Dear *[INSERT CLIENT NAME]*

You are currently receiving home support services through the Commonwealth Home Support Programme (CHSP) which are funded by the Australian Government. In 2015, when CHSP was introduced, any clients who received services were automatically included under the program and did not have to undertake a new assessment via My Aged Care.

Recent changes to the program guidelines mean that we must advise the Australian Government via My Aged Care of all current recipients of services provided under CHSP with their consent.

My Aged Care is the Australian Government’s single entry point for aged care services which makes it easier for senior Australians, their families, and carers to access information on ageing and aged care, have their needs assessed and access services.

The information we provide to My Aged Care will be used to create a client record against which your current services will be listed without the need for an assessment. If you do have a current client record with My Aged Care, this process will ensure all your current services are listed correctly.

Having a My Aged Care client record will also make it easier for aged care assessors and service providers to understand your needs and services. A client record will also make it easier to access other aged care services should your needs change.

Providing this information will not affect your current services.

In order for us to help you set up your My Aged Care client record, we need to ensure we have the correct information about you and have your consent to do so. Attached is a consent form to be completed/amended, signed and returned via your delivery volunteers.

Once we have collected your information, there is nothing else you need to do.

If you also receive CHSP services from other providers, you may be asked to provide your details to them. Providing your details to each provider will ensure My Aged Care has a complete picture of the services you receive.

If you would like to talk about this data collection request, please contact us on [*insert contact details*].

We look forward to continuing to work with you.

Kind regards

*[INSERT CHSP PROVIDER NAME AND DETAILS]*

Consent Form – Creation of My Aged Care Record

Please complete the details below:

|  |  |  |
| --- | --- | --- |
| Title |  | |
| First Name |  | |
| Middle Name |  | |
| Last Name |  | |
| Preferred Name |  | |
| Address |  | |
|  | |
| Suburb |  | QLD |
| Phone Number |  | |
| Gender |  | |
| Date of Birth |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Please complete at least one of the below details: | | | |
| Medicare Number |  | Reference Number |  |
| DVA Card Number |  | | |
| Centrelink Reference Number (CRN) |  | | |

Your personal information is protected by law, including the *Privacy Act 1988* and the Australian Privacy Principles. The Australian Government Department of Health wants to collect your personal information, including sensitive information for the purpose of registering you on the My Aged Care system. The Department will be collecting this information from us, as your aged care provider. This will help to ensure that you are receiving the right Aged Care services for your needs.

The Department needs your consent for the collection of this information. If you do not consent to the Department collecting your personal information the aged care services you currently receive will remain unaffected.

You can get more information about the way in which your personal information will be managed in the privacy policies on the Department of Health’s website and on the My Aged Care website.

By signing below, you consent to the Department of Health collecting your personal information for this purpose.

|  |  |
| --- | --- |
|  |  |
| Signature | Date |
|  |  |
| Name of Authorised Person if not signed by Client |  |