

Agenda

Alwyndor Management Committee

NOTICE OF MEETING

Notice is hereby given that a meeting of the
Alwyndor Management Committee will be held at

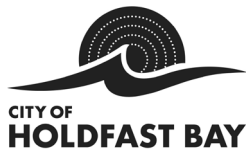
Alwyndor

52 Dunrobin Road, Hove

30 October 2025 at 6.30pm



Pamela Jackson
Chief Executive Officer



1. Opening

The Chairperson, Mr Kim Cheater will declare the meeting open at 6.30pm.

2. Kurna Acknowledgement

We acknowledge Kurna people as the traditional owners and custodians of this land.

We respect their spiritual relationship with country that has developed over thousands of years, and the cultural heritage and beliefs that remain important to Kurna People today.

3. Apologies

3.1 Apologies received

3.2 Absent

4. Declarations of Interest

If a Committee Member has an interest (within the terms of the Local Government Act 1999) in a matter before the Committee they are asked to disclose the interest to the Committee and provide full and accurate details of the relevant interest. Committee Members are reminded to declare their interest before each item.

5. Reports/Items of Business

Workshop presentation

Aged Care Act, 2024

Presenter Julie McStay, Partner, Thomson Geer

6. Confirmation of Minutes

That the minutes of the Alwyndor Management Committee meeting held on 25 September 2025 be taken as read and confirmed.

7. 7.1 General Manager Report

8. Urgent Business – Subject to the leave of the meeting

9. Date and time of next meeting

The next meeting of the Alwyndor Management Committee will be held on **Thursday 27 November** in Boardroom, Alwyndor Aged Care, 52 Dunrobin Road, Hove or via audio-visual telecommunications.

10. Close

A handwritten signature in blue ink, appearing to read "P Jackson".

Pamela Jackson
Chief Executive Officer

Item No: 7.1

Subject: General Manager Report

Date: 30 OCTOBER 2025

Written by: Beth Davidson-Park
General Manager

Summary

This report is to update and inform the Alwyndor Management Committee (AMC) regarding items, initiatives and issues of relevance to Alwyndor business specifically and to the aged care sector more generally.

Recommendation

That the Alwyndor Management Committee:

- 1. Note the Provider Operations Report and approve the Chair, Kim Cheater, to sign the Governing Body Declaration for Alwyndor.**

7.1.1 Provider Operations Report

Introduced in 2023 as part of the Aged Care Reform agenda, aged care providers are required to complete an annual *Provider Operations Report*. This report includes the *Governing Body Statement* for Alwyndor, Attachment 1 and a *Declaration* Attachment 2 signed by a member of the governing body (AMC).

The statements declare whether the governing body ie the AMC, believes that Alwyndor has complied with its responsibilities under the Aged Care Act 1997 and the requirements under the Aged Care Quality and Safety Commission Act 2018 between 1 July 2024 and 30 June 2025.

The guidelines state that if the governing body believes the provider failed to comply with one or more responsibilities under the Aged Care Act 1997 or requirements under the Aged Care Quality and Safety Commission Act 2018, the report must outline the non- compliance details.

At the AMC meeting held on 31 October 2024, regarding the diversity section of the report, it was agreed to circulate the declaration to AMC members and include in the 2025 report. The declaration was circulated to members by email on and all declarations have been returned and included in the 2024/25 report.

No issues of noncompliance were found for Alwyndor for the reporting period.

The *Declaration* needs to be signed by a member of the governing body (AMC), it is recommended that this be the Chair, Kim Cheater.



ITEM 7.1.1
ATTACHMENT 1



City of Holdfast Bay

Provider operations - 01 July 2024 to 30 June 2025

Reporting Status - Draft

Please carefully check your data prior to submission. Information from this Collection Form is for publication on My Aged Care.

DRAFT

Key personnel



About this section

Please provide the name of **at least one key personnel** within your organisation who is responsible for executive decisions. This person needs to be available to be contacted by care recipients and their representatives should they wish to escalate an issue concerning your organisation.

You may enter up to a maximum of three person's names and roles. Each person should be a senior executive of the organisation, such as a Chief Executive Officer (CEO) or similar.

You must have consent of the person to report their name and role. Their name and role will be published on the My Aged Care website.

All fields marked with an asterisk (*) are required

Privacy consent

* Do you have the consent of the named person(s) to report their information in this data collection. This person(s) is aware that their name and role is being reported to the Department for the purpose of being published on My Aged Care website under each service of the provider.

Yes

No

Key personnel

You must have consent of the person to report their name and role. Provide **at least one key personnel within your organisation**. Their name and role will be published on the My Aged Care website

1.	Executive name Beth Davidson-Park	Role Other
		If other, what role is executive? General Manager
2.	Executive name Molly Salt	Role Other
		If other, what role is executive? Executive Manager Community
3.	Executive name Natasha Stone	Role Other
		If other, what role is executive? Executive Manager Residential

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Governing body membership



▼ About this section

Certain providers must meet the requirement that their governing body must have a majority of independent non-executive members and at least one member with experience in providing clinical care.

The following approved providers are not required to meet the governing body membership requirements:

- state or territory approved providers (including a state or territory authority), or a local government authority
- providers with a governing body with fewer than 5 members and who provide care to fewer than 40 care recipients
- providers that are an approved Aboriginal Community Controlled Organisation (ACCO)

If you are required to meet the governing body membership requirements but are unable to do so, you can apply to the Aged Care Quality and Safety Commission for a determination that one or both of the requirements do not apply.

All fields marked with an asterisk (*) are required.

* Is your organisation a state and territory, a state or territory authority, or a local government authority?

Yes

No

* Does your governing body have a majority of independent non-executive members?

Yes

No

* Does your governing body include a person with clinical experience?

Yes

No

* Does your organisation have fewer than 5 governing body members and fewer than 40 care recipients?

Yes

No

* Is your organisation an Aboriginal Community Controlled Organisation?

Yes

No

* Has a determination been made by Aged Care Quality and Safety Commission that the responsibility to have majority of independent non-executive members does not apply to your organisation?

Yes

No

* Has a determination been made by Aged Care Quality and Safety Commission that the responsibility to have a person with clinical experience on your governing body does not apply to your organisation?

Yes

No

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Statement

All fields marked with an asterisk (*) are required.

* Name of governing body member making the Statement

Kim Cheater

* Role / Position / Designation of member

Chair

* Does the governing body believe the approved provider **has complied / has failed to comply** with all of its responsibilities under the *Aged Care Act 1997* and the requirements under the *Aged Care Quality and Safety Commission Act 2018*?

Has complied

Has failed to comply

* Do you want to send the Governing body statement to be signed electronically?

Yes

No

Send Document for e-Signature

A member of the governing body is required to electronically sign the statement on behalf of all members of the governing body.
Before you select Send for e-Signature, please ensure the person nominated is available to sign the document.

* Email address of the governing body member electronically signing the Governing Body Statement

kimcheater@kcconsulting.com.au

Send for e-Signature

Governing body statement



▼ About this section

About the Governing Body Statement

Section 53G of the Accountability Principles 2014, requires providers that deliver home care services or residential care services to submit a statement about the provider's compliance with its aged care responsibilities and requirements.

The Governing Body Statement (the Statement) is intended to support the governing body to examine the provider's compliance with its responsibilities and requirements.

A provider's demonstrated and transparent commitment to identifying and addressing compliance matters can give confidence to care recipients about the provider's commitment to quality and safety.

Information from the Statement will be published. The publication of this information aims to increase provider transparency and accountability and help drive continuous improvement across the sector.

How to complete the Statement

The Statement is for the period 1 July 2024 to 30 June 2025.

This Statement is to report compliance matters identified by the provider that include and go beyond those identified by the Aged Care Quality and Safety Commission.

With the exception of the governing body member's details, no personal information is to be included in the Statement.

The Statement **MUST** be accompanied by a Declaration signed by a member of the provider's governing body on behalf of all members of the governing body. This can be done by either:

- downloading the Declaration for the governing body member to sign. The signed Declaration is to be uploaded to the Provider Operations Collection Form for submission through GPMS.
- requesting an electronic signature from the governing body member through DocuSign. DocuSign will automatically upload the signed Declaration to the Provider Operations Collection Form.

Please see the guidance material for further details about using these options.

Signed statement(s)

Once the statement has been electronically signed by the governing body member, the file will be available for preview.

 **File Management (0)**

Upload Files

Or drop files

Document uploads

Search

☐ Show archived documents

Title	Owner	Created Date	Status
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Diversity and inclusion - Provider

About this section

This question is about the diversity of your organisation's governing body during the reporting period of 1 July 2024 to 30 June 2025.

The collection of this information is to assist aged care recipients to find the right care for them. The information collected is to be published on My Aged Care.

Before providing any information in response to this question you must note, and agree with, the following:

1. Reported information should not be drawn from assumptions about the diversity of governing body members, but from the way in which individual members of the governing body identify and wish to describe themselves.
2. Each member of the governing body must be asked to provide documented consent for the provider to include their individual information in the response given to the Department for publication on My Aged Care, and must be advised that their response is voluntary. It must be emphasised that individual members of the governing body are not obliged to disclose information about their diversity. Only the diversity of members who have provided consent should be included in your response.
3. To the extent that members of the governing body wish to consent to the information being provided, this information must be reported to the Department.
4. You are not obligated to report on other forms of diversity beyond those specifically listed in the following questions. Other forms of diversity should only be disclosed (in the space provided below) where a member of the governing body has specifically directed that they wish to report a form of diversity concerning themselves which is outside of the listed categories.

Consent

* Do you have consent from individual governing body members to disclose the diversity and inclusion information to the Department?

Yes

No

* What forms of diversity and/or lived experience were included on your organisation's governing body during the period 1 July 2024 - 30 June 2025?

- ☐ Aboriginal and/or Torres Strait Islander
- ☐ Carer
- ☐ Cognitive diversity
- ☐ Cultural and linguistic diversity
- ☐ Dementia
- ☐ Disability
- ☐ Financially disadvantaged
- ☐ LGBTIQ+
- ☒ Older member (over 65)
- ☐ Religious diversity
- ☐ Representation of women
- ☐ Rural and remote
- ☐ Veterans
- ☐ Other diversity

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✓ About this section

This page is to collect information about initiatives implemented at each residential care and home care service to support a diverse and inclusive environment between 1 July 2024 to 30 June 2025. The information is being collected to help older Australians to choose a provider that is right for them.

Alwyndor Aged Care ✓

Service ID: SRV-4340

Alwyndor Care Packages ✓

Service ID: SRV-18459

All fields marked with an asterisk (*) are required.

*Does the service have policies and procedures for culture, diversity and inclusion?

Developing

Implemented

No

*Does the service have policies and procedures for cultural safety?

Developing

Implemented

No

*Does the service have social activities to support culture, diversity and inclusion?

Developing

Implemented

No

Save

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Diversity and inclusion - Service

About this section

This page is to collect information about initiatives implemented at each residential care and home care service to support a diverse and inclusive environment between 1 July 2024 to 30 June 2025. The information is being collected to help older Australians to choose a provider that is right for them.

Alwyndor Aged Care ✓

Service ID: SRV-4340

Alwyndor Care Packages ✓

Service ID: SRV-18459

All fields marked with an asterix (*) are required.

*Does the service have policies and procedures for culture, diversity and inclusion?

Developing

Implemented

No

*Does the service have policies and procedures for cultural safety?

Developing

Implemented

No

*Does the service have social activities to support culture, diversity and inclusion?

Developing

Implemented

No

Save

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Feedback, complaints and improvements



About this section

This page is to collect information about the most common kinds of positive feedback and complaints received about each residential care and home care service and information about the key improvements made at each residential care and home care service between 1 July 2024 to 30 June 2025.

For complaints, this includes all complaints made in regard to the service, including those made to the provider, as well as those made to other agencies that the provider is aware of. This information is being collected as one information source to help older Australians, their families or carers to choose a provider that is right for them. A provider's response to feedback or a complaint demonstrates its commitment to improving its quality of care.

Alwyndor Aged Care

Service ID: SRV-4340

Alwyndor Care Packages

Service ID: SRV-18459

All fields marked with an asterisk (*) are required.

Feedback

*During the period 01 July 2024 to 30 June 2025 what were the three most common kinds of positive feedback received about the service?

Personal care

Other (please specify)

* If other, what common feedback was received? ⓘ

Allied Health services

Staff behaviour/conduct

Complaints

*During the period 01 July 2024 to 30 June 2025 what were the three most common kinds of complaints received about the service?

Personal care

Staff behaviour/conduct

Food and catering

Improvements

*During the period 01 July 2024 to 30 June 2025 what were three main kinds of improvements made in relation to the quality of the service?

Palliative/End of life care

Staff training/skills/qualifications

Staff number/sufficiency

Save



▼ About this section

This page is to collect information about the most common kinds of positive feedback and complaints received about each residential care and home care service and information about the key improvements made at each residential care and home care service between 1 July 2024 to 30 June 2025.

For complaints, this includes all complaints made in regard to the service, including those made to the provider, as well as those made to other agencies that the provider is aware of. This information is being collected as one information source to help older Australians, their families or carers to choose a provider that is right for them. A provider's response to feedback or a complaint demonstrates its commitment to improving its quality of care.

Alwyndor Aged Care

Service ID: SRV-4340



Alwyndor Care Packages

Service ID: SRV-18459



All fields marked with an asterisk (*) are required.

Feedback

*During the period 01 July 2024 to 30 June 2025 what were the three most common kinds of positive feedback received about the service?

Staff behaviour/conduct



Personal care



Physical environment (including cleaning)



Complaints

*During the period 01 July 2024 to 30 June 2025 what were the three most common kinds of complaints received about the service?

Other (please specify)



*If other, what common complaints were received? ⓘ

Gardening & Maintenance

Staff behaviour/conduct



Clinical care



Improvements

*During the period 01 July 2024 to 30 June 2025 what were three main kinds of improvements made in relation to the quality of the service?

Assessment and implementation (including care management)



Communication and consultation



Clinical care



Save

Submission of Provider Operations Collection Form



▼ About this section

This page is where you submit your Provider Operations Collection Form to the Department of Health and Aged Care.

You will not be able to submit your Form unless it has been fully completed.

You are encouraged to carefully check the information that you have submitted through the Provider Operations Collection Form. Please ensure the information submitted is suitable for publication on the My Aged Care website.

Declaration

As a person authorised by the approved provider submitting this Provider Operations Collection Form (the Form), I certify that all particulars disclosed in this Form are true and correct.

I confirm that the completed information does not include any personal information, other than where specifically requested in this Form, including:

- the name and role of an executive member of the provider,
- the name and signature of the governing body member signing the Statement by the Governing Body,
- diversity information for members of the governing board.

Natasha Stone
23-Oct-2025

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Agree and Submit



ITEM 7.1.1 ATTACHMENT 2



Australian Government
Department of Health and Aged Care

Governing Body Statement

Information for the governing body member signing the statement

Declaration by a member of the governing body of an approved provider

Section 53G of the [*Accountability Principles 2014*](#), requires approved providers of aged care that deliver home care services or residential care services to submit a statement about the provider's compliance with its responsibilities and requirements.

The Governing Body Statement MUST be accompanied by a declaration signed by a member of the approved provider's governing body on behalf of all members of the governing body for each approved provider that delivers a residential care service or a home care service.

- The Governing Body Statement is completed as part of the Provider Operations Collection Form on the Government Provider Management System (GPMS).
- The Declaration is on page 3 of this document. The signed Declaration is to be uploaded to the Provider Operations Collection Form for submission through GPMS.

The Governing Body Statement

The Governing Body Statement details:

- Whether or not the governing body of the approved provider believes the approved provider has complied with its responsibilities under the *Aged Care Act 1997* and the requirements under the *Aged Care Quality and Safety Commission Act 2018* between 1 July 2024 and 30 June 2025 (the reporting period)

- If the governing body believes the approved provider failed to comply with one or more responsibilities under the *Aged Care Act 1997* or requirements under the *Aged Care Quality and Safety Commission Act 2018*, details of:
 - each responsibility or requirement that the approved provider failed to comply with
 - the reasons why the approved provider failed to comply
 - actions that the provider has taken or will take to rectify the non-compliance

In all cases of compliance and failed compliance, the statement must be signed by a member of the approved provider's governing body on behalf of all members of the governing body.

With the exception of the governing body member's details, no personal information is to be included in the statement.

The statement is intended to support the governing body to examine the approved provider's compliance with its responsibilities and requirements. The signed statement allows governing bodies to demonstrate their understanding of, and accountability for, issues affecting the quality of care of care recipients.

The process of completing a statement can assist approved providers to proactively look to identify and improve any areas of non-compliance. A provider's demonstrated and transparent commitment to addressing non-compliance can give confidence to care recipients about an approved provider's commitment to quality and safety.

The reporting of this information aims to increase approved provider transparency and accountability and help drive continuous improvement across the sector.

How Will the Statement and the Declaration be Submitted?

The Governing Body Statement and the declaration signed by a member of the approved provider's governing body are to be electronically submitted to the department as part of the Provider Operations Collection Form through the GPMS **by 31 October each year**.

Further information on the Provider Operations Collection Form, including the Governing Body Statement is available on the Department's [website](#).



Australian Government

Department of Health and Aged Care

Declaration by a member of the governing body of the approved provider

This page must be uploaded to the Provider Operations Collection Form once signed by a member of the governing body of the provider.

I certify that:

- ☐ I am a member of the governing body of the below approved provider:

(Insert name of the approved provider)

- ☐ This Governing Body Statement detailed in the Provider Operations Collection Form on the Government Provider Management System is true and correct to the best of my knowledge and belief.
- ☐ This statement does not include any personal information other than my own name, role and signature.
- ☐ I understand that my name and role may be published by the Department as part of this statement.

Full Name	Position
Signature	Date

Note to the governing body member signing this form:

Giving false or misleading information or documents is an offence under Division 137 of the *Criminal Code Act 1995* (Cth) with a maximum penalty of 12 months imprisonment.

Approved providers have a responsibility to:

- comply with section 63-1G of the *Aged Care Act 1997* in relation to the giving of information relating to a reporting period to the Secretary of the Department of Health and Aged Care; and
- comply with other such responsibilities as are specified in the *Accountability Principles 2014* under paragraph 63-1(m) of the *Aged Care Act 1997*, including reporting responsibilities detailed in section 53G of the *Accountability Principles*.

Submission due date

You must submit the completed Governing Body Statement, including this signed declaration, by **5:00pm on 31 October 2025** online via the Provider Operations Collection Form on the Government Provider Management System.