

Client Intake Form- Service Agreement

(Commonwealth Home Support Program)



Client Details

Title:	Gender:
First name:	Date of birth:
Surname:	Country of birth:
Street address:	
Suburb and postcode:	
Home phone:	Mobile:
Email:	
Language at home:	Cultural b/g:
Are you Aboriginal or Torres Strait Islander? Yes No Prefer not to state	
Medicare number:	ref: Expiry: /
My Aged Care number: AC	
(if self-referring) My Meals at Home Referral Code:	

Next of Kin Details

☐ Has Keys

☐ Advocate

First name:	Surname:
Relationship:	
Street address:	
Suburb and postcode:	
Phone:	Email:

Secondary Contact Details

☐ Has Keys

☐ Advocate

First name:	Surname:
Relationship:	
Street address:	
Suburb and postcode:	
Phone:	Email:

☐ I **do not** wish to provide emergency contact details. I understand if there is concern for my welfare, a welfare check will be arranged with emergency services.

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Home Access

Delivery directions:
Access to property: ☐ Front ☐ Rear ☐ Side Access ☐ Other:
Any security gate codes or accessibility instructions: ☐ Yes ☐ No If yes, provide details:
Are there any pet/s on premises: ☐ Yes ☐ No If yes, provide details:
Does the client have a key lockbox that Meals on Wheels can use if they are not at home? ☐ Yes - Access Code: _____ ☐ No

Health information

Does the client require a walking aid? ☐ None required ☐ Walking Stick ☐ Walking Frame ☐ Wheelchair	Does the client have any disabilities? ☐ No ☐ Yes	Please specify disability details:
Any difficulties and/or health problems (e.g. hearing) that may impact service delivery:	Notes & Comments:	

Payment Options

I would like to be invoiced: ☐ Weekly ☐ Monthly
I would like my invoice: ☐ Delivered with my meals ☐ Emailed: _____ ☐ I do not need an invoice
My preferred payment method: ☐ EFTPOS (over the phone or via square facilities with delivery driver) ☐ BANK DEPOSIT (deposit directly into Meals on Wheels Brisbane South BOQ bank account (BSB: 124-025 Act Number: 232 418 41) using invoice number/your name as the reference. ☐ CASH (to delivery driver or in person at office) ☐ OTHER (Public Trustee / Centre-pay) please advise:

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Service Agreement

This Service Agreement is made between:

(Client Name)

With "The Service Provider":

Meals on Wheels Brisbane South Inc (ABN: 33502601992)

Trading as:

(Service Name)

Purpose

The purpose of this Service Agreement is to define the responsibilities, obligations, and expectations of all parties involved, ensuring the delivery of services aligns with the client's care plan and outlining processes for managing and resolving any issues that may arise.

Accessing Service and Conditions

- To receive subsidised meals through the Commonwealth Home Support Program (CHSP), you must first be assessed and approved by My Aged Care for meal services and meet the eligibility criteria set by the Australian Government.
- Your My Aged Care Support Plan outlines any service conditions or preferences. You can access this plan through the My Aged Care portal or by contacting My Aged Care directly (1800 200 422). If your eligibility changes or you transition to a different aged care program, we may need to review or update your meal service arrangements.

Commencement Date of Agreement:	
Service Delivery Start Date:	Run:
Next Review Date: <i>Annually during the month of August – or earlier if required due to change in circumstances or upon request of the client.</i>	

Client Involvement in Service Decisions

You will be actively involved in all decisions about your care and support services, including how, when, and by whom services are provided, in line with your rights. This includes:

- Taking part in regular reviews of your care.
- Expressing your preferences regarding meals, including menu choices, client order forms, and your *Meal Delivery Care Plan*.
- Providing feedback on the quality and outcomes of services.

We will strive to provide meals that meet your individual needs, including any dietary requirements. Meals on Wheels Brisbane South is committed to delivering respectful and inclusive services, and we welcome your input to help us understand what matters most to you. Please let us know if your needs or preferences change so we can adjust your meals accordingly.

Meal Delivery Requirements

- You need to be home to receive your meal delivery. If you are unavailable, please contact the *Service Provider* by phone or email to arrange an alternative delivery, within the timeframe advised during intake. If you do not provide notice in time, you may be charged for meals that have been prepared.
- Chilled and frozen meals can be left if you are not home, provided our volunteers have access to a working refrigerator or freezer, or a neighbour has been authorised to receive the meals. Instructions for this must be provided during intake or communicated to the *Service Provider* before delivery.
- Hot meals must be consumed immediately upon delivery. If you cannot eat the meal at that time, please contact the Service Provider to discuss alternative arrangements.
- All meals have the use-by-date and ingredients listed on them.
- Chilled meals should be kept refrigerated below 4°C. Chilled meals can only be reheated once.
- Frozen meals must be stored in the freezer below -18°C. Once thawed you cannot refreeze. Any defrosted meals should be consumed within 24 hours.

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Fees and Financial Agreement

You agree to pay the applicable client contributions as outlined within the enclosed price list/menu. These contributions are based on your assessed eligibility under the Commonwealth Home Support Program (CHSP) and may be reviewed periodically.

Meals on Wheels will:

- Provide you with a clear and up-to-date pricing schedule before services commence and before any changes take effect.
- Notify you in writing at least 30 days in advance of any fee increases or changes to the pricing structure.
- Ensure that fees are fair, transparent, and consistent with government guidelines.

You may request a review of your fees if you are experiencing financial hardship.

All fees must be paid within the payment terms advised. If payments are not made within the agreed timeframe, we may contact you (or your nominated representative) to discuss the issue and any support options available.

Service Provider Responsibilities

Meals on Wheels Brisbane South agrees to:

- Provide prompt, reliable, coordinated, safe, and high-quality services tailored to your needs, as outlined in your Care Plan and in accordance with the Aged Care Act 2024.
- Act in your best interests when delivering services.
- Review your services with you at least once a year.
- Respect your choice to use or not use our services.
- Consult with you regarding decisions or options about your service.
- Deliver meals and services in compliance with all relevant laws and regulations, including food safety standards, and maintain accurate records of the services provided.
- Fully protect your privacy and the confidentiality of your personal information allowed by law, while allowing you access to your information upon request.
- Provide support to help you understand any information we give you.
- Investigate any complaints fairly and confidentially, taking appropriate steps to resolve issues without risk of losing services or being disadvantaged.
- Work with you to arrange alternative payment options if your financial circumstances change and affect your ability to pay.
- Issue regular invoices, statements, or receipts upon request.
- Comply with the guidelines relevant to your funding scheme.
- Abide by the terms of this agreement.

Client Responsibilities

As a client of Meals on Wheels Brisbane South, I agree to:

- Work cooperatively with staff and volunteers to ensure services meet my support needs.
- Treat staff and volunteers with courtesy and respect and not request their personal contact details.
- Notify my *Service Provider* if my contact details change.
- Provide all essential information regarding dietary requirements.
- Ensure my home is safe and accessible for staff and volunteers (for example, pets controlled, pathways clear, no hazardous materials).
- Raise any concerns, request changes, or discuss dissatisfaction with my *Service Provider*.
- Give reasonable notice if I wish to cancel a meal delivery, service, or this agreement.
- Be at home to receive meal deliveries or notify my *Service Provider* if I will not be.
- Pay for services in full and on time as per invoice terms. If my financial situation changes, I will contact my *Service Provider* to discuss alternative arrangements.
- Not ask staff or volunteers to provide services outside the scope of this agreement.
- Take responsibility for the decisions I make regarding the service.
- Provide feedback on the services I receive.
- Abide by the terms of this agreement.

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Circumstances Where Services can be Ceased

Services under this agreement may be suspended or ended in the following circumstances:

(a) End of Funded Period or Change in Eligibility

- If your short-term funded service period has ended.
- If you become ineligible for Commonwealth Home Support Program (CHSP) services (for example, you are approved for a Support at Home Package or move into residential care).
- If your My Aged Care referral is withdrawn or cancelled.

(b) By Client Decision

You may suspend or end your services at any time by notifying us. We ask that you provide as much notice as possible so we can adjust our delivery schedule. For example- if you are on holidays or in hospital you can advise us to suspend service for a period of time and restart when you return home.

(c) Safety, Risk, or Capacity Issues

Meals on Wheels Brisbane South may temporarily suspend or stop services if:

- Continuing service would pose a serious risk to your health or safety, or to the safety of our staff or volunteers.
- Unsafe conditions exist in your home (for example, structural hazards or unsafe behaviour).
- Services are disrupted by events beyond our control, such as natural disasters, pandemics, or other emergencies.

We will make every effort to provide notice and help arrange alternative support where possible.

(d) Non-Compliance with Agreement

Services may also be paused or ended if:

- Meals are repeatedly refused without notice.
- Agreed fees are not paid despite reasonable attempts to resolve the issue.
- Other significant terms of this agreement are breached.

Notice and Fair Process

Except in urgent situations, we will:

- Notify you in advance of any suspension or ending of services;
- Explain the reasons for the decision;
- Give you an opportunity to respond or appeal; and
- Support you in accessing advocacy if required.

Feedback and Complaints

You have the right to provide feedback or make a complaint about your services at any time, without fear of negative consequences. Meals on Wheels Brisbane South values open communication and is committed to resolving any concerns promptly and respectfully.

If you are unhappy with your meals, delivery, or any part of your service, please contact your *Service Provider* to discuss the issue. You may also choose to have a representative speak on your behalf.

If you prefer not to speak directly with your *Service Provider*, you can contact the General Manager in writing at:

- **Email:** hello@mowbnesouth.org.au
- **Mail:** 66 Queen Street, Cleveland QLD 4163

If you are not satisfied with our response, you can contact:

- **Aged Care Quality and Safety Commission:** 1800 951 822 or www.agedcarequality.gov.au
- **Older Persons Advocacy Network (OPAN):** 1800 700 600 or www.opan.org.au

Statement of Rights

As a recipient of aged care services, you have rights protected under the Statement of Rights, including the right to be treated with dignity and respect, to make choices about your care, to be safe, and to have your identity, culture and diversity valued.

- A copy of the Statement of Rights is enclosed with this intake pack. We will explain these rights and support you to understand and exercise them.

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Safeguarding, Suitability and Worker Conduct

Meals on Wheels staff and volunteers are required to comply with the *Aged Care Act 2024*, which promotes respectful, safe and ethical behaviour.

All personnel delivering services to you must undergo relevant checks, training, and supervision in accordance with our obligations under the Aged Care Act. If you have concerns about staff or volunteer behaviour or feel unsafe, you are encouraged to raise this with us immediately.

Fair Treatment Statement

This agreement does **not** contain any provisions that would result in you being treated less favourably than you would otherwise be treated under any Commonwealth law, including those relating to anti-discrimination, disability rights, and consumer protection.

Privacy and Data Collection

- As part of commencing services, *Meals on Wheels Brisbane South* collect certain personal information from you the *Client*, including your My Aged Care (MAC) ID. This information is protected under the *Commonwealth Privacy Act*.
- Under the Commonwealth Home Support Program (CHSP), we are required to report information about the services you receive to the Department of Health, Disability and Ageing (DoHDA) through the Department of Social Services (DSS) Data Exchange system. Your information, including an encrypted version of your MAC ID, is stored securely and used only for compliance, reporting, research, and service improvement purposes.
- Any information used for research or reporting is de-identified to ensure you cannot be personally identified.
- Further information about how your personal information is managed, or how to request access, correction, or make a privacy complaint, can be found in the DSS Privacy Policy available on their website.

Photography and Media Consent

- You may be asked to take part in photographs, videos, or recordings used by Meals on Wheels Brisbane South for communication, promotional, or educational purposes. Participation is voluntary, and you can choose not to take part.
- If you provide consent, these materials may be used in publications, media releases, advertising, or on the organisation's website and social media. Images may be edited or cropped as needed and may be accessible publicly.
- You can withdraw your consent in writing at any time, but this will only apply to future use. All materials remain the property of Meals on Wheels Brisbane South and may be used without payment.

☐ I consent ☐ I do not consent

Consent and Acknowledgement

In accordance with the Privacy Act and policies of Meals on Wheels Brisbane South, we are seeking your consent to release information for specific purposes. All information will remain confidential unless it is required to be disclosed.

Do you consent to Meals on Wheels Brisbane South disclosing your personal information to your registered supporter/s and Government Departments for the purpose of arranging services?	☐ Yes ☐ No
Do you consent to Meals on Wheels Brisbane South collecting, storing/destroying records in accordance with the Privacy Act 1988	☐ Yes ☐ No
Do you consent to Meals on Wheels disclosing your personal information to your registered supporter, advocate, doctor/nurse or paramedic should any emergency arise as determined by Meals on Wheels administrative staff?	☐ Yes ☐ No
Do you consent to Meals on Wheels Brisbane South providing your information to Quality Review Auditors?	☐ Yes ☐ No
Do you consent to receiving meals and acknowledge that you are liable for payment of such at the prescribed fees set by Meals on Wheels? Should any of the details above change, you will inform Meals on Wheels in a timely manner.	☐ Yes ☐ No

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Do you consent for Volunteers &/or Staff of Meals on Wheels Brisbane South to enter your premises for the purpose of delivering meals? In an emergency, when you are unresponsive and ensuring that you are safe and unharmed, you understand they may need to enter and search for you.

☐ Yes ☐ No

Do you consent in the event that you do not answer the door and there is concern for my welfare, Meals on Wheels Brisbane South can ring your contacts to try to ascertain my whereabouts? You understand that if you are unable to be found, and there is concern for your welfare, it may be necessary to contact Emergency Service

☐ Yes ☐ No

Signatures

Client/Representative:

Signature: _____

Name: _____

Date: _____

Please provide me with a copy of this Signed Service agreement

☐ Yes ☐ No

Provider (Meals on Wheels) Representative:

Signature: _____

Name: _____

Role/Position: _____

Date: _____

Office Only

- ☐ Intake Pack (including Statement of Rights) given to client
- ☐ Copy of signed Agreement (*this document*), provided to client if requested
- ☐ Client's details added to Meal Management System
- ☐ Menu returned and entered
- ☐ Service Agreement and Meal Delivery Care Plan uploaded to Client Documents
- ☐ Meal Referral Code added to Register- if self-referring