COMPLIANCE POLICY AND PROCEDURE

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COMPLIANCE POLICY AND PROCEDURE

Purpose and Scope

The purpose of this policy and procedure is to set out how Bilingual Care complies with the range of legislative, regulatory, and contractual requirements that apply to its operations. It applies to all staff and meets relevant legislation, regulations, and Standards.

Failure to comply with the compliance requirements of the Aged Care legislation and Rules may lead to the Aged Care Quality and Safety Commission taking compliance and enforcement action against Bilingual Care.

Applicable Strengthened Aged Care Quality Standards

- *Standard 2. The Organisation*

Definitions[1]

Aged Care Act 2024 (Cth) – The new Aged Care Act is designed to empower older people and to uphold their rights, needs, and personal choices. The new *Aged Care Act* is the overarching legislation that outlines the obligations and responsibilities that aged care providers must abide by to deliver Australian Government-funded aged care services. The new Act replaces the *Aged Care Act 1997* and the *Aged Care Quality and Safety Commission Act 2018. The Act covers:*

- funding
- regulation
- approval of providers
- subsidies and fees
- standards
- quality of care
- rights of people receiving care and
- non-compliance.

The Act is supported by the *Aged Care Rules 2025*, which provide the detail for complying with the Act. The Act is designed to streamline the sources of Aged Care legislation and determinations. All relevant legislation, rules, and determinations are set out in *Schedule 1. Legislative References*.

Aged Care Complaints Commissioner (Complaints Commissioner) **-** is person responsible for handling complaints or other feedback related to a registered provider, responsible person, or aged care worker of a registered provider and is assisted by the staff of the Commission. The Complaints Commissioner is a separate statutory appointment sitting within the Commission.

[1] Aged Care Quality and Safety Commission 2025, *Glossary*, accessed 04 November 2025, https://www.agedcarequality.gov.au/glossary

Aged Care Quality and Safety Commission (Commission) - the Australian Government agency established to protect and enhance the safety, health, well-being, and quality of life of people receiving aged care. The Commission independently accredits, assesses, and monitors aged care services against the Quality Standards.

Approvals, Compliance, and Investigations Group – a team in the Commission responsible for the:

- assessment and determination of applicants suitable to become an approved provider of home, flexible or residential care
- management of material change notifications by approved providers
- revocation on request by approved providers
- determining non-compliance with provider aged care responsibilities and the regulatory response
- monitoring and management of non-compliance action with providers
- review of prudential requirements of residential providers, and the financial operations of home care providers and
- assessment of incidents reported under the Serious Incident Response Scheme.

Associated Provider (Contractor / Subcontractor) – any person who carries out care and services, or administration or maintenance for an organisation under contract.

Assurance (regulatory assurance) - the Commission's process of assessing relevant information to understand whether providers have effective controls in place to demonstrate they're capable, competent and committed to meeting their regulatory obligations. Assurance activities are ongoing and repeatable until the Commission are satisfied that there is sufficient evidence to be assured the provider is meeting their obligations.

Audit - a detailed review process undertaken by auditors appointed by the Aged Care Quality and Safety Commission to assess if a provider can conform with the *Strengthened Aged Care Quality Standards*. Audits focus on reviewing governance arrangements, systems and processes for delivering care, the experience and outcomes for older people in the provider's care, and whether the provider has safe, high-quality practices in all services areas. Auditors review the effectiveness of systems and processes to continuously improve and sustain conformance with the strengthened Quality Standards.[2] There are 2 audit types:

- ***Registration Audit*** - an audit conducted when a provider applies for initial registration to deliver Australian Government-funded aged care services. Its purpose is to assess whether the provider can meet the strengthened Aged Care Quality Standards for their registration category (see also the definition for ***Audit)***.
- ***Renewal Audit*** - an audit conducted to determine whether a provider's registration will be renewed (see also the definition for ***Audit***). It occurs at the end of the registration period (usually 3 years), unless the Aged Care Quality and Safety Commissioner determines a shorter or longer period based on circumstances.

Audit Rating - the formal assessment outcome given to a provider after an audit, measuring how well they conform to the *Strengthened Aged Care Quality Standards*. The rating is based on evidence collected during the audit and reflects the provider's systems, processes, and practices for delivering safe, high-quality care. The main audit ratings are:

- ***Conformance*** - provider has established, implemented, and continuously improved systems and processes to meet the required outcomes.
- ***Minor Non-Conformance*** - small gaps or improvement opportunities exist, but they are not systemic and pose low risk to older people.

[2] Aged Care Quality and Safety Commission (2025), *Audit overview*, accessed 09 November 2025, https://www.agedcarequality.gov.au/providers/provider-registration/audits/audit-overview

- ***Major Non-Conformance*** - significant gaps exist, often organisation-wide or high-risk, showing failure to meet required outcomes.
- ***Exceeding*** (for Category 6 providers only) - provider meets all relevant strengthened Quality Standards and demonstrates performance above basic compliance.

Audit Reporting (for providers in Categories 4, 5 and 6) - reports prepared by the auditors following an audit. The audit report includes 2 stages:

- ***Preliminary Report***: The initial report prepared by the auditors that summarises the findings. Providers are able to give feedback on the preliminary report.
- ***Final Report***: A final report is prepared following any feedback received. The final assessment report is provided at the end of each audit. The final report summarises conformance ratings for all the audits conducted during the program.

Compliance Notice - a formal regulatory notice from the Commission to a provider stating that the provider has been found non-compliant, or that the Commission is aware of information that suggests non-compliance with the provider's incident management or restrictive practices responsibilities under the *Aged Care Act 2024 (Cth)*.

There are four types of Compliance Notice:

- ***Required Action Notice -*** *The Commissioner or Complaints Commissioner, under the powers of the* Aged Care Act 2024 (Cth), may provide written notice in relation to a matter that relates to the registered provider. This matter may have been raised through complaint, notification, or other information received or held by the Commission. It may include issues that relate to an individual under the Statement of Rights or in relation to the registered provider's conditions of registration.
- ***Compliance Notice*** - a formal regulatory notice from the Commission, issued under section 481 of the Aged Care Act 2024 (Cth). A *Compliance Notice* may be issued if the Commission is satisfied a provider is or has been non-compliant with one or more of its aged care responsibilities under the *Aged Care Act 1997 (Cth)*, but that the non-compliance does not pose an immediate and severe risk to the safety, health, and well-being of consumers. The notice signals the Commission's intention to impose civil penalty, sets out actions the provider is required to take to remedy the non-compliance, and gives the provider the opportunity to make submissions prior to the Commission deciding to impose one or more sanctions. The Commission may, after considering submissions made by the provider, require the provider to give an undertaking about remedying the non-compliance, or decide to impose one or more sanctions on the provider.
- ***Notice to attend to answer questions relevant to Commissioner's or Complaints Commissioner's functions –*** A formal request from the Commissioner or Complaints Commissioner who reasonably believes that a person has information or documents relevant to a registered provider or an individual who is or was an aged care worker of a registered provider for the purpose of the Commission assessing compliance of the registered provider with the *Aged Care Act 2024 (Cth)*
- ***Notices to give information or produce documents required for Commissioner's functions –*** A formal request from the Commissioner that requests a responsible person to provider the Commissioner any information or produce requested documents within a 14-day period or another reasonable timeframe as stated in the notice.

Compliance Notices compel providers to address actual or possible non-compliance, and outline any action providers must take, or refrain from taking, within a reasonable time period. Failure to undertake actions specified in Compliance Notices may result in enforcement actions, including sanctions, Infringement Notices, or civil penalties.

Direction – may be issued to a provider where the Commission believes the provider is not meeting its responsibilities under the *Aged Care Act 2024 (Cth)*. Directions describe the actions to be taken by the provider (and the timeframes within which those actions must be taken) to comply with the *Aged Care Act 2024 (Cth)* and the *Aged Care Rules 2025*. If the provider fails to comply with this direction, enforceable regulatory action may be taken against the provider.

Enforceable Undertaking – is a legally binding written agreement between the Aged Care Quality and Safety Commission and a provider or person (such as an aged care worker or responsible person). It is offered by the provider or person as a commitment to take specific actions to address non-compliance or risks related to their aged care responsibilities.

Home or Community Setting – means a place in a home, or in the community, where funded aged care services are delivered.

Immediate and Severe Risk – when non-compliance is identified, the Commission considers whether there is an immediate and severe risk to the safety, health, well-being, and quality of life of older persons.

In these cases, 'immediate' means:

- risk that has occurred recently or is likely to occur,
- risk which will continue unless action is taken to resolve it, or
- an ongoing risk that a provider has failed to resolve.

'Severe' means risk that has or may result in:

- death
- permanent loss of function
- a threat to life or
- other significant adverse outcomes.

Findings of immediate and severe risk result in the Commission imposing sanctions and/or a Notice to Agree.

Material Change – a change that is substantial or considerable in nature and materially affects the suitability of a registered provider to provide aged care. These must notified to the Commission within 14 days of the change occurring.

Monitoring – regulatory activities undertaken by the Commission to monitor:

- the quality of care and services provided by a provider of an aged care service
- whether a provider has complied with its aged care responsibilities under the *Aged Care Act 2024 (Cth)* and
- a provider's response to non-compliance.

Notifiable – events, things, or incidents, such as serious infectious diseases, that must be reported.

Older Person/Older People (Previously Aged Care Consumer or Consumer) – as defined in the *Glossary of Terms: Guidance material for the strengthened Aged Care Quality Standards for review and discussion:* A person (or people) receiving Commonwealth-funded aged care services. The current Quality Standards use the term 'consumer', however, this term is being reviewed as part of the development of a new Aged Care Act. Reference to an older person includes reference to a representative of the older person, so far as the provision can apply to a representative.

Older Person's Supporter – a nominated person given consent by an older person to speak and act on their behalf, including a person:

- appointed under legislation to act or make decisions on behalf of an older person and
- the older person nominates to be told about matters affecting the older person.

Penalty – an action taken by the Commission against a provider of aged care services, for non-compliance with its aged care responsibilities. The decision to impose sanctions includes consideration of issues such as:

- whether non-compliance is minor or serious
- whether non-compliance has occurred before, and if so, how many times
- whether it threatens or would threaten the health, welfare, or interests of older persons and
- whether the provider has complied

Different sanctions may be imposed depending on the circumstances of the non-compliance, and include revocation of approved provider status, loss of Australian Government subsidies for new people receiving care, or revocation of allocated places.

Plan for Continuous Improvement (PCI) – a written plan for a service that sets out:

- how the provider of the service will:
    - assess the quality of care and services provided through the service against the Quality Standards and
    - monitor and improve the quality of care and services as measured against those Standards and
- if there are any areas in which improvements in relation to the service are needed to ensure that the Quality Standards are complied with, how the provider of the service will make those improvements.

Provider Responsibilities – the responsibilities approved providers have in relation to the aged care they provide through their services to aged care older persons. These responsibilities relate to:

- the quality of care they provide
- upholding rights for the people to whom the care is provided
- accountability for the care that is provided and the basic suitability of their responsible persons.
- adherence to key legislation, including the *Aged Care Act 2024, Aged Care Code of Conduct, Statement of Rights, and Strengthened Aged Care Quality Standards*

Quality Assessor – a person registered by the Commission under the *Aged Care Rules 2025* to undertake audits against the Strengthened Quality Standards or to monitor the quality of care and services.

Quality Bulletin – The Commission's regular newsletter for Australian aged care providers, sharing the latest information relevant to aged care service delivery.[3]

Reconsideration of a Regulatory or Complaints Reviewable Decision – review, or reconsideration, of certain decisions (Reviewable Decisions) made by the Commission, as provided for under *Aged Care Act 2024 (Cth)*, as requested by an interested person.

Reconsideration Period – the period (14 days) in which a person affected by a decision can request reconsideration of a Reviewable Decision.

[3] https://www.agedcarequality.gov.au/news-publications/quality-bulletin

Regulatory Action - any and all regulatory and enforcement action undertaken by the Commission in response to non-compliance with a provider's responsibilities under the *Aged Care Act 2024 (Cth)* or the *Strengthened Quality Standards*. It includes, but is not limited to, Directions, Non-compliance Notices, and sanctions.

Regulatory Bulletin – a targeted communication from the Commission to assist providers understand how specific requirements and processes fit into the overarching aged care regulatory framework. It articulates expectations and underlying reasons for the Commission's approach.

Regulatory Decision – a decision made under the *Aged Care Act 2024 (Cth)* which relates to the performance of the Commission regulatory functions.

Regulatory Engagement – a risk-based approach to making an objective and informed judgement when engaging with organisations, providers or individuals regarding complaints or compliance actions. In cases where an Initial Risk Assessment indicates that the risk to older persons is more than minor in nature, or where a provider has failed to remedy non-compliance through an administrative action, it may be necessary for the Commission to respond with regulatory action.

Regulatory Official – a Commission staff member whose position is linked to delegations which include regulatory powers. Officials include the Commissioner, their delegate, or a quality assessor. Quality assessors are included for the purposes of assessment activities and the consequent exercise of powers, such as entry and search, which are separate to complaints officers' powers under the *Aged Care Act 2024 (Cth)*.

Responsible Persons – someone that is:

- a member of the group of persons who are responsible for the executive decisions of the entity at that time
- any other person who has authority or responsibility for (or significant influence over) planning, directing, or controlling the activities of the entity at that time
- if, at that time, the entity conducts an aged care service:
    - any person who is responsible for the nursing services provided by the service (must hold a recognised qualification in nursing) and
    - any person who is responsible for the day-to-day operations of the service
    - whether or not the person is employed by the entity
- if, at that time, the entity proposes to conduct an aged care service:
    - any person who is likely to be responsible for the nursing services to be provided by the service (must hold a recognised qualification in nursing) and
    - any person who is likely to be responsible for the day-to-day operations of the service or
    - whether or not the person is employed by the entity.[4]

Responsible Persons Event or Change – when any of the following occur:

- a person becomes a key personnel of a provider
- a person ceases to be one of the key personnel of a provider and
- a provider becomes aware of a change in circumstances that may impact a key personnel's suitability to provide aged care.

Key personnel events or changes must be notified to the Commission within 14 days of the change occurring.

[4] Aged Care Act 2024 (Cth)

Review Delegate – the delegate responsible for undertaking a reconsideration following a request for review of a Complaints or Regulatory Reviewable Decision.

Reviewable Decision – a decision made under the *Aged Care Act 2024 (Cth)* which can be reconsidered. Refer to Section 556 of the Act for a list of regulatory and complaints reviewable decisions.

Revocation of Approved Provider Status – a decision to remove approval of aged care provider status under section 131 of the *Aged Care Act 2024 (Cth)*. Once revoked, the provider no longer remains an approved provider under the Act and ceases providing care as a Commonwealth-funded provider of aged care.

Self-assessment – the act or process of a provider analysing and evaluating its own performance and outcomes against the Quality Standards.

Short Notice Visit – A visit to the premises of an aged care provider undertaken at short notice.

Site Visit – a visit to a service or consumer's residence by regulatory officials or authorised complaints officers.

Statement of Rights – describes the rights of consumers of Australian Government funded aged care services to be consulted and respected. It provides the same rights to all consumers, regardless of the type of subsidised care and services they receive.

Strengthened Aged Care Quality Standards - organisations providing Commonwealth subsidised aged care services are required to comply with the *Strengthened Aged Care Quality Standards* (Quality Standards). The Quality Standards focus on outcomes for older persons and reflect the level of care and services the community can expect from organisations that provide Commonwealth subsidised aged care services. [5]

Policy

Bilingual Care recognises that quality service delivery, and its ongoing aged care approval status, relies on good compliance practices. It is committed to maintaining compliance with all relevant regulatory, legislative, and contractual requirements.

Bilingual Care's Managing Director is ultimately responsible for ensuring Bilingual Care is and remains compliant, however, all staff are expected to comply with the business' compliance requirements and monitor and report compliance issues.

Bilingual Care, and all people working for or on behalf of Bilingual Care, comply with the *Aged Care Code of Conduct*.

Procedures

Compliance Monitoring

Bilingual Care's Leadership Team is responsible for:

- monitoring and reviewing the organisation's compliance

[5] Aged Care Quality and Safety Commission 2024, *Strengthened Quality Standards,* Australian Government, accessed 23 July 2025 Strengthened Quality Standards | Aged Care Quality and Safety Commission.

- supporting compliance in all areas of Bilingual Care's operations
- ensuring staff understand their compliance responsibilities and
- fostering a compliance culture in their area of responsibility.

Bilingual Care's Managing Director reports on compliance issues to the Leadership Team quarterly, and tracks these in Bilingual Care's *Compliance Register.* This includes the results of internal reviews and external audits that are conducted in accordance with *Schedule 2. Internal Review and External Audit Checklist.*

The Managing Director monitors changes to Bilingual Care's compliance requirements through membership of the Provider Institute of Australia and subscription to the Commission's Quality Bulletin and Regulatory Bulletin, as well as other relevant government agencies' updates / contact with relevant government agencies such as the Commission and the Department of Health, Disability and Ageing / scanning relevant websites for updates / membership of peak organisations such as Ageing Australia) and internal and external audits. Staff are made aware of relevant changes as soon as possible.

Staff Responsibilities

All staff are responsible for monitoring and managing compliance within their areas of influence.

Upon commencement, all staff undergo an Induction, which includes information and training on Bilingual Care's compliance responsibilities.

Ongoing education is provided to staff (where applicable) on topics related to compliance, which includes but is not limited to:

- changes to aged care legislation and how to understand them
- changes to aged care Standards and how to ensure compliance
- changes to work health and safety requirements, and how best to implement them, to ensure the safety of all involved and
- any other relevant topics related to service provision and compliance activities.

The above education is provided in a variety of ways including:

- in-house training, utilising the knowledge of the Leadership Team or other key staff
- external representatives attending Bilingual Care's premises and
- staff attending external educational opportunities.

Compliance Breaches

All staff must notify their immediate supervisor or the Managing Director as soon as they become aware that a compliance breach has occurred or is likely to occur. This includes when a compliance-related complaint is made.

The Managing Director must address the breach as soon as possible after becoming aware of it.

All compliance breaches must be tracked in Bilingual Care's *Compliance Register* and reported to the Leadership Team.

Aged Care Approved Provider Compliance

As an Approved Aged Care Home Care Provider, Bilingual Care must comply with the legislation, Rules, and Standards set out in *Schedule 1. Legislative References*. This includes the *Strengthened Quality Standards, Statement of Rights* and the *Aged Care Code of Conduct*.

Bilingual Care will assess its compliance with these requirements as part of regular self-assessments, as well as through renewal audits against the *Strengthened Aged Care Quality Standards* conducted by the Commission. It will also comply with any requirements imposed by the Commission should the renewal audit result in a non-conformance.

Bilingual Care must:

- ensure all responsible persons are assessed upon engagement, and at least every 12 months thereafter, for their suitability to provide aged care. See the *Governance Policy and Procedure* for more information and
- notify the Commission of any responsible person change or event, or any Material Change within 14 days of becoming aware of the change. Notification must be undertaken by the Managing Director using the Commission's online Change in Circumstance Notification Forms.

Circumstances that require Notification[6] to the Aged Care Quality and Safety Commission include:

- changes or an event that affects Bilingual Care's suitability to be a registered provider
- changes that affect the suitability of any of Bilingual Care's responsible persons
- changes in who Bilingual Care's responsible persons are
- significant changes to Bilingual Care's governance arrangements
- significant changes in the scale of the aged care services Bilingual Care provides
- changes in the types of services Bilingual Careprovides
- specific changes to Bilingual Care's Associated Providers
- specific financial and prudential matters.

Any Notifications must be approved by the Leadership Team prior to submission. The Managing Director will keep records of any Notification made to the Aged Care Quality and Safety Commission in accordance with Bilingual Care's *Records and Information Management Policy and Procedure* and *Privacy and Confidentiality Policy and Procedure*.

Quality Standards

Bilingual Care must comply with the relevant strengthened Quality Standards (7 in total), depicted below. [7] Note that *Standard 6 (Food and Nutrition)* and *Standard 7 (The Residential Community)* only applies to Residential Aged Care Providers.

[6] Aged Care Quality and Safety Commission 2025, *Notifying us of a change in circumstances*, accessed 11 November 2025, https://www.agedcarequality.gov.au/providers/provider-governance/notifying-us-change-circumstances

[7] Aged Care Quality and Safety Commission 2024, *Strengthened Aged Care Quality Standards*, Australian Government, accessed 11 November 2025, https://www.agedcarequality.gov.au/resource-library/strengthened-aged-care-quality-standards-posters



Statement of Rights

The *Statement of Rights* is outlined in the *Aged Care Act 2024 (Cth)* and sets out the rights of consumers when accessing aged care services. The rights help to ensure that older people and their needs are at the centre of all decisions.

The *Statement of Rights* include the right for every individual to:

- make their own decisions and choices
- stay connected with their chosen people – family, friends and community
- have equal access to services
- get safe and high quality help
- have their privacy and information kept confidential
- get information and communication in ways that they like and understand
- have support from their chosen person/s - family, friends or an advocate
- tell providers about something that's wrong or they don't like about their services, without fear of being disadvantaged or punished

Bilingual Care will make sure that all actions and decisions are consistent with the *Statement of Rights* and in accordance with Bilingual Care's *Consumer Rights Policy and Procedure.* This will include making sure services are provided by staff who have appropriate qualifications, skills and experience to match consumer needs.

Aged Care Code of Conduct

The *Aged Care Code of Conduct* (Code) aims to improve the safety and wellbeing of people receiving aged care services, and to boost trust in aged care services. The Code sets out the behaviours expected of registered providers, their aged care workers and responsible persons.

When providing care, supports and services to people, Bilingual Care, its key personnel, and staff must:

a) act with respect for people's rights to freedom of expression, self-determination, and decision-making, in accordance with applicable laws and conventions
b) act in a way that treats people with dignity and respect, and values their diversity
c) act with respect for the privacy of people
d) provide care, supports, and services in a safe and competent manner, with care and skill
e) act with integrity, honesty, and transparency
f) promptly take steps to raise and act on concerns about matters that may impact the quality and safety of care, supports, and services
g) provide care, supports and services free from:
    i. all forms of violence, discrimination, exploitation, neglect, and abuse and
    ii. sexual misconduct and
h) take all reasonable steps to prevent and respond to:
    i. all forms of violence, discrimination, exploitation, neglect, and abuse and
    ii. sexual misconduct.

In addition to the Code itself, Bilingual Care is also legally obliged, under the *Aged Care Act 2024 (Cth)*, to:

- comply with the provisions of the Code and
- take reasonable steps to ensure that the aged care workers and governing persons of the approved provider comply with the provisions of the Code.

Reasonable steps include ensuring staff and responsible persons:

- read and understand the Code and relevant guidance
- undergo regular training and professional development that helps them understand, apply, and uphold the behaviours expected under the Code
- understand the consequences of failing to act in accordance with the Code – both for Bilingual Care, and for them personally and
- are supported to resolve issues where concerns are identified with their compliance with the Code (for example, through training, guidance, and supervision to build skills and capability).

Should Bilingual Care be found to not comply with the Code, regulatory action may be taken by the Commission. Bilingual Care will comply with any education, compliance or enforcement action stipulated by the Commission.

Mandatory Reporting

Provider Operations Collection Form and Statement of Compliance

Bilingual Care must also submit annual information to the Department of Health, Disability and Ageing regarding its operations. This includes a *Statement of Compliance* that attests that Bilingual Care is meeting its responsibilities. The information and statement is published on *My Aged Care* and is available for the public to review. The report must not include personal or private information about any individual as it is made publicly available.

Information that must be reported includes:

- the kind of feedback and complaints received in respect of each aged care service Bilingual Care provides
- improvements made by the provider in relation to the quality of each service

- the diversity of the Leadership Team (for example, whether it includes people from Aboriginal and Torres Strait Islander and culturally and linguistically diverse backgrounds, and disability and gender diversity)
- initiatives implemented to support a diverse and inclusive environment for consumers and staff members
- information about staff who hold an executive position in the organisation (for example, the Managing Director)
- whether Bilingual Care was, in the reporting period, a state or territory, a state or territory authority, or a local government authority and
- whether Bilingual Care complied with the responsibilities regarding membership of its governing body or whether it was not required to comply with these responsibilities.

The *Statement of Compliance* must be signed by a Leadership Team member and provided to the Department of Health, Disability and Ageing by 31 October each year, for the preceding financial year (1 July – 30 June). It must:

- state whether the Leadership Team believes Bilingual Care has complied with its responsibilities under the *Aged Care Act 2024 (Cth)* and
- where the Leadership Team believes Bilingual Care has failed to comply with one or more of its responsibilities, set out:
    - each responsibility or requirement Bilingual Care has failed to comply with
    - the reasons why and
    - what actions Bilingual Care has taken, has started to take, or will take, to rectify the non-compliance.

The Managing Director will prepare Bilingual Care's *Provider Operations Collection Form* and *Statement of Compliance*, which must be approved and signed by the Leadership Team.

Reports must be submitted via the *Provider Operations Collection Form (Collection Form)* that is available in the Government Provider Management System (GPMS).[8] The Managing Director will submit them by the due date.

Aged Care Financial Report (ACFR)

Bilingual Care must submit an annual *Aged Care Financial Report (ACFR)* by the 31 October each year, for the preceding financial year (1 July - 30 June). The ACFR must include details about:

- income from providing services, such as fees for the provision of care and package management
- expenses, including wages and salaries, management fees, care-related expenses, and information on labour costs and hours
- other financial information, unspent package funds, and cash and liquid assets and
- balance sheet, income statement and cash flow statement

Reports must be submitted via the *ACFR online forms portal* that is coordinated by Forms Administration for the Department of Health, Disability and Ageing.[9]

Quarterly Financial Report (QFR)

[8] Department of Health, Disability and Ageing 2023, Government Provider Management System (GPMS), Australian Government, accessed 23 July 2025, https://www.health.gov.au/our-work/government-provider-management-system-gpms.
[9] Department of Health, Disability and Ageing 2025, *Aged Care Financial Report*, Australian Government, accessed 11 November 2025, https://www.health.gov.au/topics/aged-care/providing-aged-care-services/reporting/aged-care-financial-report

Bilingual Care must complete a *Quarterly Financial Report (QFR)* each quarter throughout the financial year. The QFR requires the following to be provided:

- responses to viability and prudential compliance questions
- year to date financial statements, at the approved provider level
- home care labour cost and hours reporting, at the Aged Care Planning Region level.

Due dates for submission vary depending on the quarter. Reports must be submitted via the Government Provider Management System (GPMS).[10]

The Managing Director will prepare Bilingual Care's QFR Reports and submit them by the due date.

Supporting Documents

Documents relevant to this policy and procedure include:

- *Governance Policy and Procedure*
- *Consumer Rights Policy and Procedure*
- *Schedule 1. Legislative References*
- *Schedule 2. Internal Review and External Audit Checklist*
- *Compliance Register*
- *Aged Care Quality and Safety Commission* Notifications

Monitoring and Review

This policy and procedure will be reviewed at least annually by the Leadership Team. Reviews will incorporate staff, the older person, their family or representative/s, and other stakeholder feedback, where relevant.

Bilingual Care's *Continuous Improvement Register* will be used to record improvements identified and monitor the progress of their implementation. Where relevant, this information will be considered as part of Bilingual Care's service planning and delivery processes.

DOCUMENT CONTROL

Version No.	Issue Date	Document Owner
2.0	26/06/26	MD
Version History		
Version No.	**Reviewed Date**	**Revision Description**

[10] Department of Health, Disability and Ageing 2025, *Quarterly Financial Report*, Australian Government, accessed 11 November 2025, https://www.health.gov.au/topics/aged-care/providing-aged-care-services/reporting/quarterly-financial-report