Your guide to HomeMade Self Managed

November 2025

HomeMade
Smarter support at home

Welcome to HomeMade

We've designed this guide to help you get started. Throughout, you will find answers to frequently asked questions along with step-by-step instructions for getting started on the HomeMade platform.

We hope you enjoy the HomeMade difference.

The HomeMade team

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Steps to getting started with HomeMade

Follow these steps to get started

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7. Get your care plan — **You are here**
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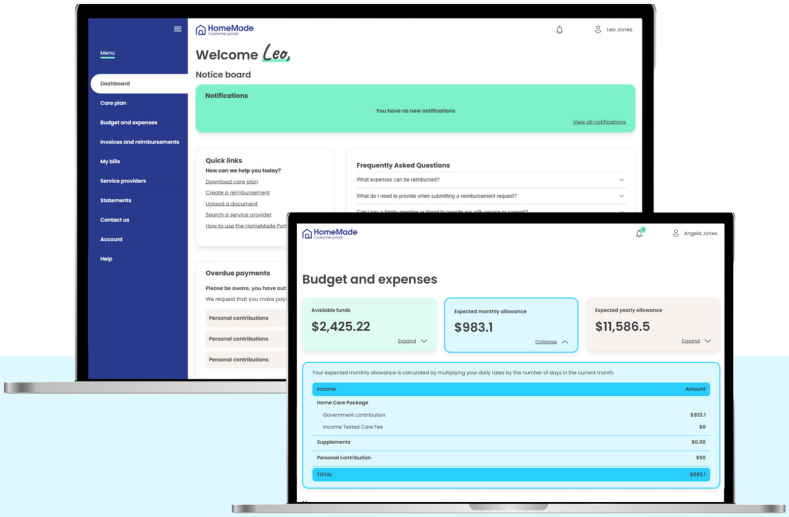
Next steps

We'll send you your care plan before your first support session after you've had your personalised care plan session.

Take some time to familiarise yourself with the details of your care plan and any actions you need to take. You can then start building your support team.

Guide to

Setting up your account



1 Activate your account

After signing up, we'll send you an email notifying you that your account is ready.

You can search your inbox by looking for "Your HomeMade account is ready" – remember to also check your Junk and Spam folders.

Follow the link to start the activation process.

2 Create a secure password

Create a unique password that doesn't contain easily identifiable information such as your birthday, full name or address.

3 Sign into your account

You can now sign in to your account from our homepage. Select **Log in** and enter your email and password to access your account.

Trouble signing in? If you receive 'Sorry, your username or password is incorrect.' this means your password is incorrect. Please click the "forgot password" link or toggle the "eye" icon to check you're entering your password correctly.

Important note: To stay safe online, don't share your login details with anyone.

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Your care plan

Defining your care plan goals in-line with your assessed needs.

What is a care plan?

What do I do if things change?

Advanced care planning

Your care plan

Defining your care plan in line with your assessed needs.

- What is a care plan?
- What do I do if things change?
- Your guide to care plans
- Advance care planning

What is a care plan?

Your care plan details your personalised needs and action plan for your Support at Home funding. It outlines how your funds will be allocated to best meet your identified needs, particularly focusing on using your funds to improve your health and well-being and staying connected to people, activities and communities that are important to you. It is informed by the Notice of Decision and support plan created during your initial assessment.
Your care plan may include:

- What supports and services you have chosen
- Indicative prices based on average service provider costs
- Who is responsible for organising them
- How often you will use them
- Recommended service providers for the service
- Dates for planned completion of goals
- Additional information you would like taken into account when you receive care services, such as your culture, religion or factors relating to trauma-informed care.

What is a care plan? (continued)

Your care plan is responsive to your changing needs. Together, we can add new needs or adjust existing needs as things change for you. Your care plan is what has been approved based on your current needs and the Support at Home service list.

It is important to note that if you purchase products or engage in services outside of your care plan, they may not be covered and can be a personal expense. Always contact your care partner to discuss adding products and services to your care plan before you commit to spending any money.

Who sees my care plan?

It is a requirement of the Aged Care legislation that your care plan is available at the point of service and is read and understood by your chosen service providers to help direct them on safely providing your care and support services.

You must download a copy of your care plan from your HomeMade dashboard so you can pass on the relevant and necessary sections to your support workers and service providers.

This is important to ensure consistency in your care and to make sure your support workers and service providers know how you want things done, along with other relevant information about providing quality care to you.

What support does HomeMade offer?

We work with you to confirm your needs and develop a care plan that meets your unique situation and preferences. Our goal is to get you effectively self-managing your Support at Home funding. For this reason, we have a team of highly trained individuals to assist you along the way.

Our team will:

- Assess your needs, goals and preferences as required
- Provide care management activities on a monthly basis
- Review your service agreement with you, at least annually
- Review and update your care plan and budget with you, at least annually
- Partner with you and your representative or registered supporter about your care
- Ensure your care and services are culturally safe
- Identify and address risks to your safety, health and well-being
- Provide guidance on the best way to maximise your funding and innovative ways to meet your goals
- Manage your funds, in collaboration with you, including paying your invoices and reimbursements

What do I do if things change?

To ensure we can support you in the best way possible, HomeMade needs to keep the lines of communication open with you. If you are experiencing any significant changes to your health, living situation, financial wellbeing or family support, we need to hear about it as soon as practicably possible to ensure your support and services continue to match your needs and your budget.

Examples of things you should keep us informed about:

- Someone you rely on is no longer able to support you in the same way
- You have a fall or other event at home

- You need to go to the hospital, even for just one night
- You receive a diagnosis of a new health condition
- You notice a change in your health
- Your living arrangements change.

We will talk to you about any changes that may have occurred and this will continue to be a regular topic of conversation between you and HomeMade.

What if you need more support than your funding offers?

If your circumstances have changed and you've noticed your current Support at Home funding isn't providing enough support and services we can help you with asking My Aged Care to consider a higher Support at Home classification level via a support plan review. To advise us of a change in circumstances please send us a message, or phone 1300 655 688.

Support at Home also includes 3 short-term care pathways:

Restorative Care Pathway
helps regain function after injury or illness.

End-of-Life Pathway
Palliative care at home for those with less than 3 months to live.

Assistive Technology and Home Modifications (AT-HM) Scheme
provides funding for mobility aids, home modifications and more.

Alternatively, customers can also make a personal contribution to fund additional services or support if they have fully utilised their Support at Home funding. Please contact us to organise a care plan review and to start the process.

Can I make changes?

Your care plan changes according to your needs. Together we can add or adjust new goals and services as required and anytime your needs change. Your plan is what we've approved and any additional services or items will need to be assessed by us before they are engaged or they may not be paid.

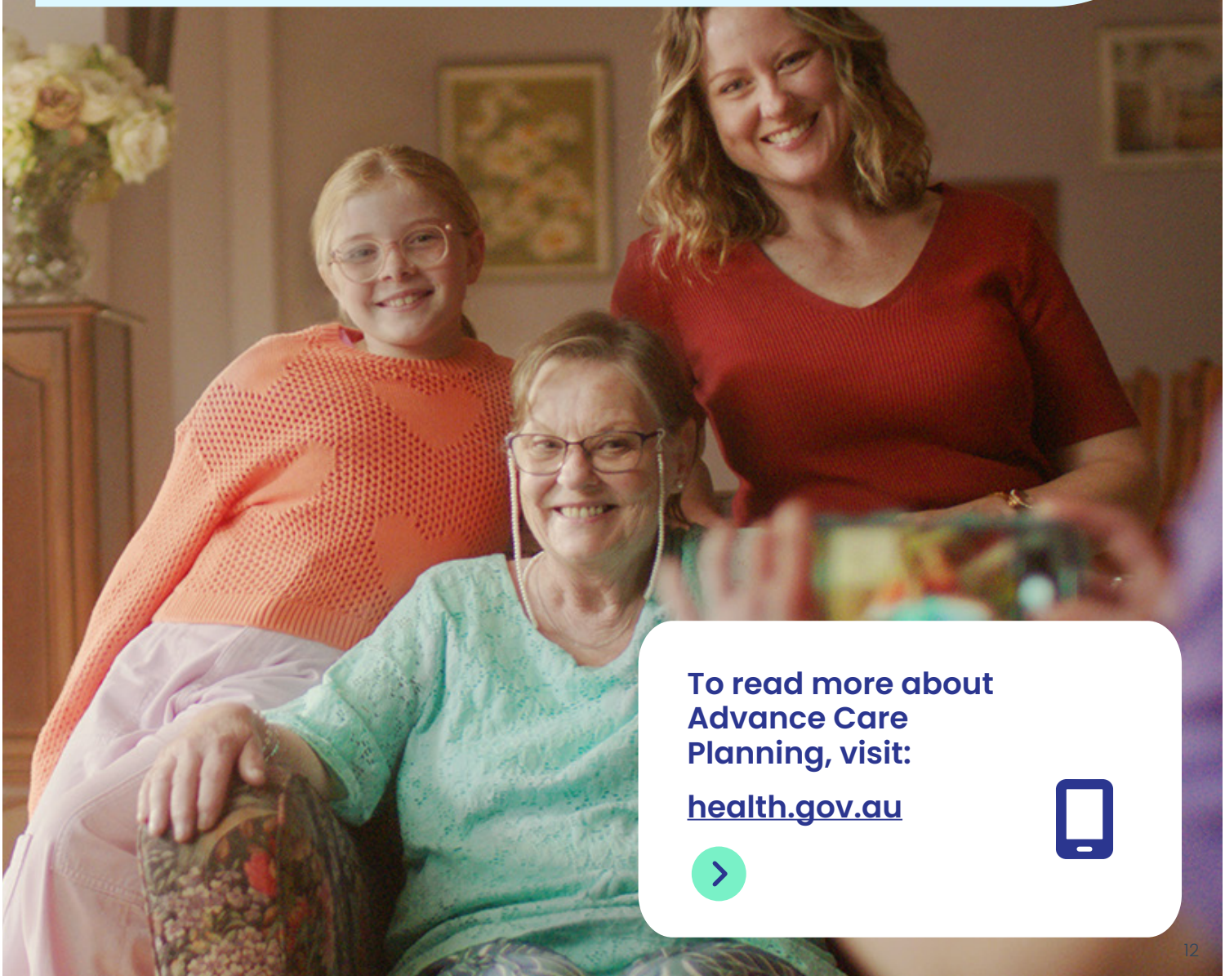
Advance care planning

An important part of anyone's life is to consider how we want our future to look.

We recommend everyone do this from time to time in our lives, even if the conversation makes us feel a little uncomfortable. Talking about our future in terms of our end-of-life care is one of those topics that most of us would prefer to avoid. However, with the right support and a sensitive approach, we can consider this topic in a way that is both respectful and pragmatic.

We will offer you the opportunity to discuss advance care planning with us so that we understand your wishes. This will give you the opportunity to consider documenting your wishes and sharing this with your family and those around you. Please note that advance care planning with us is an optional process and is not legally binding, instead intended to act as guidance on your wishes. You may also wish to consider creating Advance Care Directives or substitute decision making documents and can refer to further information on this at Advance Care Planning Australia.

You may choose not to discuss advance care planning at the start of your time with HomeMade. However, we are always here for you, so if at any time in the future you would like to discuss or require information, please send us a message or phone 1300 655 688.



To read more about Advance Care Planning, visit:

health.gov.au

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Your funding

Learn how you can spend your Support at Home funding.

Your funding and budget

Reimbursement and Invoicing

Your funding

Your funding and budget

There are different financial aspects to having Support at Home funding.

The most important ones relate to:

- How much the Commonwealth Government contributes quarterly to your budget.
- How much is allocated to care management.
- How much you may need to contribute from your own pocket.

Your budget

Like any household budget, it is important to understand how much you have to spend, prioritise what you spend it on, and set some limits so you don't over-commit yourself.

The government releases your Support at Home budget at the beginning of each quarter (July, October, January, April). Your budget gives you the information and guidance you need to understand how much money you have coming into your account and how much you have to spend on your care and services

Funding

The table below outlines the current funding amounts for each of the 8 ongoing service classifications:

Classification	Quarterly Budget	Classification	Quarterly Budget
Level 1	$2,682.75	Level 7	$14,537.04
Level 2	$4,008.61	Level 8	$19,526.59
Level 3	$5,491.43	Transitioned HCP Level 1	$2,746.63
Level 4	$7,424.10	Transitioned HCP Level 2	$4,829.86
Level 5	$9,924.35	Transitioned HCP Level 3	$10,513.83
Level 6	$12,028.58	Transitioned HCP Level 4	$15,939.55

Plus any supplements you are eligible to receive, or personal contributions you make. These figures are indicative only, may be subject to indexation and are taken from the Support at Home Handbook. For more information **see here**

The Restorative Care Pathway and the End-of-Life Pathway

The table below outlines the approximate funding amounts for restorative care and end-of-life care currently.

Service	Budget amount
Restorative Care Pathway	$6,000 (up to 16 weeks). Can be increased to $12,000, when eligible.
End-of-Life Pathway	$25,000 (up to 12 weeks).

The AT-HM scheme

The table below outlines the current approximate funding amounts for the funding tiers for assistive technology or home modifications

Funding tier	Funding allocation cap	Time allocated to expend funding
Low	$500	12 months
Medium	$2,000	12 months
High	$15,000	12 months

Transitioned Home Care Package recipients

If you're a transitioned Home Care Package recipient who has not been reassessed under Support at Home, you will continue to receive an equivalent level of funding to your previous Home Care Package, including supplements. The previous annual amounts are divided into 4 to create a quarterly budget. Funding amounts for transitioned Home Care Package recipients are outlined in the **Schedule of Subsidies and Supplements for Aged Care.**

Outgoings

Your planned expenditure to HomeMade for services and supports

- Care management
- Service loading fee

Service loading fee

HomeMade generally charges a 10% service loading fee, which covers administrative costs. Even though you're choosing to manage things yourself, HomeMade is here in the background—helping you get set up, making sure your workers are safe and approved, keeping track of your spending, providing our easy-to-use platform, and being available if you need help.

Example of how the service loading fee works

If you engage a support worker at $59 per hour, HomeMade will apply a 10% service loading fee, which is $5.90. The overall cost charged to your funding will be $64.90.

Care management

Participants who receive ongoing services under Support at Home will have 10% of their quarterly budget set aside by the Government to cover care management activities performed by their registered provider.

Care management activities include:

- Care planning
- Monitoring, review and evaluation
- Support and education.

Tracking your spending

You can review your available balances and track your spending in your HomeMade account. Your HomeMade account will have all the invoices and reimbursements submitted by you and your service provider/s. We recommend that you log into the HomeMade platform and regularly check your available balance and track your spending to make sure you remain within your budget.

It is important to spend within the limitations of your available funding, in line with your agreed care plan budget. Remember, HomeMade is here to help and can update your needs and adjust your care plan and budget with you if things change. It is vital to consult with HomeMade about these changes before engaging different or additional services. If you choose to spend more than your available allocated funding and you do not have any 'carry over' funds (discussed below), then a personal contribution payment is required to cover the additional cost.

Invoice and reimbursement amounts are automatically deducted from your available funds when you or your service provider uploads the payment request to your account, and the status shows as pending approval.

You can track your spending throughout the month, and you will receive a monthly statement summarising your financial activity for your funding each month. This statement is usually available in the middle of the following month.

If you are unsure what an amount on your statement relates to, you can view the transaction within the dashboard, which includes a copy of the invoice the provider sent through. If you still have questions, contact our team.

Your funding

How your funding works

Your Support at Home funding is provided by the Government and will be split across 4 equal quarters with a limit on the amount of unspent funds you can carry over into the next quarter. You will begin to receive funding from the date your Support at Home funding is activated.

HomeMade will pay your invoices and reimbursements upfront on your behalf, then claim this back from the Government.

If you don't use all your quarterly budget, you can carry over up to $1,000 or 10% of your quarterly budget, whichever is greater, into the next quarter. This is to ensure funding is used for current care needs, which helps people stay in their homes for longer. HomeMade will help you to stay within budget and track your spending to avoid situations where you spend over your budget. However, if you spend more than your allocated quarterly budget and there is no carryover, you are required to make a personal contribution payment to cover the additional cost.

For short-term classifications, the budget will cover the period specific to the pathway or scheme (i.e. up to 16 weeks for the Restorative Care Pathway, up to 16 weeks for the End-of-Life Pathway or 12 months for the AT-HM scheme).

Example

Larry was allocated a Support at Home Classification 2 package with a quarterly budget of $4,008.61. After 10% ($400.86) is set aside for care management, Larry has $3,607.75 to spend on services for the quarter.

In Quarter 1, he spent $2,000, leaving $1,607.75 in his budget. The amount he can carry over is $1,000, as this is higher than 10% of his quarterly budget.

In Quarter 2, Larry carried over $1,000 (from Quarter 1), which increases his nominal budget to $4,607.75 ($3,607.75 + $1,000). At the end of this quarter, Larry has $753 left in his budget which he is able to fully carry over as it is greater than the 10% of his base budget ($400.86), but lower than $1,000.

In Quarter 3, Larry has a nominal budget of $4,360.75 ($3,607.75 + $753).

What you need to do prior to requesting a reimbursement

- **Ensure the reimbursement is for a service on the Support at Home service list.**
- **Ensure the service provider is registered with HomeMade to deliver the service for which you are seeking reimbursement.**
- **Ensure the service for reimbursement is outlined in your care plan and the cost is included in the individualised budget**

What you CAN request a reimbursement for if it is covered in your care plan:

Approved services and supports outlined in your care plan and in line with your budget, with a formal payment receipt.

Certain goods and other consumables i.e. continence supplies if you do not have a separate CAPS funding, some aids or equipment products

Certain nursing care consumables i.e. prescribed skin emollients for management of skin integrity, oxygen consumables

Prescribed nutrition i.e. for prescribed supplementary dietary products (enteral and oral) and aids required to treat impairments or functional decline.
This can include prescribed nutritional supplements purchased from a pharmacy

What you <u>CAN'T</u> request a reimbursement for:

- Services and supports not listed on your care plan or when you do not have enough available funding to cover the cost.
- Approved services and supports without a formal payment receipt.
- Purchases/receipts not in the customer's name.

If in doubt, reach out to the HomeMade team before engaging or paying for support or services to be sure they are eligible under your care plan. You can send us a message via your HomeMade account by selecting Care Plan from the dashboard and submitting a comment.

The reimbursement process

Notify HomeMade so we can onboard the service provider ensuring they are suitable, appropriately qualified, and hold all compliance-related checks and clearances.

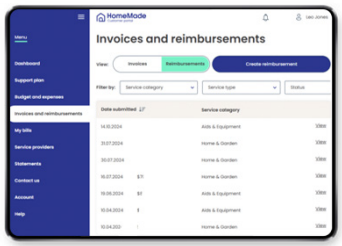
1. Set up your bank details in your HomeMade account.
2. Submit reimbursement.
3. Your reimbursement is assessed in line with program guidelines, care plan and budget. If approved, your reimbursement will be sent for payment.
4. Receive your funds in 2-3 business days after approval (depending on bank).

There must be a valid invoice/receipt for a reimbursement to be paid. And the following information needs to be on your invoice or receipt when submitting a reimbursement:

- The words 'Tax invoice', 'Invoice', 'Receipt', and confirmation of payment
- Business name and ABN
- Date of payment
- The name of the items/s you want to be reimbursed for the cost and whether it includes GST or not (it is helpful if you put a mark against these items if there are additional items on your receipt)
- If this information is not included, your payment request will be rejected.

Reimbursements can be rejected if

- the service/good is not approved
- the item is not in your care plan or in line with your budget
- it is for support work or clinical services
- the invoice is invalid
- You have insufficient available funds in your Support at Home account
- the invoice does not show a payment on it



The invoice process

1 **Find a HomeMade service provider**

Customer finds a service provider that is registered with HomeMade.

2 **Engage a suitable service provider**

Customer engages service in accordance with their care plan and budget.

3 **Submit invoice**

Service provider submits invoice to the HomeMade dashboard.

4 **Invoice is reviewed**

The HomeMade team reviews invoice against program guidelines, care plan, budget and available funds

5 **Receive Funds**

If approved, the service provider should receive funds in 2-3 business days (depending on bank).

Participant contributions

As a Support at Home participant, you may be required to contribute towards the care you receive. The Australian Government uses income assessments to determine the percentage of the service cost you're required to contribute. The percentage varies depending on the Income and assets assessment outcome and the service category. The required amount is set by the Australian Government and collected by HomeMade on their behalf. If you're required to make a contribution towards your services HomeMade will invoice you directly.

Income and assets assessment outcome	Service category - clinical supports	Service category - independence	Service category - everyday living
Full pensioner	0%	5%	17.5%
Part pensioner and self-funded CHSC holder	0%	Between 5% and 50%*	Between 17.5% and 80%*
Self-funded non-CSHC holder and means not disclosed	0%	50%	80%

*This information is taken from Table 2 - Support at Home Contribution Rates in the Support at Home Handbook dated February 2025 on page 36 available **here**.*

** Contributions are determined based on an assessment of income and assets that is completed by the Department of Health, Disability and Ageing and for part-pensioners it will be based on the Age Pension means assessment. A self-funded non-CSHC holder is an individual who is ineligible for the pension and the CSHC. A means not disclosed status refers to an individual who has not disclosed their assets and income.*

Example of how the contributions works

If you are on a full pension and you engage a support worker for the service category Independence at $59 per hour, HomeMade will apply a 10% service loading fee which is $5.90. The overall cost charged to your funding will be $64.90. You will be required to contribute 5% of the total invoice cost which equates to $3.25.

Grandfathering arrangements and participant contributions

For participant contributions, a no worse off principle applies for grandfathered Home Care Package care recipients who, on 12 September 2024, were either receiving a Home Care Package, on the National Priority System, or assessed as eligible for a package. Grandfathered participant contribution arrangements include:

- Previous Home Care Package care recipients who were not required by Services Australia to pay an income-tested care fee will continue to make no contributions.

- Previous Home Care Package care recipients who, based on the outcome of their income test were required to pay an income-tested care fee, will pay the same or less under Support at Home.

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Engaging services

Use your Support at Home funds for available support and services.

Available support and services

What services can I get through Support at Home?

Exclusions you CAN'T use your funding for

Registering a service provider

Selecting the right support provider for you

Available support and services

You can use your funding for the services and support you require as long as they align with your assessed needs and are part of your care plan and budget. You must use a service provider that is registered on HomeMade or is approved on the Mable platform. Mable is part of the same group of companies as HomeMade.

You also have an option to register a service provider on HomeMade or Mable, which would enable you to use your Support at Home funding with them (see further information about this below).

You cannot engage services or support greater than the value of your budget, unless you discuss this with HomeMade first. You may be required to make a personal contribution payment for this to occur if you do not have adequate carryover funds.

Support at Home funding is not just about 'hours of care'. We know everyone's situation is different, so you won't get any generic one-size-fits-all solution when you partner with HomeMade.

We keep up with the latest technology solutions, people solutions and support options for people who have a range of health and medical conditions.

We'll help you think outside the box to use your care funds efficiently.

What services can I get through Support at Home?

You can access a wide range of services that help you stay independent and safe at home, depending on your care needs. These fall into 3 categories:

Clinical support

- Nursing (such as health assessments, wound care, and medication help)
- Physiotherapy, occupational therapy, podiatry
- Dietitian or speech therapy

Independence

- Personal care (showering, dressing, grooming)
- Social support and community access
- Transport to appointments
- Respite care
- Help with assistive technology and home modifications (like shower chairs, walkers, ramps). If you have any unspent home care funds you must use these funds before applying for assistive technology and home modifications

Everyday Living

- Cleaning, laundry, and shopping
- Gardening and light home maintenance
- Meal preparation and delivery

For a complete list of services, please refer to the government's **Support at Home service list**.

Exclusions you CAN'T use your funding for

The Government provides a long list of services that can be provided with your Support at Home funding. However, they also detail the types of care and services that you must not use Support at Home funds for. This list of exclusions includes, but is not limited to:

Items that would normally be purchased out of general income, such as household bills.

Buying food, except as part of internal feeding requirements.

Payment for permanent accommodation, including assistance with home purchase, mortgage payments or rent.

Payment of home care fees.

Payment of fees or charges for other types of care funded or jointly funded by the Australian Government.

Major renovations or home modifications that are not related to your care needs.

Travel and accommodation for holidays.

Cost of entertainment activities, such as club memberships and tickets to sporting events.

Over the counter medication and pharmacy items

Purchases that are typical of any Australian household, such as gifts, clothing, garden supplies.

Gambling activities

Payment for services and items covered by the Medicare Benefits Schedule or the Pharmaceutical Benefits Scheme.

Accessing service providers and support workers

HomeMade has obligations to make sure the people you engage through your funding are appropriately skilled, verified and hold the right checks, which aim to keep you safe. Service providers must meet specific requirements in order to offer services to you. For this reason, we have a list of approved service providers for you to engage that have already met HomeMade's onboarding criteria and requirements.

It is important to note that:

HomeMade offers choice and control in selecting your preferred service providers, while prioritising your safety and your right to access high-quality care. Therefore, we offer a range of options to enable you to choose the right service provider for you. We do not onboard sole traders providing clinical nursing or independence services onto the HomeMade platform. However, we can assist you in onboarding your preferred support workers to Mable, enabling you to engage them through Mable.

Current regulations prevent friends, family members and nominated representatives or people with your Enduring Power of Attorney from being paid from your Support at Home funding to work with you in any capacity, except where a limited exception applies.

Guide to

Registering a service provider

Eligible service providers can be onboarded with HomeMade, provided they meet our compliance requirements, which include:

- Insurance certificate of currency
- An active ABN
- Vaccination checks for their workforce in accordance with current local requirements
- Appropriate police checks for their workforce
- Accreditations and Certificates for healthcare providers such as nursing services and allied health.

Using a Sole Trader: If the person is not providing support work or nursing services you can request they be onboarded with us. Support workers must join Mable, a safeguard platform, first or be employees of an onboarded organisation. Mable has rigorous onboarding criteria that are suited to onboarding sole traders. Mable is part of the same group of companies as HomeMade.

For more information about setting up a support worker, visit:
mable.com.au/register

Please note: Service providers must meet eligibility criteria to be onboarded to the service provider network on the HomeMade platform. HomeMade reserves the right to decline a service provider if they are not compliant or not willing to agree to our terms and conditions..

Selecting the right support provider for you

Good support workers are your greatest asset when it comes to your care services. Engaging the right people ensures you get good quality support. It is important to be clear from the beginning about what you are looking for and what you want to achieve. It can be beneficial to have a variety of support workers for the different types of support or services you need.

Take some time to write a list of the attributes you want your support worker to have and any factors that you would like to consider when deciding who the right support worker for you is.

Some things to consider:

- Is there a specific language you would like them to be fluent in?
- How close are they to your home? (consider any travel costs)
- What would you like to have as part of the terms of your agreement for support services? Are there any deal breakers?
- Are they available at times that suit you?
- Do their fees or hourly rate fit your budget?
- Do you have shared interests or hobbies?
- Does their skillset and qualifications meet your health or clinical needs?

Managing your team

Self-management puts you at the centre of your support. HomeMade has created a flexible model of support that makes sure you have control over who provides important care and services to you in your home. Some care tasks require a support worker to have formal training, but there are also lots of tasks that don't. For example, special training is needed if you require someone to assist with your medication.

When support workers come to your house, there are some areas you need to consider. HomeMade and your support workers have a shared responsibility under the Aged Care Quality Standards to ensure that you are receiving safe care services. Our HomeMade approach ensures you get access to the most suitable support workers who are compliant with suitability requirements for working in aged care, as set out in Support at Home regulations.

Your responsibilities to your support workers

1 Provide a safe and healthy workplace

It is necessary to ensure your home is a safe place for support workers to work, which includes providing an environment that is free of verbal abuse or harassment. As part of joining HomeMade, we will do a Home Safety checklist, which includes:

- Being aware of things that are hazards and could harm you or a support worker.
- Providing information about any hazards and risks.
- Discussing the need for any equipment or protective clothing (e.g. masks, footwear). Note that service providers will need to provide their own personal protective equipment.

Selecting the right support provider for you (continued)

You and your support workers are required to report to HomeMade on any serious incidents that occur.

Serious incidents can include:

- Serious physical injury
- Unreasonable use of force
- Inappropriate use of restrictive practices
- Stealing or financial coercion
- Medication error or issue
- Concern for a person's welfare
- Abuse (e.g: physical, financial, emotional).

2 **Ensure your support worker has adequate and appropriate training, instruction and information.**

- We will discuss any particular care or support needs you have, especially if you need a support worker with specific training, skills or qualifications. If the person you choose doesn't have the required training or skills, you may not be able to engage that particular support worker. We will work with you to manage situations like this.
- We will ensure that you have the necessary information to give to the person working with you. This includes a copy of your care plan and information about your particular needs and preferences.

You can find out more information the **Serious Incident Reporting Scheme through the Aged Care Quality and Safety Commission** resources available **here.**

Managing everyday risks

Understanding how to identify and manage risk in the context of receiving care services at home is something HomeMade specialises in.

We will work with you to find solutions to any potential or perceived risk by:

- Approaching your care and services in a safeguarded and respectful way.
- Providing education and guidance so that you can make informed choices.
- Helping you tap into your own strengths and resilience to reduce risks.
- Recommending a range of supports and referrals to ensure quality and compliance is always top of mind.

Service limitations

While trust is an important part of your relationship with a support worker, it is always important to take steps to protect yourself from potential harm. Therefore, we recommend the following limitations when engaging with support workers:

Do **NOT** engage support workers to collect prescriptions or purchase over-the-counter medication without you being present.

Do **NOT** ask support workers to buy alcohol or cigarettes on your behalf.

Do **NOT** give your support worker your EFTPOS card or bank details.

If a support worker is doing some unaccompanied shopping for you, give them cash and ask for an itemised receipt; this will minimise the risk.

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Your rights and obligations

How Aged Care Standards apply to your support services

Your quality standards

Your quality standards

Even where a consumer chooses to self-manage their Support at Home funding, registered providers are still required to uphold the Strengthened Aged Care Quality Standards. The Standards aim to place you in control of your care and to support the safe delivery of personalised aged care services to consumers.

HomeMade is committed to complying with the Strengthened Aged Care Quality Standards and its obligations under the Aged Care Act 2024. We will work with you to help you understand how these Standards and legislation apply to the support you receive.

We have included the customer outcome statements for each strengthened standard for your reference. Our goal at HomeMade is to ensure the statements below reflect your experience with not only us but your other service providers.

The Statement of Rights provides information about your responsibilities as an aged care recipient. The Statement of Rights is a supplement in your Customer Agreement. It describes your rights as a consumer of Australian Government funded aged care services.

Consumer outcomes

Standard 2

"I have confidence in my service provider"

Standard 3

"My care is based around who I am and what's important to me

Standard 7

"I contribute to the community I live in"

Standard 1

"I am valued and have choice over the life I lead"

Standard 6

"I enjoy tasty and nutritious food every day"

Standard 4

"I feel safe and supported where I live"

Standard 5

"I get the right clinical care for me"

Infographic from Aged Care Quality and Safety Commission, 'Strengthening Aged Care Quality Standards: Expectations for Older People', see **here**

HomeMade feedback and complaints

HomeMade is committed to achieving positive outcomes for our customers and always listens to the experiences and feedback of our customers, their families, and our broader community.

Your feedback is welcome as it helps us to improve our services and the HomeMade experience overall. We incorporate all feedback and complaints into our monthly management meetings and use any issues to inform our Continuous Quality Improvement action plan.

There are several ways you can provide feedback directly to HomeMade:

1. Contact your Support Partner on **1300 655 688**
2. Email us at **feedback@homemadesupport.com.au**
3. Submit any feedback form at **www.homemadesupport.com.au**

What happens once we receive your feedback?

We will acknowledge your feedback by either email or phone as soon as practicable. A member of our team may contact you to gather additional information.

HomeMade's complaints and feedback process incorporates principles from the Open Disclosure Framework set out by the Aged Care Quality and Safety Commission. We aim to complete a review of your feedback and respond within 5 working days. If you are still unhappy with the outcome, you may request the matter to be escalated and reviewed by a member of the HomeMade Management team. If you're still dissatisfied with the outcome, you may lodge a complaint to external agencies, which we can support you with.

External complaints:

If you are dissatisfied with the outcome of a complaint, you can lodge a complaint to the Aged Care Quality and Safety Commission:

1800 951 822

www.agedcarequality.gov.au

Aged Care Quality
and Safety Commission
GPO Box 9819
Sydney, NSW, 2000

What is open disclosure?

Open disclosure is about being open and transparent when things go wrong. HomeMade will have an open and timely discussion with our customers when failures occur, to address immediate needs or concerns and provide support. We will also ensure we explain the steps to prevent recurrence.

Principles of open disclosure

- Dignity & respect
- Privacy & confidentiality
- Transparency
- Continuous quality improvement

Elements of open disclosure

- Identify when things go wrong
- Address immediate needs and provide support
- Acknowledge and apologise or express regret
- Find out and explain what happened
- Learn from the experience and improve

HomeMade's enablers

- Leadership and culture
- Consumer partnership
- Organisational systems
- Monitoring and reporting
- Effective workforce
- Communication and relationships

Your responsibilities when self-managing your Support at Home funding

Self-managing means you must:

- Have the time to manage your home care services.
- Recognise deterioration or changes in your circumstances and notify HomeMade as soon as practicably possible so that we can conduct a review of your care plan and budget. We will also consider your current health, risks, and safety and those providing services and care to you.
- Find, communicate with, and roster your own support workers and service providers.
- Negotiate and agree fees with service providers.
- Be transparent when discussing and determining your needs.
- Be able to use technology to access and track your care plan and budget in the HomeMade dashboard.
- Only purchase or engage services that are detailed in your care plan, are available on the service list and are coverable by your budget.
- Provide tax invoices for consumables that you wish to be reimbursed for.
- Pay for additional services that are outside of your Support at Home funding through a personal contribution payment.
- Engage with us when requested to help resolve incidents, or complaints.
- Actively participate in your care plan and budget review, which will occur at a minimum annually.
- Communicate and resolve disagreements regarding payments and services.

The full list of your responsibilities is available in your Self-Managed Support at Home Service Agreement with HomeMade. See Annexure F for more information about your responsibilities under self-management.

Our responsibilities when self-managing your Support at Home Package

As a registered provider HomeMade will, among other things:

- Communicate and resolve disagreements regarding payments and services.
- Provide you access to an online platform with all your information.
- Review and manage compliance requirements of any service provider before you engage them.
- Pay invoices and reimbursements on your behalf.
- Provide advice on what can be covered with your Support at Home funds in accordance with the Support at Home guidelines.
- Manage incidents and complaints.
- Provide safeguards to protect you.
- Review your care plan and budget at a minimum annually.

The full list of our responsibilities is available in your Self-Managed Support at Home Service Agreement with HomeMade. See Annexure F for more information about our responsibilities while you are self-managing with HomeMade.

HomeMade
Smarter support at home

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Funding admin

Everything you need to know about switching to and from HomeMade

You want to switch home care provider

You need to take a break from your services

What to do if...

You want to switch home care provider

At HomeMade, we are confident that we can work together with you in a respectful, beneficial and enjoyable way. However, we understand that sometimes there are reasons why our customers feel better suited to a different home care provider. We value your choice and are committed to ensuring a smooth transition.

To make your move to a new provider as seamless as possible, we will coordinate with them within 28 days of your exit notice and share the necessary information to help you maintain uninterrupted services. The Government allows Support at Home providers up to 70 days to transfer your eligible unspent funds, but we commit to making the funds transfer at our earliest opportunity, once your invoices and other financial commitments are settled.

Please note that while we aim to transfer eligible unspent funds in under 70 days, the Government has its own processes that make the time frame out of HomeMade's control.

You need to take a break from your services

Self-managing with HomeMade means you have the flexibility to temporarily stop receiving your Support at Home services. While services are stopped, you will continue to receive your quarterly budget and HomeMade will continue care management activities unless you expressly tell us not to. Standard fees for care management apply. Limits to the amount of unspent budget that you can carry over from the previous quarter will also apply. If you believe that your break from services will exceed a year, please contact HomeMade to discuss.

There are a number of reasons why people need to temporarily stop engaging in services:

- Hospital stay
- Transition care
- Residential respite care
- Other reasons, such as holidays or other personal circumstances.

It's important to let HomeMade and your service providers or support workers know if you need to temporarily stop engaging services.

HomeMade
Smarter support at home

Need more information?

Get in touch.

Call us on
1300 655 688

Visit us at
homemadesupport.com.au

Email us at
hello@homemadesupport.com.au