

Wongaburra Society
210-218 Brisbane Street
Beaudesert QLD 4285
Ph: (07) 55 401 400
Fax: (07) 5541 3484
Email: admissions@wongaburra.com.au

Re: Accommodation Enquiry

Thank you for your recent enquiry regarding Wongaburra Nursing Home and Garden Settlement's accommodation.

Wongaburra is a non-denominational, not-for-profit, fully accredited aged care residence established by the local community of Beaudesert to serve the elderly within the community and servicing the major part of Scenic Rim and Jimboomba areas since 1970. Wongaburra staff pride themselves on providing the highest level of care whilst maintaining the dignity, privacy and rights of the residents, clients and their families.

Wongaburra has 125 approved Aged Care accommodations on-site. Wongaburra also provides Support at Home program delivering coordinated care and services and Commonwealth Home Support Programme (CHSP) support to the local community.

To confirm your inclusion on the wait list, please complete the attached paperwork and return it to the Admissions Officer at the above address. Please indicate whether you are looking for immediate accommodation or planning for accommodation for some time in the future to ensure we enter your details onto the correct wait list.

Please include the following documents with the paperwork:

- A complete copy of the current Aged Care Client Record (ACAT) and / or Support Plan provided by the Aged Care Assessment Team.
- A certified copy by JP of the Enduring Power of Attorney (EPoA) document or any other relevant document such as QCAT decision and / or Public Guardian documents.
- A current copy of Health Summary including medication history, doctors / surgery details and immunisation history.
- A current certified copy of Advanced Health Direction (AHD) or Statement of Choices or other advance care planning documents which describe prospective care recipient / resident's wishes and choices in relation to future treatments and medical management options.
- All specialised nursing care requirements and details, such as special dietary needs, swallowing deficits, complex and chronic wound care, oxygen therapy, skin cancer, pressure ulcers, palliative care needs, pain management, catheter care, PEG tubes, tracheostomy care, bariatric equipment needs, behaviour such as wandering, verbal and physical violence, VRE, MRSA, HIV, Hep B & Hep C, other specialised equipment and its functionalities and other relevant history regarding the care recipient who is looking for Residential Aged Care accommodation or Support at Home services.
- A complete copy of the letter from Centrelink or DVA confirming your financial status from the 'Request for an Income & Assets Assessment'.

If you have not yet received the Income & Assets Assessment letter, please complete the enclosed Income & Assets Estimation form as a guide for Wongaburra and then also send Wongaburra a copy of the confirmation letter once received from Centrelink or DVA.

If you choose not to lodge an Income & Assets Assessment with Centrelink or DVA, please note you may be charged the maximum fees. Please complete the enclosed Election to Not Complete an Income & Assets Assessment form and return it to Wongaburra Admissions Officer.

When we are in a position to help you further with all the above details, we will make contact with you to arrange a site visit and to provide you with a copy of the paperwork associated with an admission to Wongaburra Society.

If you have any further enquiries, please contact the Admissions Officer or Receptionist at (07) 55 401400 between 8.30am and 4.30pm Monday to Friday.
OR email us at admissions@wongaburra.com.au

Thank you for your interest in Wongaburra Society.

Yours Faithfully,

Wongaburra Society

210-218 Brisbane Street
Beaudesert QLD 4285
Ph: (07) 55 401 400
Fax: (07) 55 413 484
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Note: Wongaburra is a non-smoking facility.

INFORMATION SHEET

Costs of Residential Aged Care

The costs of Residential Aged Care are determined by the Commonwealth Department of Social Services (DSS) / Department of Health and vary according to a resident's income and assets, level of care, date of entry and whether or not the resident is a pensioner. The rates are reviewed regularly by DSS / Department of Health.

Costs include:

1. Basic Daily Fee
2. Means Tested Contributions
 - a. Hotelling Contribution
 - b. Non-clinical care Contribution
3. Accommodation Costs (if applicable)

1. Basic daily fee

Every aged care home resident pays a basic daily fee, regardless of their means. This fee helps pay for daily living services such as meals, cleaning, facilities management, and laundry. You pay this fee directly to your aged care home, generally on a fortnightly or monthly basis. The fee applies for every day you are a resident, including days when you might be away overnight – for example, on holiday or in hospital.

The basic daily fee is set at 85% of the single person rate of the basic age pension. The government indexes it on 20 March and 20 September each year.

Based on current rates, the maximum basic daily fee is \$65.55 per day, or \$23,925.75 per year.

2. Contributions based on your means assessment

- **Hotelling contribution:** This is an additional contribution that some people on 1 November 2025 fee arrangements pay towards daily living services such as meals, cleaning and laundry.
- **Non-clinical care contribution (NCCC):** This is an amount that some people on 1 November 2025 fee arrangements pay to cover personal care, such as bathing, mobility assistance, and lifestyle activities.

3. Accommodation costs

- This is an amount that some people pay to contribute towards or cover the full costs of their room, depending on their means assessment.

Hotelling contribution (1 November 2025 fee arrangements)

The government pays a hotelling supplement to providers, which tops up the basic daily fee to cover the cost of daily living services. The hotelling supplement is means tested and indexed in March and September each year. Your income and assets (means) will be assessed to work out if you need to contribute towards it in the form of a hotelling contribution.

The contribution will be up to a limit of the hotelling supplement, \$22.15 per day. If you are asked to contribute part but not all of the hotelling supplement, the government will pay the

rest. For example, if you are asked to pay \$2 per day towards your hotelling supplement (based on your means assessment), the government will pay the remaining \$20.15.

Non-clinical care contribution (1 November 2025 fee arrangements)

If your means assessment resulted in you paying the full hotelling contribution, you may also be asked to make a contribution towards your non-clinical care.

Your contribution covers non-clinical care costs such as bathing, mobility assistance, and lifestyle activities. The non-clinical care contribution is similar to the means tested care fee. However, it excludes a person's cost of clinical care and is capped daily at \$105.30 per day, while the means tested care fee is capped annually.

If you need to pay the non-clinical care contribution, Services Australia will let you and your provider know the amount once you enter care.

A lifetime cap means that residents no longer have to pay the non-clinical care contribution once they reach \$135,318.69 (indexed) in total contributions, or after 4 years of cumulative contributions — whichever comes first. Fees paid under the [Support at Home program](#) also count towards this lifetime cap.

The daily and lifetime caps change with indexation in March and September. Learn more about [changes to aged care fees, annual and lifetime caps while in residential aged care](#).

If your income and assets are below the thresholds, the government will continue to pay the full hotelling supplement. If you need to pay a hotelling contribution, Services Australia will let you and your provider know the amount once you enter care.

Refundable accommodation deposit (RAD) / refundable accommodation contribution (RAC) retentions

RAD/RAC retention applies to everyone who first enters residential aged care on or after 1 November 2025 and pays by refundable deposit (RAD or RAC) in full or in part. Under this arrangement, providers will keep a small portion of each new RAD or RAC. The amount retained is calculated at a rate of 2% per annum. This rate is applied to the daily RAD or RAC balance, with the amount deducted regularly.

After 5 years, no more retention amounts will be deducted. This is to protect residents who remain in care for a long time.

Accommodation payments are payable from the day of admission. The amount an individual is required to pay is based on Centrelink's assessment of the income / means-tested amount, which is calculated using a resident's assessable income and assets.

An accommodation payment is payable where a resident's income / means-tested amount is greater than zero.

This information sheet is for indicative guidance only and should not be interpreted as a contractual document. Exact rates and fees change periodically by the Department of Health / Department of Social Services. Please refer to the Government website or contact the My Aged Care for correct and up-to-date information.

Residents have the option of paying the accommodation payment as:

- A fully refundable lump sum referred to as a Refundable Accommodation Deposit (RAD) or Refundable Accommodation Contribution (RAC)
- Periodic payments referred to as a Daily Accommodation Payment (DAP) or Daily Accommodation Contribution (DAC)
- A combination of RAD / RAC and DAP / DAC

Residents paying a combination of RAD / RAC and DAP / DAC may decide to pay the DAP/DAC or other fees by drawing them down from the RAD / RAC. This has the effect of reducing the refundable balance, and the facility can increase the DAP / DAC commensurate with the reduction in the RAD / RAC balance.

Residents have up to 28 days after entry to decide how to pay for their accommodation, though a decision can be made sooner if preferred, e.g. upon entry. A resident's choice must be made in writing. Until a decision is made, the default payment choice applied is a DAP / DAC.

For Further Information:

If you have any general queries regarding fees, please contact Wongaburra Admissions on (07) 5540 1400.

For more detailed information, please contact My Aged Care on 1800 200 422 or visit the My Aged Care website www.myagedcare.gov.au.

For assistance with financial or legal matters, please speak to your financial planner and / or legal advisor.

¹ The lifetime cap means that over your lifetime you will not be asked to pay more than \$66,610.90 as at January 2020 for all aged care services you may receive, whether they are home support or residential care or a combination of both.

This information sheet is for indicative guidance only and should not be interpreted as a contractual document. Exact rates and fees change periodically (generally six monthly) by the Department of Health / Department of Social Services. Please refer to the Government website or contact the My Aged Care for correct and up-to-date information.

INCOME & ASSETS ESTIMATION FORM

Have you completed the Centrelink or the Department of Veteran's Affairs (DVA) Income & Assets Assessment?

Yes ☐

No ☐

If you have received your latest and current income and assets determination letter from Centrelink or DVA you do not need to complete this form. Please send a copy of the Centrelink or DVA letter to Wongaburra Admissions Officer.

Wongaburra Society strongly advice that you must complete Centrelink / DVA Income and Asset Assessment form before moving / accepting a place in RACF or Support at Home Services.

You must provide a copy of Centrelink / DVA Income and Asset Assessment Result before accepting a place.

If you have not received your income and assets determination letter yet, please complete this form as a guide for Wongaburra. Please also send a copy of the Centrelink / DVA letter to Wongaburra Admissions Officer once received.

You may elect not to complete an income and assets assessment. However, if you do not complete an income and assets assessment, please note you may be required to pay the maximum accommodation charges. This is in addition to the daily fee and applicable care fees. If you choose not to undertake a Centrelink or DVA income and assets assessment, please complete the enclosed "Election Not to Complete an Income & Assets Assessment" form.

Applicant's Full Name: _____

Address: _____

Income	Value \$ per annum
Income support payments from the Australian Government such as the Age Pension, a Service Pension or an Income Support Supplement	\$
Deemed (not actual) income from financial investments ¹	\$
Net income from rental property	\$
War widow or widower pensions and some disability pensions	\$
Net income from businesses, including farms	\$
Superannuation and overseas pensions, income from income stream products such as annuities and allocated pensions	\$
Family trust distributions or dividends from private company shares	\$
Deemed income from excess gifting	\$
Total Value of Your Income	\$

ASSETS

When completing this estimation of your assets, please note:

- 1) where an asset is jointly owned, only include the value of your share of the asset;
- 2) the net value of property is its current gross value less any debts, charges, mortgages and other encumbrances affecting it;
- 3) if you own your own home and any of the following people reside with you, do **not** include the home in your assets estimate:
 - a) spouse/ partner
 - b) dependent child (under 16 or full time student under 25)
 - c) carer, eligible for pension or benefit, who has lived there for more than 5 years
 - d) immediate family, eligible for a pension or benefit, who has lived there for more than 5 years.

Asset	Value \$
Home	\$
Contents	\$
Other land and property	\$
Stocks / Shares	\$
Bank account deposits	\$
Cash	\$
Managed investments	\$
Life insurance policies	\$
Superannuation assets	\$
Motor vehicles	\$
Boat	\$
Caravan	\$
Other assets	\$
Total Value of Your Assets	\$

I declare that the information supplied on this form is true and correct.

Completed by Applicant / Applicant's legal representative such as EPOA, Next of Kin, Public Trustee, QCAT, Public Guardian (please circle as appropriate)

Name: _____

Signature: _____

Date: _____

Please return this completed form to Wongaburra Admissions department / office.

Admissions Officer Name: _____

Signature: _____ **Date:** _____

¹ Financial Investments may include: bank, building society and credit union accounts, cash, term deposits, cheque accounts, friendly society bonds, managed investments, listed shares and securities, loans and debentures, shares in unlisted public companies, gold and other bullion. Please refer to the "Deeming Rates" section of this form for information on how to work out deemed income from financial investments.

DECISION NOT TO COMPLETE AN INCOME & ASSETS ASSESSMENT

A person entering aged care with means in excess of the defined income and assets thresholds set by the government may be required to pay a means tested care fee and / or accommodation contributions / payments.

Your assessable income and assets and associated income and assets tested amounts are determined by either a Centrelink or Department of Veteran's Affairs (DVA) Income & Assets Assessment. You may choose not to complete an Income & Assets Assessment, however, please note this will impact your eligibility for Government supplements and subsidies and you may be required to pay the maximum charges for accommodation. This is in addition to the daily fee and applicable care fees.

Please complete this form if you have opted to not complete an Income & Assets Assessment and return the form to Wongaburra Admissions.

Declaration

I hereby declare that I have chosen not to complete a Centrelink or DVA Income & Assets Assessment and I fully understand that I may be required to pay the maximum means-tested care fees and Refundable Accommodation Deposit (RAD) or Daily Accommodation Payment (DAP), or combination of RAD & DAP. I understand that this is in addition to the daily fee and applicable care fees.

Completed by Applicant / Applicant's legal representative (please circle as appropriate)

Full Name: _____

Signature: _____

Date: _____

FINANCIAL PLANNING INFORMATION

Wongaburra Society and its employees are not able to advise you in regards to financial planning advice as we are not financial advisors.

We recommend you speak to your own financial advisor. If you do not have your own advisor, you may wish to seek independent financial advice from a firm which specialises in financial advice for the Aged Care industry.

A free Financial Information Service is available through the Department of Health and My Aged Care.

Kind Regards,

Wongaburra Society
210-218 Brisbane Street
Beaudesert QLD 4285
Ph: (07) 55401400
Fax: (07) 55413484

RESIDENTIAL APPLICATION ENQUIRY FORM
(To be completed by Resident / Resident's Legal Representative)

RESIDENT DETAILS:

First Name:	_____	Middle Name:	_____
Surname:	_____	D.O.B:	_____
Preferred Name:	_____	Phone:	_____
Email:	_____		
Address:	_____ _____ _____		
Gender:	☐ Male	☐ Female	Other _____ ☐ Rather not say
Ethnic Origin:	_____		
Preferred Language:	☐ English ☐ Other: _____	Indigenous Status:	☐ Yes ☐ No
Marital Status:	☐ M ☐ S ☐ D ☐ W ☐ Sep.		
Religion:	_____		
Sexual Orientation / Lifestyle Preferences:	☐ Heterosexual	☐ Homosexual	
☐ Lesbian	☐ Intersex	☐ Transgender	☐ Preferred not to answer

REQUIRED ADMISSION DATE: _____

Medicare Number:	_____	Expiry Date:	_____
Pension Number:	_____	Expiry Date:	_____
DVA Client:	☐ Yes ☐ No	DVA Type:	_____
DVA Number:	_____		
Local Doctor Name:	_____		
Address:	_____		
Phone No:	_____	Fax No:	_____
Local Pharmacy Name:	_____		
Address:	_____		
Phone No:	_____	Fax No:	_____
My Aged Care Referral Code: (if applicable)	_____		

RESIDENT'S LEGAL REPRESENTATIVE

Name:	_____	Relationship:	_____
Address:	_____	Phone No:	_____
Email:	_____	Mobile No:	_____

EPOA DETAILS Valid EPOA Document: ☐ Yes ☐ No

Name:	_____	Relationship:	_____
Address:	_____	Phone No:	_____
Email:	_____	Mobile No:	_____

NEXT OF KIN – 1

Name:	_____	Relationship:	_____
Address:	_____	Phone No:	_____
Email:	_____	Mobile:	_____

NEXT OF KIN – 2

Name:	_____	Relationship:	_____
Address:	_____	Phone No:	_____
Email:	_____	Mobile:	_____

SIGNIFICANT PERSON ☐ PARTNER IN CARE ☐ REGISTERED SUPPORTER ☐

Name:	_____	Relationship:	_____
Address:	_____	Phone No:	_____
Email:	_____	Mobile:	_____

OTHER

Name:	_____	Phone No:	_____
Address:	_____	Mobile:	_____
	_____	Email:	_____

Advance Health Directive: ☐ Yes ☐ No (document must be signed by doctor & JP)

Statement of Choices: ☐ Yes ☐ No (document must be signed by doctor & Resident / Resident's legal representative)

RESIDENTIAL CARE

Valid ACAT: ☐ Yes ☐ No	☐ High Respite	☐ Permanent Residential
SUPPORT PLAN: ☐ Yes ☐ No	☐ Low Respite	

Centrelink Asset Assessment Completed: ☐ Yes ☐ No

DVA Asset Assessment Completed: ☐ Yes ☐ No

Other Finance Details: _____

(Such as bank deposits, property details, extra income source) _____

(A valid copy of all the above documents are to be provided before admission)

Accommodation Requirement:

- ☐ Single Room
- ☐ Shared Ensuite
- ☐ Secure Unit
- ☐ Wandering
- ☐ Bariatric Need
- ☐ High Falls Risk
- ☐ Pressure Area
- ☐ Palliative Care
- ☐ Other

Equipment Requirement: _____

Food Allergies: _____

Medication Allergies: _____

Special Mobility Aid Requirement: _____

Motorised Scooter: _____

Other Medical Assistive Devices: _____

HOME CARE

Valid ACAT: ☐ Yes ☐ No

☐ Level 1 ☐ Level 4

SUPPORT PLAN: ☐ Yes ☐ No

☐ Level 2 ☐ CHSP

☐ Level 3

CURRENT HEALTH STATUS

(Provide a signed copy by doctor)

Medical Diagnoses: _____

Mental Health Diagnoses: _____

Behaviour Diagnoses: ☐ Physical Aggression ☐ Verbal Aggression ☐ Wandering

Covid Vaccination Status: _____

General Nursing Requirements: _____

PROSPECTIVE RESIDENT

Smoker? ☐ Yes ☐ No

Note: Wongaburra is a non-smoking facility.

Personality: ☐ Sociable ☐ Very Private ☐ Other

Any families / friends currently living / working in Wongaburra: ☐ Yes ☐ No

Name and Relationship: _____

Additional Information: _____

Note: Before securing an accommodation at Wongaburra,

- 1) Resident's current and past full health summary, signed by the doctor must be provided.
- 2) For all admissions (Permanent / Respite): Resident / resident's legal representative must provide a signed copy (pharmacist) of current and up-to-date medication summary
- 3) For respite admission: For safe and timely administration of medication, resident are advised to bring their medication in a Webster Pack.
- 4) For respite admission: Resident's local medical officer must provide a signed copy of current and up-to-date medication. Detailing right resident, right medication, right dose, right route, right time, PRN medication, and other alternative forms of medication.
- 5) Resident / resident's legal representative must provide Advance Health Directive and / or Statement Of Choices
- 6) Resident / resident's legal representative must read and sign the "Resident and Accommodation Agreement" and return it to Wongaburra within legislative timeframe if an Accommodation is offered by Wongaburra.
- 7) If the "Resident and Accommodation Agreement" is not signed and not returned within the legislative timeframe, Wongaburra will assume that you are agreed to all terms and conditions of "Resident and Accommodation Agreement".
- 8) Resident / resident's legal representative must provide a JP certified copy of all legal documents, such as EPOA and living will.
- 9) Resident / resident's legal representative must provide up-to-date Medicare, Pension, Bank details of the resident and correct address, phone number and email of emergency contact person

Please do not hesitate to contact Wongaburra's Admission Officer for any further information or assistance.

As resident / resident's legal representative, I understand and agree that Wongaburra Society is an Aged Care facility which provides nursing care services within its means.

As resident / resident's legal representative, I also understand and agree that Wongaburra Society is NOT a hospital and it cannot provide hospital like services.

I hereby declare that the information provided is true and correct. I also understand that any wilful dishonesty may render for refusal of this application and further refusal of accommodation at Wongaburra Society.

Resident / Resident's Legal Representative Name: _____

Signature: _____

Date: _____

Lifestyle and Spiritual Questionnaire

Assessment to be completed on or prior to admission date and entered into the Sarah System

Name:	Date:
Admission	
Reason for admission:	
What is your preferred name/nickname?	
How do you feel about the admission? ☐ Happy ☐ Accepting ☐ Angry ☐ Resigned ☐ Sad	
How do your family feel about your admission? ☐ Accepting ☐ Guilty ☐ Relieved	
Specify any other interventions or comments relating to admission:	
Families / Friends Network	
Where did you live before entering Wongaburra?	
How long did you live there?	
Where did you grow up?	
Where did you go to school?	
How long did you attend that school?	
Did you pursue further studies? ☐ Yes ☐ No What and where did you study and for long?	
Mother	Deceased: ☐ Yes ☐ No
Name:	Maiden Name:
Birthplace:	Occupation:
Closeness to / Feelings about mother?	

Father		Deceased: ☐ Yes ☐ No
Name:		
Birthplace:	Occupation:	
Closeness to / Feelings about father?		
Siblings		
List any siblings that you have:		
Partner / Spouse		
Have you been married? ☐ Yes ☐ No	How many times?	
When were you married?		
Do you have any previous partners you would like to specify?		
Current partner's / spouse's name?		
Is he/she still alive?		
Partner's occupation:		
When and where did you meet?		
Other notes about partner/s:		
Any special memories relating to spouse?		
Children / Grandchildren		
List all children that you have:		
List all grandchildren that you have:		
Provide details about any pets that you have:		

How do you best describe your family?

Specify any other interventions or comments relating to family or friends:

Who is/has been your close friend/significant people in your life?

Personal History

Special memories of your childhood:

What is your level of education?

Main Occupations:

Did you enjoy work? ☐ Yes ☐ No

List any awards or achievements that you have received/accomplished:

List places that you have lived during your life:

List any places you have travelled to:

Is there a place you've always wanted to visit, or still hope to one day?

Have you been affected by any past stressful or violent events? ☐ Yes ☐ No

Would you like to disclose further information?

Does your family have a life story book? ☐ Yes ☐ No

Location of life story book?

Would you like to create a life story book?

Specify any happy memories from your childhood?

Specify any other interventions or comments relating to personal history:

Leisure Interest and Activities

What things or activities are you interested in? (Please specify)

What do you like to read? (Please specify genres/authors)

What type of music or groups do you like to listen to?

What do you like to watch on TV? (Please specify genres/shows)

Do you like to listen to any radio stations? (Please specify genre/station)

Are you a member of any clubs/organisations, or have done in the past?

What is your favourite colour?

What are your favourite foods?

What are your favourite drinks?

Is there a special food or drink that you remember being given when sick or sad?

What are your favourite flowers or plants?

What are your favourite smells or aromas?

What are your favourite movies?

What are your favourite concerts, theatre or plays?

Do you like to sing? ☐ Yes ☐ No

Specify any instruments you can play?

Do you like to play sports? ☐ Yes ☐ No

Specify any person, topics or events that are special to you?

Specify activities you wish to participate in:

Do you feel comfortable informing staff of care preferences? ☐ Yes ☐ No

List any relevant interventions relating to leisure, interests and activities:

Social Relationships/Interests

Do you prefer solitary pursuits as opposed to group and social activities?

Any further comments on preferences for participation in activities?

Do you like to have affection expressed and expressed in a physical manner? ☐ Yes ☐ No

What kind of praise do you find suitable?

List any relevant interventions relating to social relationships

Expression

How do you express you're the following emotions?

Contentment:

Happiness:

Fear:

Grief:

Anger:

Unhappiness:

Stress:

List any relevant interventions relating to expression of emotional needs:

Do you wish to discuss your sexual or intimacy needs? ☐ Yes ☐ No

Comfort Needs

How do you gain enjoyment? What things do you enjoy doing and make you happy?

E.g.: foot massage, warm bath, back massage, facial, glass of wine, music, reading, special food etc.

What things make you laugh?

Are there any special memories that you enjoy?

Are there any special possessions that are important to you? E.g.: furniture, pictures, photo albums etc.

What else do we need to know for the comfort and your wellbeing?

Is there anything you would like us to know about your routines/habits/preferences? Eg.: sleep in, shower times, preferences with appearance

List any relevant interventions relating to comfort needs:

Culture or Customs

Do you identify as an Aboriginal or Torres Strait Islander? ☐ Yes ☐ No

Please specify which are applicable: ☐ Aboriginal ☐ Torres Strait Islander

Do you belong to a specific ethnic/cultural group? ☐ Yes ☐ No

What ethnic group you belong to?

What ethnic customs do you follow?

List any relevant interventions relating to culture or customs:

List any cultural or ethnic specific food that you enjoy:

Religious Affiliation

Are you religious? ☐ Yes ☐ No

What religion do you belong to?

Do you currently practise your belief? ☐ Yes ☐ No

If yes, what religious customs do you follow?

If no, list any other comments regarding to religious practice:

Would you like to continue to practise your religion? ☐ Yes ☐ No

List any relevant interventions relating to religion:

Church Details

Name:

Address:

Minister:

Therapies

What therapies do you enjoy?

List any relevant interventions relating to therapies:

Lifestyle

What activities do you enjoy participating in?

List any activities you DO NOT enjoy:

Do you need assistance to and from activities? ☐ Yes ☐ No

If yes, please answer the next 3 questions.

Which of these options best describes the assistance given to and from the activities?

☐ 1 assist

☐ 2 assist

☐ 3 assist

☐ Mechanical lifting
equipment

☐ Supervision

☐ Nil

Why is assistance needed? (e.g.: hearing or sight impairment, mobility, etc)

List any relevant interventions relating to lifestyle:

Concerns / Problems

Do you have any concerns/problems you wish to mention?

Does your family have any concerns about you they wish to mention?

List any relevant interventions in place to address these concerns/problems:

Country of Origin

Did you immigrate to Australia from overseas?

- ☐ Yes
☐ Yes, however I would prefer my privacy respected in relation to this
☐ No

What country did you originally come from?

What made you decide to leave your country of origin?

How did you and your family feel about leaving your country of origin?

Number of years residing in Australia:

Culture most identified with: (that of country of birth, country spent time in, or Australian culture)

Have you been back home since coming to Australia? ☐ Yes ☐ No

How was the experience for you?

Do you have family or friends back in your country of origin? ☐ Yes ☐ No

List family members / friends and relationship:

Do you like to keep in touch with them? ☐ Yes ☐ No

In what ways do you keep in touch?

Language (Please input the following section into the Communication Assessment)

Is the primary language of you English? ☐ Yes ☐ No

If No, What is your primary language?

Can you speak basic English? ☐ Yes ☐ No

If yes, to what degree is English understood?

☐ Minimal

☐ Everyday

☐ Fluent

Is interpreter needed? ☐ Yes ☐ No

List any other languages you can speak:

Celebrations

Do you celebrate birthdays? ☐ Yes ☐ No

Any comments/interventions relating to celebrations:

Current and Future Goals

What would you still like to do for yourself?

What is important to you now?

List anything you would still like to do, or need to achieve:

How can we assist to achieve this?

Do you have any personal privacy preferences?

Identification

Indicate any of the following special needs groups you belong to or identify with:

- ☐ Aboriginal and Torres Strait Islander
- ☐ Culturally and Linguistically Diverse (CALD)
- ☐ Rural and Remote
- ☐ Financially or Socially Disadvantaged
- ☐ Veterans
- ☐ Homeless or at Risk of Homelessness
- ☐ Care Leavers
- ☐ LGBTIQA+
- ☐ People with Mental Illness
- ☐ People who live with Disability
- ☐ People who experience Dementia and Cognitive Decline
- ☐ Other

How would you describe your gender?

- ☐ Woman
- ☐ Man
- ☐ Non-Binary
- ☐ I don't know/unsure
- ☐ Prefer not to say
- ☐ Other _____

What are your pronouns? ☐ she/her ☐ he/him ☐ they/them

Is there a particular gender you feel more comfortable with for your daily care support?

☐ Male ☐ Female ☐ Unspecified

Assessment Complete By: _____ Date: _____

Relationship to Resident: Resident / Resident Representative / Admissions Officer / Holistic Care Team
(Please circle)



Schedule of fees and charges for residential care from 1 January 2026

This Schedule applies to residential aged care recipients. Different fees and accommodation costs apply based on the resident's fee arrangements and accommodation arrangements.

Rates for 1 November 2025 fee and accommodation arrangements

Resident fees and contributions

Fee	Maximum daily rate
Basic daily fee ¹	\$65.55
Hotelling contribution ²	\$22.15
Non-clinical care contribution ²	\$105.30

¹ This fee applies for permanent residential care and residential respite care.

² Services Australia advises the contribution amount for a resident.

Maximum accommodation supplement amount – \$70.94 per day

Caps on non-clinical care contribution

Non-clinical care contribution cap	Rate
Daily cap	\$105.30
Lifetime cap ³	\$135,318.69

³ A four-year cap also applies to the non-clinical care contribution. The fee ceases after a person pays it for four years, even if they have not reached the lifetime cap amount.

Income thresholds for residential care means assessment

Income threshold	Rate single person	Rate couple, illness separated (single rate)
Income free area	\$34,762.00	\$34,034.00
First income threshold	\$86,406.32	\$85,678.32
Second income threshold	\$101,105.00	\$101,105.00
Third income threshold	\$117,230.20	\$117,230.20
Fourth income threshold	\$139,048.00	\$136,136.00

Asset thresholds for residential care means assessment

Asset threshold	Rate
Asset free area	\$63,000.00
First asset threshold	\$210,555.20
Second asset threshold	\$252,000.00
Third asset threshold	\$355,366.66
Fourth asset threshold	\$532,055.20
Home exemption cap Applies separately to both members of a couple. The net value of the home above this amount is excluded from the value of the resident's assets.	\$210,555.20

Thresholds for refundable deposits

Threshold	Rate
Minimum permissible asset level the minimum assets a resident must be left with if they pay at least part of their accommodation costs by refundable deposit	\$63,000
Maximum refundable accommodation deposit the amount that can be charged without prior approval from the Independent Health and Aged Care Pricing Authority	\$758,627

Indexation of daily accommodation payments (DAPs)

Date	DAP index number
20 September 2025	1.0

To calculate the DAP for a resident following an indexation point, the provider needs both the DAP index number on the resident's reference indexation day and the DAP index number on the DAP indexation day.

The first round of DAP indexation will occur on 20 March 2026.

Details about how to calculate the DAP are available at www.health.gov.au/our-work/residential-aged-care/charging/dap-indexation.

Deeming and interest rates

These deeming and interest rates apply across all residential care fee and accommodation arrangements.

Deeming thresholds and rates

Threshold/Rate	Rate
Deeming thresholds – from 1 July 2025	
Threshold (single)	\$64,200
Threshold (couple – combined)	\$106,200
Deeming rates – from 20 September 2025	
Lower rate	0.75%
Higher rate	2.75%

Interest rates for accommodation costs

Interest rate	Rate
Maximum Permissible Interest Rate (MPIR) ⁴ from 1 January 2026 – 31 March 2026	7.65%
Base Interest Rate (BIR) from 1 October 2025	2.75%
Maximum interest on outstanding accommodation charge from 20 September 2025	1.50%

⁴ The MPIR applies for calculating accommodation costs for residents who enter residential care within this period (but not for those who were already in care prior to this period). For a resident paying the agreed room price, use the MPIR current on the day the room price was agreed. To calculate accommodation contributions for a low means resident, use the MPIR current at their date of entry to the service.

The MPIR applies for:

- Equivalence calculations for accommodation payments and contributions
- Accommodation bond agreements for pre 1 July 2014 residents
- Calculating interest payable by the provider on outstanding refundable deposit refunds

The BIR applies for:

- Accommodation bond agreements for pre 1 July 2014 residents
- Calculating interest payable by the provider on outstanding refundable deposit refunds

The maximum interest on outstanding accommodation charge is the amount of interest that may be charged under an accommodation charge agreement for a pre 1 July 2014 resident who has not paid the required amount (section 287-155 of the Aged Care Rules 2025).

Rates for post 1 July 2014 fee and accommodation arrangements

Resident fees and contributions

Fee	Maximum daily rate
Basic daily fee	\$65.55
Means tested care fee ⁵	\$403.80

⁵ Services Australia advises the fee amount for each resident.

Maximum accommodation supplement amount – \$70.94 per day

Caps on Means tested care fee

Means tested care fee caps	Rate
Lifetime cap	\$84,571.66
Annual cap	\$35,238.11

Income thresholds for residential care means assessment

Income threshold	Rate single person	Rate couple, illness separated (single rate)
Income free area	\$34,762.00	\$34,034.00

Asset thresholds for residential care means assessment

Asset threshold	Rate
Asset free area	\$63,000.00
First asset threshold	\$210,555.20
Second asset threshold	\$505,665.60
Home exemption cap Applies separately to both members of a couple. The net value of the home above this amount is excluded from the value of the resident's assets.	\$210,555.20

Thresholds for refundable deposits

Threshold	Rate
Minimum permissible asset level the minimum assets a resident must be left with if they pay at least part of their accommodation costs by refundable deposit	\$63,000
Maximum refundable accommodation deposit the amount that can be charged without prior approval from the Independent Health and Aged Care Pricing Authority	\$758,627

Rates for pre 1 July 2014 fee and accommodation arrangements

Resident fees and contributions

Fee ⁶	Maximum daily rate
Basic daily fee - standard	\$65.55
Basic daily fee - non-standard	\$74.42
Basic daily fee - protected	\$59.76
2012 BDF supplement - Basic daily fee standard	\$64.78
2012 BDF supplement - Basic daily fee - non-standard	\$73.65
2012 BDF supplement - Basic daily fee - protected	\$58.99
Income tested fee ⁷	\$104.11

⁶ Services Australia advises residents and providers of the amount of basic daily fee and income tested fee that applies.

Residents who were in a hostel on 30 September 1997 and who are NOT currently at a home that was a nursing home before 1 October 1997 receive a reduction of 80 cents per day to their basic daily fee.

2012 BDF supplement: These rates apply for residents eligible for the 2012 basic daily fee supplement. This supplement is payable to providers for non-pensioners who do not hold a Commonwealth Seniors Health Card and who were in permanent residential care on 30 June 2021. To receive the supplement, providers must notify Services Australia that they will charge eligible residents no more than these rates.

⁷ Income tested fees are calculated at 5/12th of total assessable income over the income tested fee thresholds per fortnight. Income tested fees are capped at the maximum daily rate.

Income tested fee thresholds

Income tested fee type	Income tested fee thresholds (fortnightly)	
	Single	Each member of a couple
Standard (and Phased)	\$1,337.00	\$1,309.00
Non-Standard	\$1,337.00	\$1,309.00
Protected	\$1,102.80	\$1,074.80

Asset cut-off levels for supported resident status

Asset cut-off level for accommodation supplement:	Maximum asset amount
Fully supported residents	\$63,000
Partially supported residents for services not significantly refurbished or newly built	\$159,220.80
Partially supported residents for services significantly refurbished or newly built	\$210,555.20

Maximum daily accommodation charge for pre 2014 residents moving homes ⁸

Resident status and Assets at entry	Maximum daily accommodation charge ⁹
Fully supported, concessional and charge exempt	N/A
Residents who first entered residential aged care between 20/3/2008 – 30/6/2014 ¹⁰	
Non-supported with assets at entry at least \$159,220.80	up to \$46.26 or capped at maximum rate of previous entry
Supported with assets at entry less than \$159,220.80	calculated amount
Residents who first entered residential aged care between 1/7/2004 – 19/3/2008	
Assisted with assets at entry at least \$93,861.00	up to \$16.91
Assisted with assets at entry less than \$93,861.00	calculated amount
Other with assets at entry at least \$116,966.00	up to \$29.57
Other with assets at entry less than \$116,966.00	calculated amount
Residents who first entered residential aged care before 1/7/2004 ¹¹	
Assisted with assets at entry at least \$86,579.00	up to \$12.92
Assisted with assets at entry less than \$86,579.00	calculated amount
Other with assets at entry at least \$108,881.00	up to \$25.14
Other with assets at entry less than \$108,881.00	calculated amount

⁸ Rate remains unchanged for a resident's stay in a home, regardless of annual indexation of the maximum rate for new entrants. New rates apply for pre 2014 residents who enter a new home and haven't left permanent residential care for more than 28 days before re-entering care after 20 March 2008.

⁹ Services Australia sends letters to advise of the amount (does not include flexible care residents).

¹⁰ From 20 March 2008, accommodation charges are capped, even if a resident moves from one home to another, provided that there is not a break in care of more than 28 days (excluding leave).

¹¹ Accommodation charge limited to a maximum period of five years and fixed at date of entry, even if the resident has a break in care of more than 28 days.

Pensioner allowable limit for Accommodation bonds – \$252,500

For residents who initially entered care **prior to 20 March 2008** and agree to roll over a bond of more than 9 times the annual single age pension.

Minimum assets amount – \$63,000

A resident must be left with this amount when calculating the maximum accommodation bond.

Rates for transition care program

Fees for transition care program (TCP)

Maximum daily fee	Rate
TCP delivered in a home or community setting	\$13.49
TCP delivered in a residential care setting	\$65.55
