Policy

Partnering with Carers

Version: 3.0

Approval date: 19 October 2026

PDS Reference No: D0399

Government of South Australia

SA Health

Publication details

Document ownership

Policy Owner	Domain Custodian for the Clinical Governance Safety and Quality Policy Domain
Chief Policy Contact	Safety and Quality Unit, Clinical System Support & Improvement
Objective reference number	A8050556 - 2025-15684
Review date	19/10/2031
Contact for enquiries	Health.DHWClinicalGovernanceEnquiries@sa.gov.au

Document history

Version	Date approved	Approved by	Amendment notes
V1.0	18/12/2023	Clinical Engagement and Strategy	Original Policy
V2.0	17/08/2025	Chief Executive, DHW	Amended to align with new Policy template and requirements. Reviewed with content changes being non-material in nature by providing links to additional information.
V3.0	19/10/2026	Deputy Chief Executive, Clinical System Support & Improvement	**Amended to align with new Policy template and requirements.** **Reviewed with content changes and aligned to the *Carers Recognition Act 2005* and revised Carers Charter enacted on 1 July 2026.**

INFORMAL COPY

1. Name of Policy

Partnering with Carers

2. Policy Statement

This policy sets out the mandatory requirements to enable and support carers within the public healthcare system, to ensure carers are recognised, included, supported and empowered in their caring role that they perform in alignment with the *Carers Recognition Act 2005*, SA Carers Charter, *Aged Care Act 2024*, *Mental Health Act 2009* and National Safety and Quality Health Service Standards.

3. Applicability

This policy applies to all employees and contracted staff of SA Health; that is all employees and contracted staff of the Department for Health and Wellbeing (DHW), Local Health Networks (LHNs) including state-wide services aligned with those networks and SA Ambulance Service (SAAS).

Out of scope

This policy does not apply to employed care or support workers. A person is not considered a carer under this policy if they provide support and assistance under a contract for the provision of services or in the course of voluntary work for a non-government organisation, or as part of the requirements of an education or training course.

4. Policy Principles

SA Health's approach to partnering with carers is underpinned by the following principles:

- We recognise and support carers as partners in healthcare and the role they serve in the community and treat them with respect, dignity and compassion.
- We recognise carers as individuals with their own social, spiritual, cultural, economic, health and wellbeing needs.
- We recognise carers as partners in governance, service planning, co-design, quality improvement, workforce education, research and policy development.
- We provide carers with information that is timely, responsive, appropriate, respectful and culturally safe and accessible, enabling them to make informed decisions and fulfil their caring role.
- We recognise that caring can be episodic, unpredictable and crisis-driven, and that carers may need information and support at times.
- We provide guidance and direction to help carers navigate the health system and to make informed decisions about the care that is required for the person they support and for themselves in their caring role.
- We recognise and support the unique and complex roles of kinship carers, including grandparents, siblings, extended family members, Aboriginal collective kinship care and other family and kinship relationships. We recognise cultural authority, self-determination and community responsibility within Aboriginal kinships systems and support culturally safe and responsive practice.
- We recognise that parents, guardians, kinship carers, foster carers and families, and the persons chosen support persons, are essential partners in the care of infants, children and young people and support their meaningful involvement in decision-making, care planning, service design and evaluation.
- We recognise that carers can include children and young people with caring responsibilities for parents, siblings and other family members.

INFORMAL COPY WHEN PRINTED

- We are committed to identifying and supporting young carers, including Children of Parents with Mental Illness (COPMI), and their health, wellbeing, educational participation and development needs are considered alongside their caring role.
- We acknowledge carers' unique long-term perspectives to inform and advocate for a better health system.
- We collaborate and partner with Carers SA to support carers through the Carer Gateway, and other carer organisations who provide support, services and information to unpaid carers.
- We are committed to supporting employees with caring responsibilities, recognising their contribution to the workforce and the community.
- We assess all flexible work requests fairly and in good faith, particularly where the request relates to supporting caring responsibilities.

5. Policy Requirements

SA Health must ensure employees are aware of and understand the *Carers Recognition Act 2005* and SA Carers Charter and reflect its principles when providing health care.

Each health service must implement systems and processes to identify and recognise carers as partners in health care in accordance with:

- Partnering with Carers key priorities
- SA Health Consumer, Carer and Community Engagement Strategic Framework
- Engaging with Consumers, Carers and the Community Guide and Resources
- SA Health Consumer, Carer and Community Feedback and Complaints Management Strategic Framework
- Consumer, Carer and Community Feedback and Complaints Management Guide and Resources
- National Carer Strategy 2024 - 2034

SA Health must ensure that carers are:

- Actively identified, recognised and registered as the patient's / client's carer on Electronic Medical Record (EMR) in alignment with the Health Record Management Policy.
- Partners in decisions and choices about individual care and treatment of the person they care for from first point of contact and at each episode of care, including admission, transfer and discharge.
- Treated with respect, dignity and compassion.
- Informed if something goes wrong and receive an explanation, apology, plan for next steps and support as appropriate.
- Provided with information relevant to their caring role, involved in care and discharge planning, to the extent permitted by law and the consent of the person being cared for.
    - Information sharing with carers to support them to safely undertake their caring role, without the consent of the person, is allowed under *Health Care Act 2008* provided that:
        - The person has not objected, and
        - There is no reason to believe it would be contrary to the persons best interest.
- Provided, where consent is withheld or cannot be obtained, information relevant to supporting them to safely undertake their caring role, referral and record the consent position.
- Given the opportunity to provide feedback in accordance with the SA Health Consumer, Carer and Community Feedback and Complaints Management Strategic Framework, Guide and Resources, and that their experience and contribution is captured and evaluated through existing systems.

INFORMAL COPY WHEN PRINTED

- Supported, guided and provided services that supports the person they care for in the public health system.
- Informed of their rights under the *Carers Recognition Act 2005* and the SA Carers Charter at the point of care, in a format and language they can understand, including the right to make a complaint about their own experience as a carer.
- Referred to services provided by carer support organisations and provided access to information that enables them to fulfil their role as a carer.
- Provided information that is accessible and culturally safe in alignment with health literacy principles including Easy Read materials, accessible community formats, and supports for carers with disability or communication needs.
- Informed of accredited interpreter and translating services are available, to ensure that a carer does not act as an interpreter for communication between the consumer and staff.
- Engaged as partners in the planning, implementation and evaluation of services in accordance with the SA Health Consumer, Carer and Community Engagement Strategic Framework, Guide and Resources, and that their contribution is captured and evaluated through existing systems.
- Actively engaged to identify their individual needs as a carer, and to develop appropriate services to accommodate them including the carer's choice and capacity to provide ongoing care and recognition that carers have a right to refuse to provide such care.
- Consulted, or represented through bodies that represent carers, such as Carers SA when relevant services are developed or evaluated.
- Shared the information which is in the interests of good health, safety, wellbeing and outcomes and complies with the Privacy Policy.
- Recognised for their significant economic contribution which supports the effective operation of the health, aged care and child protection systems.
- Recognised for the impact caring can have on their own work, education, finances, health, safety and wellbeing.
- Recognised for the knowledge carers have about the person they care for is important in health assessment and decision-making, care and treatment.
- Supported, if identify as Aboriginal and/or Torres Strait Islander, in ways that recognise and respect their right to self-determination and their unique cultural identity and, kinship relationships.
- Recognised and supported with regard to young carers (between the ages of 5 and 25 years) to their education, development, wellbeing and connected to specific supports, and provided information in a format that they can understand to support their caring responsibilities

Employees with caring responsibilities

SA Health recognises that employees' caring responsibilities may be ongoing, episodic or arise unexpectedly.

Managers must work with employees to consider practical arrangements that support their caring role wile meeting service needs, in accordance with the SA Health Working Flexibly Policy and Guideline.

- Requests are to be considered promptly and fairly, with reasons communicated and alternative arrangements explored where are request cannot be supported.
- Agreed arrangements are to be reviewed when caring or operational circumstances change.

Employees must be able to seek support without stigma or adverse assumptions about their commitment or capability.

INFORMAL COPY WHEN PRINTED

SA Health must:

- Recognise the skills employees gain through caring which are valuable and transferable to the workforce.
- Recognise the critical role of unpaid carers in our workforce and commit to supporting employees with a solution focussed approach to balance work and caring responsibilities.
- Ensure flexible work arrangements are promoted, considered and managed as an important enabler of a carer-inclusive and accessible workplace, and in accordance with the SA Health Working Flexibly Policy.
- Consider flexible work requests for employees with caring responsibilities and assess requests fairly and in good faith, having regard to operational requirements.

Reporting

DHW and LHNs must:

- Report annually on compliance against the *Carers Recognition Act 2005* through the Government of South Australia, Department of Premier and Cabinet (DPC) PC013 Annual Report requirements.
- Measure the impact of carer partnerships including:
    - Carer experience,
    - Involvement in care planning and decision-making,
    - Participation in co-design, committees and governance,
    - Outcomes arising from carer feedback, and
    - Evidence of support provided to carers and carer-inclusive practices.

LHNs must:

- Report on compliance with the National Safety and Quality Health Service Standards (NSQHSS).

6. Mandatory related documents

The following documents must be complied with under this Policy, to the extent that they are relevant:

- *Aged Care Act 2024*
- Aged Care Statement of Rights
- Australian Open Disclosure Framework
- *Carers Recognition Act 2005 (SA)* including SA Carers Charter
- *Carer Recognition Act 2010 (Commonwealth)*
- Clinical Incident Management Policy
- Consumer, Carer and Community Engagement Strategic Framework and Guide
- Consumer, Carer and Community Feedback and Complaints Management Policy, Strategic Framework and Guide
- Department Human Services (DHS) Guidelines to support compliance with the *Carers Recognition Act 2005 (SA)*
- DHS Reporting guidance for the Carers Recognition Act 2005 (SA)
- Factsheet on the Carers Recognition Act 2005 (SA) and the South Australian Carers Charter
- Health Record Management Policy
- *Health Care Act 2008*
- *Mental Health Act 2009*

INFORMAL COPY WHEN PRINTED

- National Carer Strategy 2024 - 2034
- *National Disability Insurance Scheme Act 2013*
- *National Disability Insurance Scheme (NDIS) Complaint Management and Resolution Rules 2018, under the NDIS Act 2013*
- NSQHS Partnering with Consumers Standard
- SA Health Privacy Policy
- SA Health Working Flexibly Policy

7. Supporting information

- Carers SA and Carer Gateway webpage
- Carers Resource Hub, SA Health intranet
- Department of Health, Disability and Ageing webpage
- Mental Health Carer Information Sheet for Staff
- SA Health Aboriginal Health webpage
- SA Health Partnering with Carers webpage
- SA Health Consumer, Carer and Community Engagement webpage
- SA Health Consumer, Carer and Community Feedback and Complaints Management webpage
- SA Health Mental Health Carers webpage
- SA Health Partnering with Cultural and Linguistically Diverse Consumers webpage
- SA Health Working Flexibly Guideline

8. Definitions

- **Advocate:** means a person who advocates for the person they care for and has the requisite experience to speak as an informed carer.
- **Carer:** means, under the *Carers Recognition Act 2005*, a Carer is in a care relationship with another person, if they provide personal care, support or assistance to the other person who has a disability; is experiencing mental ill health; has a medical condition (including a terminal or chronic illness, or dementia); is frail due to age or is experiencing alcohol or other drug dependence.
  Carers can include parents, children and young people, siblings, grandparents or other family members including kinship relations, a friend or neighbour. Some but not all Carers are legal guardians. An individual is not a carer merely because of a familial relationship and/or live with the person they care for.
  In the context of Aboriginal communities and kinship systems, caring is a collaborative act with many people helping care for a single person. Because of this, people looking after family and friends often do not recognise themselves as Carers and are often not recognised as a carer by health services.
  Carers are not part of the paid workforce. Unpaid Carers may receive an allowance and access services that support them in their caring role.
- **Consumer:** means generic term for a person (consumer, carer and/or community member) who has used, or may potentially use, health and/or community services. The term consumer is used to be inclusive of, but not limited to patient, participant, resident, client, person with lived experience, and any or other terms used by individuals, groups, communities and sectors. In the context of this policy and support carers in SA Health services, carers should be uniquely identified.
- **Representative:** means a person who represents a carer or support organisation or group and is authorised to speak on behalf of the organisation or group.

INFORMAL COPY WHEN PRINTED

- **Statewide clinical service:** means any statewide clinical service delivered under the governance of the Local Health Networks.

9. Compliance

This policy is binding on those to whom it applies or relates. Implementation at a local level may be subject to audit/assessment. The Domain Custodian must work towards the establishment of systems which demonstrate compliance with this policy, in accordance with the requirements of the Risk Management, Integrated Compliance and Internal Audit Policy.

Any instance of non-compliance with this policy must be reported to the Domain Custodian for the Clinical Governance Safety and Quality Policy Domain and the Domain Custodian for the Risk, Compliance and Audit Policy Domain.

10. Appendices

1. *Nil*

INFORMAL COPY WHEN PRINTED