pendant	Walking stick, walker, wheelchair
Shower chair, toilet equipment	Adjustable / specialised bed
Pressure-relieving equipment	Recliner / lift chair (if justified)
Ramps & grab rails	Bathroom modifications

An OT or qualified health professional may assess you. The item must relate to an **assessed need** and appear in your **support plan**.

4 • Restorative Care Pathway (short-term)

Short-term, intensive help to improve or keep your independence — **up to 16 weeks**. Often after a fall, illness, hospital stay or reduced strength. May include:

Physiotherapy	Occupational therapy
Exercise physiology	Nursing
Dietetics	Personal care
Practising daily activities	Approved equipment

5 • End-of-Life Pathway (short-term)

Short-term, higher-level help for someone who wishes to remain at home in the final stage of life. A **doctor, specialist or nurse practitioner** must confirm the person meets the requirements. Funding is generally provided for **12 weeks**, accessed over a period of up to 16 weeks.

5 Ways to Apply to Support at Home

Choose whichever suits you — you can also mix them (e.g. GP referral + provider help)

1	Apply by telephone — My Aged Care 1800 200 422 Mon–Fri 8am–8pm, Sat 10am–2pm. Have your Medicare card ready. Tell them: what help you need · what has changed · what you can no longer do safely · whether it's urgent · whether you recently fell or went to hospital · whether family can keep helping. They can complete the initial application with you on the call.
2	Apply online — myagedcare.gov.au/apply-online Apply for an assessment online My Aged Care Takes about 10–15 minutes. You'll normally need your Medicare card. The online form can be used for help at home, short-term care, residential aged care and end-of-life support. (Full step-by-step on Sheet 4.)
3	Ask a provider for help — Rosewood Gardens 1300 845 766 We can help you understand the process, contact My Aged Care, prepare for the assessment, explain your needs, organise reports & documents, understand your approval letter, and find services after approval. Note: a provider assists you, but My Aged Care and the assessor make the eligibility and classification decisions.
4	Ask your doctor or hospital to refer you Your GP, hospital, specialist or health professional can refer you. Especially helpful when you're leaving hospital, your health has recently declined, you've had repeated falls, you have major mobility problems, or you need urgent care after discharge. Tip: when in hospital, ask the discharge team to arrange an assessment before you go home.
5	Visit an Aged Care Specialist Officer — 1800 227 475 Free, face-to-face help at selected Services Australia service centres. They help with My Aged Care, understanding your options, applying, understanding letters & decisions, and requesting a review or reassessment. Appointments in person or by video.
Tip — Whichever way you choose, be clear and specific. Explain what happens on a difficult day, not your best day, and say plainly if the situation is urgent.	

Applying Online — Step by Step

myagedcare.gov.au/apply-online · about 10–15 minutes

What you need before you start

Medicare card (required)	Your contact details — phone & address
Your GP's name and details	A short list of your medical conditions
Preferred language / interpreter needs	A trusted supporter (optional)

The online steps

1	Go to the official site Type myagedcare.gov.au/apply-online into your browser, or search “My Aged Care — Apply for an assessment online”.
2	Start the application & confirm identity Enter your Medicare card details and personal information as prompted.
3	Answer the questions honestly About your health, mobility, memory, personal care, home and safety. Describe a hard day — don't say “I'm fine” if you are struggling.
4	Describe what has changed & the help you need Note recent falls, a hospital stays, or reduced family help. Say if it is urgent.
5	Review and submit Check your answers, then submit. Write down any reference number shown.
6	Wait to be contacted If you may need support, My Aged Care refers you for a free assessment and the assessment organisation phones to arrange a visit. Answer calls from unknown numbers.

Stay safe — Use the official website only: myagedcare.gov.au. Never enter banking details, and never give personal information to an unknown caller who claims to be from My Aged Care.

Supporting Documents to Gather

Bring or upload these — they can speed up your application and help a positive decision

Key: **SPEED** = speeds up the process **DECISION** = helps a positive decision **BOTH** = helps both

Document	Why it helps	Priority
Medicare card	Needed to start any application.	SPEED
Pension / DVA card	If applicable — confirms your details.	SPEED
GP health summary / care plan	Explains your conditions and how they affect you.	BOTH
Current medication list	Shows complexity and medication risks.	BOTH
Hospital discharge summary	Strong evidence of a recent change in health.	BOTH
Specialist / geriatrician letters	Confirm diagnosis and recommended support.	DECISION
Occupational therapy report	Home safety, equipment & modification needs.	DECISION
Physiotherapy report	Mobility, balance and strength findings.	DECISION
Falls history	Dates & outcomes of any falls or near falls.	DECISION
Memory / cognitive assessment	Supports needs linked to memory or confusion.	DECISION
Mobility / functional assessment	Shows what you can and cannot do safely.	DECISION
Recent test results	Backs up your current medical picture.	DECISION
Details of previous hospital admissions	Shows a pattern or ongoing risk.	DECISION
Details of help provided by family	Shows the gap if family support is reducing.	DECISION
List of services & equipment you need	Makes your request clear and specific.	BOTH
What makes a report powerful — The most useful reports clearly explain: the medical condition · how it affects daily life · what the person cannot do safely · what assistance is required · what may happen without it · the recommended services, equipment or modifications.		

What Happens After You Apply

Your 7-step journey from application to services

1	Initial questions My Aged Care asks about your age, health, mobility, memory, personal care, home situation, safety, the help you already receive and the help you think you need. Answer honestly — don't say "I'm fine" when you are struggling.
2	Referral for an assessment If you may need support, you're referred for an aged care assessment. The assessment is free and most are done face-to-face in your own home.
3	Appointment with the assessor The assessment organisation contacts you to arrange a time. Ask for the assessor's name, organisation, phone, date & time. A family member, friend, carer or supporter may attend — and you may request an interpreter.
4	The home assessment You discuss what you can do independently, what's difficult, medical conditions, mobility & balance, falls, showering/dressing/toileting, cooking/cleaning/shopping, medication, memory, home safety, family support, isolation, cultural & language preferences, and your goals. Together you create a support plan.
5	Receive the decision You get a Notice of Decision and support plan showing whether you're eligible, whether it's CHSP or Support at Home, your classification, approved services, any short-term pathway, your priority category, the reasons, and how to request a review.
6	Wait for funding (if applicable) Ongoing funding is allocated through the priority system: Urgent · High · Medium · Standard. Check progress by calling 1800 200 422 or logging in to your My Aged Care account via myGov. Published wait times are estimates.
7	Choose a provider When funding is ready, you're notified. Compare providers, ask about prices, services & staff availability, review the agreement and budget, and sign only once you understand it. You generally have 56 days to choose (and can ask for an extra 28 days).

Prepare for the Assessment

Think about your needs before the assessor arrives — write down what happens on a difficult day

Personal care ● Showering, dressing, grooming ● Toileting & continence ● Getting in and out of bed ● Taking medication correctly	Mobility & safety ● Walking, stairs, standing from a chair ● Getting into a car · balance ● Falls or near falls · breathlessness ● Pain · weakness · walker/wheelchair
Daily living ● Cooking, cleaning, laundry ● Shopping & gardening ● Attending appointments ● Using transport	Health ● Diabetes, heart condition, arthritis ● Stroke, Parkinson's, dementia / memory loss ● Vision or hearing problems · wounds ● Continence problems · medication risks
Social & emotional wellbeing ● Loneliness · anxiety about being alone ● Difficulty attending cultural / religious activities ● Loss of confidence after a fall ● Carer stress · family unable to keep helping	Home safety ● Unsafe bathroom · slippery floors ● Steps at entrances · hard to reach the toilet ● Difficulty getting into bed · wrong chair height ● No emergency alarm · poor lighting · need rails/ramp

Before the assessor arrives — Prepare a folder with the documents on Sheet 5. A family member or trusted person can be present, and you can request an interpreter.

Help Your Application Along

There is no guaranteed fast-track — but these steps help My Aged Care see the full picture

1	Apply as soon as needs change Don't wait for a crisis. Apply when you first notice reduced mobility, increasing falls, difficulty with personal care, memory deterioration, carer exhaustion, or repeated hospital admissions.
2	Clearly explain any urgency Say when the person cannot remain safely at home, is being discharged from hospital, the main carer is no longer available, there have been repeated falls, there is a risk of malnutrition, medication can't be managed safely, or there's a high risk of another admission or entry to residential care. Don't just say "we need help urgently" — explain exactly what is happening and the immediate risk.
3	Ask the hospital to refer before discharge Hospital evidence is powerful after a change in health. Ask for the discharge summary, medication list, physio & OT reports, nursing recommendations, mobility requirements, equipment recommendations and follow-up plan.
4	Keep your contact details updated Answer calls from unknown numbers while waiting. If they can't reach you, the process may be delayed.
5	Follow up regularly Call My Aged Care and ask: Has the referral been received? Which organisation has it? What's the status? Is a priority category recorded? Is more information needed? Can it be reviewed because needs have worsened?
6	Use a registered supporter A trusted family member or friend can be registered to help with aged care discussions. The older person stays involved and in control of their decisions.

Getting the Right Level of Support

Higher classifications, the evidence that supports them, and Support at Home vs CHSP

How do you get a higher Support at Home classification?

You **cannot** get a higher classification just by asking for more money. It must be supported by **evidence** of greater care needs, which may show:

Increased personal care needs	Reduced mobility · repeated falls	Increasing frailty
Cognitive decline	Complex medication needs	Nursing & continence needs
The need for two workers	Carer burnout · reduced family support	Frequent admissions · residential-care risk

Useful supporting evidence

- GP care plan / health summary
- Mobility & functional assessment
- OT home safety assessment
- Physiotherapy assessment
- Geriatrician report
- Hospital discharge report
- Falls history
- Medication review
- Cognitive assessment
- Nursing assessment
- Carer stress information
- Records showing budget is insufficient

Reports don't automatically guarantee a higher classification, but they help the assessor understand real needs and risks. If you already receive services and your needs have increased: speak with your provider, ask for your care plan & budget to be reviewed, ask whether different services fit within the existing budget, and request a **support plan review or reassessment** (call 1800 200 422 if needed).

Support at Home instead of CHSP?

CHSP may suit when you need... • A small amount of help • One or two basic services • Occasional / entry-level support	Support at Home may suit when you need... • Several services · regular weekly support • Coordinated care · personal care · nursing · allied health • Help with complex conditions · ongoing care management
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Explain all needs together — Don't mention only cleaning when you also need help with showering, mobility, medication, meals and safety. The decision should be based on the complete situation.

Reviews, Reminders & Checklist

If you disagree with a decision — plus your ready-to-go application checklist

If you disagree with the decision

Read the Notice of Decision carefully. If important needs were missed, you may request a **free internal review** — generally **within 28 days** of receiving the notice. Include:

The decision you disagree with	Why you believe it is incorrect
Any needs not properly considered	New medical / allied health evidence
Details of any recent deterioration	The outcome you are requesting

Important reminders

The assessment is free	Be clear about your difficulties
Explain what happens on difficult days	Don't minimise falls, memory or safety risks
Have a trusted person present	Prepare documents beforehand
Keep copies of all letters & reports	Record the date & name of everyone you speak with
Call My Aged Care when circumstances change	Never give banking details to an unknown caller

Simple application checklist

Medicare card
 Telephone number & address
 GP details
 Medical conditions
 Medication list
 Hospital discharge documents
 Details of recent falls
 List of daily activities that are difficult
 Help currently provided by family
 List of services required
 Equipment or home-safety needs
 Preferred language / interpreter
 Trusted family member or supporter
 Pen & paper for the reference number

Important telephone numbers

My Aged Care	1800 200 422
Services Australia Aged Care Line	1800 227 475
Translating & Interpreting Service	131 450
Rosewood Gardens	1300 845 766

A provider can assist, but cannot guarantee approval or classification — those are decided by My Aged Care & the assessor.