ACare WA
Smart Choice Local Care

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SUBCONTRACTOR GUIDE

Working Expectations for Support & Clinical Staff via Mable

Purpose

This guide outlines how subcontractors (support workers and registered nurses) engaged via Mable are expected to collaborate with ACare WA while maintaining their independent contractor status to ensure safe, consistent, and high-quality support for our Home Care Package (hcp) clients.

1. Communication Expectations

- Please use Mable messaging for simple updates and schedule queries.
- If your client's condition, risks, or concerns change, notify ACare WA via email to ACare WA Home care Consultant and through Mable.
- All incidents to be logged in Mable
- Communication should be timely, respectful, and client focused.
- All changes or questions regarding scheduling, services, or care plans must be directed to ACare WA. Subcontractors are not authorised to make direct arrangements with clients.

2. Documentation & Clinical Notes (for RNs)

- All clinical care (e.g. wound dressing, symptom monitoring, post-hospital care) must be documented within 24 hours.
- Notes should include date, action taken, client response, and any follow-up needed.
- Clinical notes are to be uploaded into ShiftCare or provided via secure method as agreed.

3. Shift Reporting (for Support Workers)

- Use Mable shift notes for a brief summary of the visit.
- Flag any concerns (falls, confusion, missed medication) with ACare WA directly.
- If working alongside a nurse or other provider, communicate any changes observed.

4. Handover Expectations

- A short-written handover and in Mabel is required when care is shared or there is a change (e.g., hospital discharge).
- Handover should include current condition, any changes in mobility, medications, or mood.
- RNs should initiate handovers to support staff when medical events have occurred.

5. Incident & Risk Reporting

- Any fall, injury, medication issue, or serious change must be reported to ACare WA within 12 hours.
- Use the incident reporting email/form: [insert link or email].
- This ensures we meet Aged Care Quality and Safety Commission requirements.

6. Rostering and Coordination

- All rostering is managed via ShiftCare and coordinated by ACare WA.
- Subcontractors must not alter or commit to changes in client care without prior approval.
- ACare WA holds the formal agreement with the client as the Approved Home Care Provider.
- All discussions regarding service delivery, including private care, must go through ACare WA to avoid confusion or unintentional breaches of the Home Care Package rules.
- Decisions are made in consultation with the client's family and clinical team, but final coordination rests with the ACare WA Coordinator.

7. Scope of Practice

- Subcontractors must only work within their training and legal scope.
- Support workers should not undertake clinical tasks unless specifically agreed upon and trained.
- RNs must hold current AHPRA registration and professional indemnity insurance.

8. Professional Conduct

- All workers must treat clients, families, and colleagues with dignity and respect.
- Boundaries must always be maintained, and any conflicts of interest reported.

9. Coordination & Feedback

- You are encouraged to participate in care reviews (if invited).
- We welcome your feedback to improve coordination and care outcomes.

Note: This guide is not a contract. It outlines expectations under ACare WA's duty of care as an Approved Provider under the Aged Care Act. Cooperation with these standards supports better outcomes for clients and reduces risk for all parties.

Contact

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Section: Clients Requiring RN-Led Clinical Oversight

Definition

ACare WA identifies certain Home Care Package (HCP) clients as requiring RN-led clinical oversight due to the complexity or intensity of their medical needs. These clients are referred to internally as:

“Clients with High Clinical Support Needs” or **“Clinically Complex Clients.”**

These are typically clients on a **Level 3** or **4 HCP** who require frequent or specialised clinical input to manage their care safely at home.

Common Characteristics

Clients in this category may include those who:

- Have multiple **chronic conditions** (e.g. diabetes, COPD, heart failure)
- Require **wound care**, including complex or non-healing wounds
- Are recovering from **recent hospital discharge** with ongoing care needs
- Require **continence management**, including catheter or stoma care
- Are receiving **palliative care** at home
- Take multiple medications and require **monitoring for interactions or side effects**
- Experience **frequent health deterioration**, falls, or confusion

Expectations for Subcontracted Registered Nurses

RN subcontractors supporting these clients must:

- **Document all clinical interventions and observations** clearly and promptly, using ShiftCare or a designated platform
- **Communicate changes in condition** to ACare WA and relevant support staff within 24 hours, or immediately if urgent
- **Complete handovers** when transferring care or when another subcontractor/support worker is scheduled to provide service
- Maintain **accurate clinical records**, including any medication prompts, symptom changes, or care plan updates
- **Report clinical incidents** (falls, medication errors, pressure areas, etc.) using ACare WA’s incident reporting procedure

Coordination and Oversight

For these clients, ACare WA may:

Assign a **primary RN contact** for continuity

Conduct **periodic reviews** of care plans and documentation

Require additional collaboration between the RN and allied health or support staff

Purpose

This structure ensures that ACare WA meets its duty of care and compliance obligations under the Aged Care Quality Standards. It also supports subcontracted nurses in delivering safe, coordinated, and professional care to clients with higher medical risks.