

ACT AUDITOR–GENERAL'S **PERFORMANCE AUDIT REPORT**

**Implementation of the
Carers Recognition Act 2021**

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The ACT Audit Office acknowledges and respects their continuing culture and the contribution they make to the life of this city and this region.

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PA 25/05

The Speaker
ACT Legislative Assembly
Civic Square, London Circuit
CANBERRA ACT 2601

Dear Speaker

I am pleased to forward to you a Performance Audit Report titled 'Implementation of the Carers Recognition Act 2021' for tabling in the Legislative Assembly pursuant to Subsection 17(5) of the *Auditor-General Act 1996*.

The audit has been conducted in accordance with the requirements of the *Auditor-General Act 1996* and relevant professional standards including *ASAE 3500 – Performance Engagements*.

Yours sincerely



Ajay Sharma PSM
Auditor-General
30 April 2026

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Summary

The *Carers Recognition Act 2021* (ACT) establishes a set of care relationship principles regarding the treatment of carers. It stipulates that care and carer support agencies, including public sector agencies, have obligations relating to the care relationship principles. The Act also identifies reporting requirements.

The audit considered ACT Government agencies' implementation of the *Carers Recognition Act 2021*. The audit considered:

- the Health and Community Services Directorate's activities to support care and carer support agencies to recognise and implement the *Carers Recognition Act 2021*; and
- a selection of ACT Government agencies, in their capacity as care and carer support agencies, to recognise and implement the *Carers Recognition Act 2021*.

The ACT Government agencies considered for the purpose of the audit were the Education Directorate and Canberra Health Services.



Conclusions

Support for agencies

The Health and Community Services Directorate (HCSD) did not develop a plan for implementing the Act and has not provided effective support for ACT Government agencies and community stakeholders.

The Directorate did not provide information on the obligations of ACT Government agencies to uphold the care relationship principles when implementing policies or to consider the care relationship principles when developing internal human resources policies, nor did the Directorate explicitly identify whether (or which) ACT Government agencies have reporting obligations. The Directorate placed the onus on agencies to identify whether and how the Act applied. Community stakeholders have also advised that communication and education about the Act has been minimal and that an easily identifiable point of contact within the Directorate for support has been lacking.

By not effectively planning for, supporting or managing implementation, there is an increased risk that the Act is not implemented effectively and carers are not recognised or supported in the manner intended by the Act.

Agency practices

Agency practices in response to the obligations specified in the Act have varied. Canberra Health Services (CHS) and the Education Directorate have recognised and implemented support for carers in different ways and to different effect, depending on their operational needs and priorities.

Canberra Health Services has sought to enhance awareness of carers generally as well as staff who are carers, while the Education Directorate has consistently made strong efforts to support young carers within schools.

Canberra Health Services has demonstrated a more proactive and explicit acknowledgement of the Act by integrating the Act into policies, procedures and guidelines and specifically consulting with carers when planning or reviewing support services or programs.



Key findings

Support for agencies

Paragraph

Support for ACT Government agencies

HCSA did not develop a plan for the implementation of the Act. Its activities to implement the Act were managed within existing HCSA resources. HCSA did not provide any education or training to agencies to support implementation. By not effectively planning for, supporting or managing implementation, there is an increased risk that the Act will not be implemented effectively and ACT Government directorates and agencies do not recognise or support carers in the manner intended by the Act. 2.6

In early April 2022, the Director-General of CSD sent a letter to Directors-General advising of the commencement of the Act in June 2022. An Information Sheet accompanied the letter, which included a link to the Act and provided some information about the Act. The Information Sheet did not provide information on the obligations of agencies to uphold the care relationship principles when implementing policies or to consider the care relationship principles when developing internal human resources policies. The Information Sheet also did not explicitly identify whether (or which) ACT Government agencies have reporting obligations. The onus was on agencies to identify whether they had reporting obligations. 2.18

In late April 2022, for the purpose of developing a communications strategy for the implementation of the Act, CSD sought information from the Policy and Service Design team. Information was requested on inter alia 'which agencies are required by the Act to report and consult, and on what matters' and 'what matters are care and carer support agencies required to consult on'. Information was also sought on annual reporting obligations. Advice was provided in return, which indicated that an 2.19

agency that provided ‘universal services’ was unlikely to be a care and carer support agency.

In May 2022, there was a series of meetings of Chief Operating Officers at which questions were raised with respect to the Act and its applicability to directorates and agencies. CSD advised that directorates and agencies should self-assess whether they have obligations. On 10 June 2022 (the date of the Act’s commencement in full), CSD sent further correspondence to Directors-General. The correspondence included inter alia an ‘ACT Gov Directorates Carers Recognition Act background and FAQ’ which provided background on the Act and answers to ‘specific frequently asked questions and answers’ for Government agencies as well as an ‘Information Sheet *Carers Recognition Act 2021*’ which was the same as that which was sent in April 2022. The correspondence did not provide any further clarification as to whether and how the Act applied to agencies. 2.28

The Assistant Minister for Families and Community Services advised the ACT Legislative Assembly on 9 June 2022 that implementation of the Act ‘is a whole-of-government ... responsibility’. On 30 March 2023, the Assistant Minister for Families and Community Services responded to a question on notice with respect to ‘which government agencies are considered care and carer support agencies’. The Assistant Minister advised that all government directorates are considered care and carer support agencies. This was a definitive and explicit statement as to the applicability of the Act, which had not been previously made by CSD. 2.33

There is an ACT Government webpage managed by the Health and Community Services Directorate called ‘Carers Recognition Act: guidance for agencies that provide carer support’. Under the heading ‘Purpose of the Act’, the webpage provides a link to the Act and states that the Act ‘applies to agencies that provide carer support’. The webpage does not provide any further guidance. The webpage does not provide guidance or advice that all ACT Government directorates and agencies are considered to be care and carer support agencies and therefore have obligations under the Act. The webpage also includes a link to a reporting template which provides guidance to agencies on what information to include in annual reports. 2.40

Annual report directions issued by CMTEDD since 2022 have identified requirements for reporting against the Act. Reporting requirements relevant to the Act have been included in Part 4 of the annual report directions, which ‘sets out the reporting requirements on subjects that only apply to ... specific reporting entities’. Referring to the Act in Part 4 signals that that reporting requirement only applies to select directorates and agencies. This is contrary to the position that all government directorates are care and carer support agencies and would therefore have reporting obligations. 2.49

In May 2025, CSD recognised that some agencies remained uncertain about whether they had reporting obligations under the Act. CSD requested that updated guidance material be provided to all directorates and agencies regarding their annual reporting obligations. Guidance was distributed by CMTEDD’s Office of Industrial Relations and Workforce Strategy on 19 May 2025, which noted ‘even if a directorate 2.53

does not deliver carer support, it should still aim to promote and uphold the care relationship principles for its own staff who are carers’.

A review of ACT Government agencies’ reporting on their obligations under the Act shows variability in whether agencies have actually reported as required as well as the sufficiency of their reporting (i.e. whether the reporting was detailed enough to cover most, if not all, prescribed information). Only three directorates (Community Services Directorate, Environment Planning and Sustainable Development Directorate and Chief Minister, Treasury and Economic Development Directorate) have included reporting under the Act in their annual reports since 2021-22. The reporting of two directorates (Canberra Health Services and ACT Health Directorate) has been sufficient to cover most, if not all, prescribed information, since they commenced reporting in 2022-23. 2.61

Support for community agencies

HCSO has sought to educate community organisations about the Act through a variety of mechanisms. In May 2022, a letter and information sheet was sent by the Minister’s office to all community organisations listed on a ‘January 2022 Community Sector email distribution list’ (715 email addresses). This was followed by a ten-minute presentation at a CSD and Community Sector Update meeting. The email invitation was sent to 376 email addresses and there were 159 acceptances to the invite. In June 2025, CSD sent an ACT Community Partner Update newsletter which included a brief news item on ‘NGOs and the Carers Recognition Act’. Community stakeholders have advised the Audit Office that there has been minimal communication and education about the Act and there is no easily identifiable point of contact within HCSO to answer questions about the Act. 2.73

The Act recognises that ACT Government agencies may fund or contract non-government organisations to provide support services or programs that directly impact people in care relationships, i.e. funded support agencies and secondary funded support agencies. When entering into a contract with a funded support agency, it is expected that HCSO would advise the funded support agency of its obligations under sections 10 and 11 of the Act (including with respect to secondary funded support agencies). A review of six high-value contracts that HCSO has with funded support agencies, all of which were executed soon after the Act came into effect, shows that only one of the six contracts referred to the Act. 2.80

Monitoring and review

HCSO does not monitor the implementation of the Act or otherwise monitor the performance of agencies and their compliance with the Act. Some Australian states have carer advisory councils established under their respective carers recognition legislation, which are explicitly tasked with providing an annual report to the Minister on performance and compliance with the Act. The ACT does not have a similar arrangement. 2.87

Agency practices

Planning to implement the Act

Both CHS and the Education Directorate received correspondence about the Act from CSD in April and June 2022. CHS recognised that it had responsibilities under the Act and made plans for implementation in June 2022. On 2 May 2023, an Implementation Plan developed by the People and Culture Branch was approved. The Implementation Plan was clear and actionable because it aligned reporting obligations with actions/evidence and dates for completion. 3.16

The Education Directorate was initially unsure whether it had obligations under the Act and sought confirmation from CSD, which was obtained on 1 June 2022. The Education Directorate identified an intention to develop communications associated with the Act and consult with staff who are carers on the development of human resource management policies. The Education Directorate did not develop an implementation plan with clear and actionable activities. 3.17

Raising awareness and understanding

Both CHS and the Education Directorate have undertaken various activities to raise awareness and understanding of the needs of carers. Since 2023, CHS has sought to enhance awareness and understanding of the care relationship principles, both internally and externally, by developing an information sheet for carers, a factsheet for staff, a staff network with an associated strategy and by promoting National Carers Week. 3.39

The Education Directorate has, since at least 2021, made strong efforts to develop and distribute information about supports for young carers. More recently the Directorate has also sought to raise awareness of the needs of its own staff who are carers. In 2026, the Education Directorate is seeking to establish a Carers Network for its staff and a Parent Intranet Page for staff who are parents. 3.40

Support services, programs and policies

Both CHS and the Education Directorate have sought to recognise and uphold the care relationship principles in ways directly relevant to each organisation. In June 2022, the Strategy and Governance – Policy Team within CHS commenced reviewing and updating policy, procedure and guideline templates to include the Act in related legislation and prompt authors to consider the Act during future document development. CHS also seeks to uphold the care relationship principles in delivering services such as Child and Adolescent Mental Health Services. 3.49

The Education Directorate supports young carers by enabling them to be identified as carers when being enrolled in a school. If a young person identifies as a carer then ‘individual schools will use this information to facilitate conversations with families and to support students at the school/college level’. Various supports and flexible 3.50

arrangements may be implemented as a result. The *Safe and Supportive Schools Policy*, which is an important policy for students and their families, does not mention the Act or include the Act in the list of relevant legislation.

Consultation with carers

CHS has consulted with carers and entities representing carers when planning or reviewing support services and programs. It has done this via a Disability and Carers Staff Network and by seeking direct feedback on policy documents and frameworks from carer organisations such as Carers ACT. The Education Directorate has sought feedback from all staff, staff representatives, unions and other organisations on various plans and guidelines. In doing so, however, the Directorate has not specifically and explicitly sought feedback from carers or entities representing carers. 3.62

CHS specifically consults with carers through two key advisory groups: the Consumer and Carer Advisory Committee and CHS Network Partnering with Consumers Committee. The Advisory Committee seeks to provide ‘advice to Canberra Health Services (CHS) on the quality and safety of health care provided by CHS. This includes providing consumer and carer perspectives on the experience of care as well as planning, design, delivery, measurement, and evaluation of health care’. The Education Directorate has consulted with carer support services as needed on specific issues. 3.71

Human resources policies

Both CHS and the Education Directorate have sought to support staff who are carers in ways directly relevant to each organisation. Both directorates support staff who are carers by virtue of their commitment to flexible working arrangements and ACTPS-wide human resources policies. CHS has a Strengths, Engagement and Development (SED) process for staff performance and development, which asks staff what they need and how work arrangements can be improved. One of the examples provided is to discuss flexible work arrangements for carers with additional responsibilities outside work. The Education Directorate has also recognised the needs of its teachers who may be carers through its *Classroom Teacher Recruitment Guidelines*, which allows for carer responsibilities to be considered in compassionate transfer decisions. 3.84

Evaluation

CHS collects feedback from carers via surveys and, in November 2025, evaluated its own compliance with the Act via a legislative compliance self-assessment. The self-assessment identified nil gaps or actions required. The Education Directorate collects feedback from staff (including carers) via the biennial ACTPS staff survey. It does not specifically monitor or evaluate its compliance with the Act, e.g. through a legislative compliance self-assessment. 3.92



Recommendations

Recommendation 1 Support for ACTPS agencies

The Health and Community Services Directorate should:

- a) ensure that agencies are provided with clear and explicit information in relation to their obligations under the *Carers Recognition Act 2021* and what those obligations are; and
- b) establish processes for the implementation of the Act across the ACTPS, such as providing education and training to agencies and regularly monitoring and tracking progress.

Recommendation 2 Annual report directions

The Chief Minister, Treasury and Economic Development Directorate should revise the annual report directions to require agency reporting on the implementation of the *Carers Recognition Act 2021* under Part 5 of the directions (relating to whole-of-government reporting).

Recommendation 3 Community stakeholder engagement

The Health and Community Services Directorate should:

- a) identify further opportunities to educate community stakeholders on a regular basis about the *Carers Recognition Act 2021*; and
- b) establish and publicise a branch-level point of contact to respond to stakeholder queries about the Act.

Recommendation 4 Funded and secondary funded support agencies

The Health and Community Services Directorate should ensure that all its contracts with funded and secondary funded support agencies reflect the obligations set out in the *Carers Recognition Act 2021*.

Recommendation 5 Planning and managing implementation

The Education Directorate in its capacity as a care and carer support agency should establish an implementation plan for managing the implementation of the *Carers Recognition Act 2021*.

Agencies' response

In accordance with subsection 18(2) of the *Auditor-General Act 1996*, the Health and Community Services Directorate, Education Directorate, Canberra Health Services and Chief Minister, Treasury and Economic Development Directorate were provided with a draft proposed report for comment. All comments in response to the draft proposed report were considered and changes were reflected in a final proposed report.

The directorates were provided with the final proposed report for comment. All comments in response to the final proposed report were considered and changes reflected in a final report. As part of the final proposed report process, agencies were invited to provide comments for inclusion in the Summary chapter of the final report.

The following comments were provided for inclusion in the Summary chapter.

Health and Community Services Directorate

The Health and Community Services Directorate (HCSD) acknowledges the findings and recommendations of the ACT Audit Office's Report (the Report) on the Implementation of the Carers Recognition Act (the Act) since its establishment in 2021.

The Directorate welcomes the audit process as an opportunity to improve its stewardship of the Act and to strengthen the support provided to agencies and community organisations. HCSD notes that it has already implemented, or is in the process of implementing, several findings.

More broadly, HCSD continues to work collaboratively with carers and the community sector to implement the vision of the ACT Carers Strategy of a community that cares for carers and the people they care for.

1 Introduction

Carers

- 1.1 A carer is a person who provides care to another person who: has a disability; has a mental disorder or mental illness; has an ongoing medical condition; is aged and frail; and/or is a child or young person in kinship or foster care.¹
- 1.2 This audit focuses on carers who provide unpaid care and support.² It does not consider people employed to provide care services, either under a contract or as a volunteer.³

Carers in Australia

- 1.3 In 2022, 3.0 million people identified as carers in Australia, representing 11.9 percent of all Australians living in households.⁴
- 1.4 There are likely to be more carers in Australia than is represented in the data. This is because people may provide care but not identify or refer to themselves as a 'carer' for a variety of reasons, including personal, cultural or other reasons.

Value of informal care

- 1.5 A report on the value of informal care, commissioned by Carers Australia and published in 2020, estimated that carers provide nearly 2.2 billion hours of unpaid care each year in Australia.⁵ If this were to be replaced with formal paid care arrangements, it is estimated that it would cost nearly \$80 billion.⁶ In 2020, the national opportunity cost (reflected in the

¹ See subsection 6(1) *Carers Recognition Act 2021* (ACT). The Australian Government *Carer Recognition Act 2010* definition is slightly narrower, defining a carer as someone who provides personal care, support and assistance to another individual who has a disability, a medical condition (including a terminal or chronic illness), a mental illness, or is frail and aged (see section 5).

² See subsection 6(5) *Carers Recognition Act 2021* (ACT), which recognises that carers may receive financial assistance from the Territory or Commonwealth government (such as the Carer Payment, Carer Allowance and Carer Supplement).

³ See subsection 6(4) *Carers Recognition Act 2021* (ACT).

⁴ The Australian Bureau of Statistics' *Disability, Ageing and Carers Australia* survey defines a household as a private home or self-care unit in a retirement village. The survey excludes the 3.3 percent of people with disability and the 4.1 percent of older Australians living in cared-accommodation (such as hospitals, nursing homes and aged care hostels): [Disability, Ageing and Carers, Australia: Summary of Findings, 2022 | Australian Bureau of Statistics](#) (accessed 17 June 2025).

⁵ Deloitte, [The value of informal care in 2020](#), p.19.

⁶ Deloitte, [The value of informal care in 2020](#), p.19.

estimated earnings foregone by carers) was \$15.2 billion, which is equivalent to 0.8 percent of GDP and 10.6 percent of the value of formal health care.⁷

- 1.6 Although the demand for unpaid care is expected to increase, funding to support carers is not expected to grow over the next four decades. Funding is expected to continue to flatline at 0.5 percent of GDP in the period between 2021 and 2061.⁸

Carers with specific characteristics

- 1.7 Carers may also be identified as:

- young carers;
- Aboriginal and/or Torres Strait Islander carers;
- culturally and linguistically diverse carers;
- LGBTIQ+ carers; and
- carers who are people with disability.

- 1.8 Appendix A provides further detail on carers with specific characteristics.

Carers in the Australian Capital Territory

- 1.9 In 2018, the Australian Bureau of Statistics reported that approximately 10 percent of the ACT population (50,200 people) identified as carers.⁹

- 1.10 The 2024 National Carer Survey¹⁰ collected responses from 185 carers in the ACT. Of those carers:

- the mean age was 54.3 years;
- 84.2 percent were female;
- 9.7 percent identified as First Nations; and
- 22.2 percent identified as culturally and linguistically diverse.¹¹

⁷ Deloitte, [The value of informal care in 2020](#), p.25.

⁸ Evaluate, [Final-Economic-impact-income-and-retirement-Evaluate-Report-March-2022.pdf](#), p.23, Figure 5.

⁹ ABS 2018 *Disability, Ageing and Carers, Australia: Summary of Findings* Table 31.1 identified 50,200 people as carers in the ACT. The 2022 update did not include a breakdown by states and territories.

¹⁰ Every two years since 2020, Carers NSW has conducted a *National Carer Survey*, which is funded by the NSW Department of Communities and Justice. The survey is conducted Australia-wide, with the support of State and Territory Carer Organisations, including Carers ACT. [National Carer Survey | Carers NSW](#) (accessed 28 Aug 2025).

¹¹ Carers NSW, [2024 National Carer Survey Summary Report](#), p.66, Table 11: State and Territory sample composition.

Impact of caring

- 1.11 In the ACT, more than 50 percent of carers reported high or very high levels of psychological distress in the National Carer Surveys conducted in 2022 and 2024. These rates of distress were higher than the rates in any other state or territory in Australia (56.5 percent in 2022 and 61.9 percent in 2024).
- 1.12 In January 2023, 12.5 percent of the ACT’s carers reported that they often feel lonely, in contrast to 8.1 percent of the general population of the ACT who report often feeling lonely.¹²
- 1.13 Respite care is an alternative care arrangement for the purpose of providing an organised, temporary break for both the carer and the person they care for. In 2025, 54.7 percent of ACT carers responding to the annual Carer Wellbeing Survey (CWS) said it is difficult to find high quality respite services.¹³ This was the second highest reported percentage of any state or territory in Australia, after the Northern Territory.

Recognition of carers

- 1.14 Carers are described as ‘heroes in our communities’ who frequently sacrifice their own careers, plans and goals to care for others, often with little support, and at considerable financial, social and mental health cost to themselves.¹⁴
- 1.15 One of the biggest challenges for carers is lack of recognition. Carers are not always recognised by service systems and employers. Carers can find it difficult to study or work and they may struggle to be meaningfully included in decisions made about the people they are caring for.

Carers Recognition Act 2021

- 1.16 The *Carers Recognition Act 2021* (the Act) came into effect on 10 June 2022.¹⁵ At that time, the Commonwealth and all other states and territories in Australia (except Tasmania) had a Carers Recognition Act (refer to Appendix B).

¹² ACT Government. (n.d.). ACT Wellbeing Framework. Levels of loneliness. Retrieved from [Levels of loneliness - ACT Wellbeing Framework](#) (accessed 28 Aug 2025).

¹³ This research is partially funded by the Australian Government and conducted in partnership between the University of Canberra, Carers Australia and the Department of Social Services: see [Final-CWS-2024-Report-compressed.pdf](#), publication details and p.2.

¹⁴ [Recognising, valuing and supporting unpaid carers – Parliament of Australia](#) (accessed 9 July 2025), p.iii.

¹⁵ The *Carers Recognition Act 2021* was notified on the ACT Legislation Register on 10 December 2021 which was the date that sections 1, 2 and 16 of the Act became effective. Thus, it was on this date that the Health

Objects of the Act

1.17 The objects of the Act, as set out in section 5, are to:

- a) recognise, promote and value carers and care relationships; and
- b) recognise the different needs of people in care relationships; and
- c) recognise that care relationships benefit the people in those relationships and the community; and
- d) enact care relationship principles relating to the treatment of people in care relationships; and
- e) establish requirements for care and carer support agencies to uphold and report on compliance with the care relationship principles.

Meaning of care relationship

1.18 Subsection 6(1) of the Act defines a 'care relationship' as one in which a carer provides care to another person for one or more of the following reasons:

- a) the other person has a disability;
- b) the other person has a mental disorder or mental illness;
- c) the other person has an ongoing medical condition;
- d) the other person is aged and frail;
- e) the other person is a child or young person, and the carer is a kinship carer or a foster carer for the child or young person.

Meaning of care and carer support agency

1.19 Section 7 of the Act defines four categories of *care and carer support agency* as follows:

- a) a public sector support agency;
- b) a funded support agency;
- c) a secondary funded support agency;
- d) an entity prescribed by regulation.

and Community Services Directorate became the administering directorate. The commencement date for the remaining sections of the Act was 10 June 2022.

Public sector support agency

1.20 The dictionary in the Act defines a *public sector support agency* as ‘a public sector entity that is responsible for the assessment, planning, delivery, management and review of support services, programs or policies in relation to people in care relationships’.

1.21 The meaning of *public sector entity* that is given in the dictionary is:

- (a) the public service;
- (b) an entity that employs public sector members that is—
 - (i) owned or operated by the Territory; or
 - (ii) a territory instrumentality;
- (c) an entity prescribed by regulation.

1.22 The dictionary provides two examples of a *public sector entity*: Canberra Health Services and Transport Canberra.

Funded support agency

1.23 The dictionary in the Act defines a *funded support agency* as ‘an entity that is (a) funded by a public sector support agency; and (b) responsible for providing a support service or program that directly impacts on people in care relationships’.

Secondary funded support agency

1.24 The dictionary in the Act defines a *secondary funded support agency* as ‘an entity contracted or funded by a funded support agency to provide a support service or program for which the funded support agency has responsibility’.

Entity prescribed by regulation

1.25 The *Carers Recognition Regulation 2021* does not prescribe any entities as care and carer support agencies.

Care relationship principles

1.26 Section 8 of the Act defines the ‘care relationship principles’ which relate to the treatment of carers.

1.27 There are eight general principles that relate to the respectful treatment of all carers:

- (1) A carer should—
 - (a) be respected and recognised as—
 - (i) an individual with their own needs; and
 - (ii) a carer; and
 - (iii) someone with knowledge of the person receiving care; and
 - (b) be supported as an individual and as a carer, including during changes to the care relationship; and
 - (c) be recognised for their efforts and dedication, and for the social and economic contribution they make to the community, as a carer; and
 - (d) if appropriate, have their views and cultural identity taken into account, together with the views, cultural identity, needs and interests of the person receiving care, in matters relating to the care relationship; and
 - (e) have their social wellbeing and health recognised in matters relating to the care relationship; and
 - (f) have the effect of their role as a carer on their participation in employment and education recognised and considered in decision-making; and
 - (g) be provided with support that is timely, responsive, appropriate, respectful and accessible;
 - (h) if the carer is receiving support services from a care and carer support agency in relation to the care relationship—
 - (i) be made aware of the care relationship principles by the care and carer support agency; and
 - (ii) have their views considered in the assessment, planning, delivery, management and review of support services, programs or policies relating to the carer and the care relationship.

1.28 There are additional principles that relate to carers with specific characteristics:

- (i) if the carer is a child or young person—
 - (i) be supported to reach their full potential; and
 - (ii) be provided with appropriate support services that take into account the specific needs of children and young people; and
- (j) if the carer is an Aboriginal or Torres Strait Islander person—be provided with culturally appropriate support services that take into account the

history, health and wellbeing of the person and the person's extended family and community; and

- (k) if the carer is an LGBTIQ+ person—be provided with appropriate support services that take into account the specific and unique needs of LGBTIQ+ people; and
- (l) if the carer is culturally and linguistically diverse—be provided with appropriate support services that take into account the specific and unique needs of culturally and linguistically diverse people; and
- (m) if the carer is a person with disability—be provided with appropriate support services that take into account the specific and unique needs of people with disability.

Note A carer may have 1 or more of the characteristics mentioned in paras (i) to (m).

1.29 Section 9 of the Act sets out the 'care relationship principles' which relate to the treatment of people receiving care. It states:

A person receiving care in a care relationship should have their rights as an individual recognised and realised.

Obligations relating to care relationship principles

1.30 Part 4 of the Act defines:

- the obligations of care and carer support agencies relating to the care relationship principles (section 10); and
- the reporting obligations of care and carer support agencies (section 11).

1.31 Subsection 10(1) of the Act requires care and carer support agencies to take all practicable measures to ensure that:

- people are aware of, and understand, the care relationship principles, including an agency's employees and agents, and people in care relationships who are receiving support services from an agency (paragraph 10(1)(a)); and
- the care relationship principles are upheld by the agency and its employees and agents in assessing, planning, delivering, managing or reviewing support services, programs or policies (paragraph 10(1)(b)).

1.32 Subsection 10(2) of the Act states that care and carer support agencies must:

- consult with carers receiving support services from the agency and with an entity representing carers, when planning or reviewing support services and programs (section 10(2)(a)); and
- consider the care relationship principles when developing the agency's internal human resources policies (section 10(2)(b)).

Reporting obligations

1.33 Subsection 11(1) of the Act specifies that:

A care and carer support agency must, in each reporting year for the agency, prepare a report on the agency's compliance with its obligations under section 10.

1.34 The reporting obligations differ depending on the type of care and carer support agency. These differences are summarised in Table 1-1.

Table 1-1 Summary of reporting obligations of care and carer support agencies

Agency	Reporting obligation	Source
Public sector support agency	Must include the report in the agency's annual report for the year.	Paragraph 11(2)(a)
Funded support agency	Must include the report in any reporting document required under the agency's arrangement with the public sector support agency that funds the agency; and make the report publicly available.	Paragraph 11(2)(b)
Secondary funded support agency	Consider making the report publicly available.	Paragraph 11(2)(c)
Entity prescribed by regulation	Nil specified	N/A

Source: ACT Audit Office analysis of Act.

1.35 Overall, the reporting obligations specified in the Act are similar to those specified in the Carers Recognition Acts for the Commonwealth and other states and territories in Australia (except Queensland, which does not have any reporting obligations). A summary of the reporting obligations that exist in other Carers Recognition Acts can be found in Appendix B.

1.36 Subsection 11(3) of the Act states that the report must include any information prescribed by regulation.

Carers Recognition Regulation 2021

1.37 The *Carers Recognition Regulation 2021* (ACT) (the Regulation) was made under the Act and came into effect on 10 June 2022.

1.38 Section 4 of the Regulation sets out the prescribed information that must be included in agency annual reports. The following information is prescribed:

- a) the measures taken by a care and carer support agency to promote the care relationship principles to the wider community and to people in a care relationship who are receiving support services from the agency (section 4(a));

- b) the measures taken by a care and carer support agency to ensure people are aware of and understand the care relationship principles including the agency's employees and agents, and people receiving support services from the agency (section 4(b));
- c) the measures taken by a care and carer support agency and its employees and agents to uphold the care relationship principles in assessing, planning, delivering, managing or reviewing support services, programs and policies in relation to people in care relationships (section 4(c));
- d) a summary of consultation undertaken with carers receiving support services from the agency (or their representatives) when planning or reviewing support services and programs (section 4(d));
- e) a statement about how the agency has incorporated the care relationship principles in the agency's internal human resources policies in relation to employees who are carers (section 4(e)).

1.39 Section 4 of the Regulation provides specific examples of information that would satisfy paragraphs 4 (a), (b) and (c).

Roles and responsibilities

Health and Community Services Directorate

1.40 The Directorate responsible for the Act is the Health and Community Services Directorate (HCSD). Within HCSD, the Strategic Policy Branch is responsible for implementing the Act.

1.41 Prior to July 2025, the Community Services Directorate (CSD) was the administering directorate. In July 2025, the Health Directorate was amalgamated with the Community Services Directorate to become the Health and Community Services Directorate (HCSD). The audit report refers to CSD activities prior to July 2025, while current and future activities and/or recommendations are made with reference to HCSD.

Audit objective and scope

Audit objective

1.42 The objective of the audit was to assess the effectiveness of ACT Government agencies' implementation of the *Carers Recognition Act 2021*.

Audit scope

1.43 The audit included consideration of:

- the Health and Community Services Directorate's activities to support care and carer support agencies to recognise and implement the *Carers Recognition Act 2021*; and
- a selection of ACT Government agencies, in their capacity as care and carer support agencies, to recognise and implement the *Carers Recognition Act 2021*.

Audit focus

Health and Community Services Directorate support for the implementation of the Act

1.44 The Health and Community Services Directorate (HCSD) is the administering Directorate of the Act. The audit considered HCSD's activities and processes to:

- plan for, and manage, the implementation of the Act;
- support care and carer support agencies to meet their obligations under the Act, including:
 - ACT Government agencies in their capacity as care and carer support agencies; and
 - funded support agencies and secondary funded support agencies; and
- oversee and monitor the implementation of the Act.

1.45 In considering the Health and Community Services Directorate's activities to support care and carer support agencies to meet their obligations under the Act, the audit considered activities to:

- inform care and carer support agencies of their obligations; and
- provide guidance to care and carer support agencies and their staff on their obligations.

ACT Government agencies' implementation of the Act

1.46 The audit recognises that some ACT Government agencies have specific responsibilities under the Act as care and carer support agencies. The audit considered two agencies' recognition and implementation of the Act:

- Canberra Health Services; and
- Education Directorate.

1.47 The audit considered these agencies' activities to:

- recognise and implement their obligations relating to the care relationship principles as set out in section 10 of the Act, including by:

- promoting the care relationship principles;
 - upholding the care relationship principles in assessing, planning, delivering, managing or reviewing support services, programs or policies;
 - consulting with carers or their representatives; and
 - reflecting the care relationship principles in internal human resources policies; and
- meeting their reporting obligations as set out in section 11 of the Act.

Out of scope

1.48 The audit did not consider:

- the effectiveness of support programs and services for carers; or
- the adequacy of funding arrangements for carer recognition and support programs by ACT Government agencies.

Audit criteria, approach and method

Audit criteria

1.49 To form a conclusion against the objective, the following criteria and sub-criteria were used:

1.50 **Criterion 1** – Has the Health and Community Services Directorate effectively supported care and carer support agencies to recognise and implement the *Carers Recognition Act 2021*?

- Has HCSD effectively planned for, and managed, the implementation of the *Carers Recognition Act 2021* across the ACT Public Service?
- Has HCSD effectively sought and considered the views and needs of community stakeholders in implementing the *Carers Recognition Act 2021*?
- Has HCSD effectively supported funded support agencies and secondary funded support agencies to meet their obligations under the *Carers Recognition Act 2021*?
- Has HCSD effectively monitored and reviewed the implementation of the *Carers Recognition Act 2021*?

1.51 **Criterion 2** – Have ACT Government agencies, in their capacity as a care and carer support agencies, effectively recognised and implemented the *Carers Recognition Act 2021*?

- Have ACT Government agencies effectively planned for, and managed, the implementation of the *Carers Recognition Act 2021*?
- Have ACT Government agencies effectively sought and considered the views and needs of community stakeholders in implementing the *Carers Recognition Act 2021*?

- Are ACT Government agencies compliant with reporting obligations set out in section 11 of the *Carers Recognition Act 2021*?

Audit approach and method

1.52 The audit adopted the Office's Performance Audit Methods and Practices (PAMPr) and related Policies, Practice Statements and Guidance Papers. These policies and practices have been designed to comply with the requirements of the *Auditor-General Act 1996* and relevant professional standards (including *ASAE 3500 – Performance Engagements*).

1.53 Auditing Standard ASAE 3500 requires that an audit consider events up to the date of the report. To achieve this, the audit team has, when seeking comments on the draft report, asked the agencies to inform the team of any significant events affecting audit findings since fieldwork ceased.

1.54 The audit approach and method consisted of:

- researching, reviewing and examining:
 - legislation, law history, Hansard records, cabinet documents;
 - strategies and action plans relevant to ACT carers;
 - standing committee reports (ACT and federal);
 - webpage and reporting template;
 - annual reports of various agencies and annual report directions;
 - contracts between HCSD and funded support agencies;
 - documents provided by HCSD in response to audit criteria; and
 - documents provided by Education and Canberra Health Services in response to audit criteria.
- Identifying and assessing:
 - processes undertaken by HCSD to support care and carer support agencies;
 - procedures in place to support ACT Government agencies to implement the Act;
 - processes used by HCSD, Education and CHS to engage with community stakeholders;
 - processes and procedures within Education and CHS that relate to planning and managing implementation and complying with reporting obligations; and
 - carers data and survey reports (both local and national).

1.55 The audit also involved conducting interviews with:

- staff from HCSD (Strategic Policy Branch);
- staff from the Education Directorate (People and Performance Branch; Communications, Engagement and Government Support Branch; Education Programs and Services Branch); and
- staff from CHS (Quality, Safety and Governance Division; People and Culture Division).

1.56 The audit also involved consulting with:

- community stakeholders; and
- staff from Mental Health, Justice Health and Alcohol and Drug Service (MHJHADS) and Child and Adolescent Mental Health Service (CAMHS) at CHS.

2 Support for agencies

- 2.1 This chapter discusses the activities of the Health and Community Services Directorate to support care and carer support agencies recognise and implement the *Carers Recognition Act 2021*.



Conclusions

The Health and Community Services Directorate (HCSD) did not develop a plan for implementing the Act and has not provided effective support for ACT Government agencies and community stakeholders.

The Directorate did not provide information on the obligations of ACT Government agencies to uphold the care relationship principles when implementing policies or to consider the care relationship principles when developing internal human resources policies, nor did the Directorate explicitly identify whether (or which) ACT Government agencies have reporting obligations. The Directorate placed the onus on agencies to identify whether and how the Act applied. Community stakeholders have also advised that communication and education about the Act has been minimal and that an easily identifiable point of contact within the Directorate for support has been lacking.

By not effectively planning for, supporting or managing implementation, there is an increased risk that the Act is not implemented effectively and carers are not recognised or supported in the manner intended by the Act.



Key findings

Support for ACT Government agencies

Paragraph

HCSD did not develop a plan for the implementation of the Act. Its activities to implement the Act were managed within existing HCSD resources. HCSD did not provide any education or training to agencies to support implementation. By not effectively planning for, supporting or managing implementation, there is an increased risk that the Act will not be implemented effectively and ACT Government directorates and agencies do not recognise or support carers in the manner intended by the Act.

2.6

In early April 2022, the Director-General of CSD sent a letter to Directors-General advising of the commencement of the Act in June 2022. An Information Sheet accompanied the letter, which included a link to the Act and provided some information about the Act. The Information Sheet did not provide information on the obligations of agencies to uphold the care relationship principles when implementing policies or to consider the care relationship principles when developing internal human resources policies. The Information Sheet also did not explicitly identify whether (or which) ACT Government agencies have reporting

2.18

obligations. The onus was on agencies to identify whether they had reporting obligations.

In late April 2022, for the purpose of developing a communications strategy for the implementation of the Act, CSD sought information from the Policy and Service Design team. Information was requested on inter alia 'which agencies are required by the Act to report and consult, and on what matters' and 'what matters are care and carer support agencies required to consult on'. Information was also sought on annual reporting obligations. Advice was provided in return, which indicated that an agency that provided 'universal services' was unlikely to be a care and carer support agency. 2.19

In May 2022, there was a series of meetings of Chief Operating Officers at which questions were raised with respect to the Act and its applicability to directorates and agencies. CSD advised that directorates and agencies should self-assess whether they have obligations. On 10 June 2022 (the date of the Act's commencement in full), CSD sent further correspondence to Directors-General. The correspondence included inter alia an 'ACT Gov Directorates Carers Recognition Act background and FAQ' which provided background on the Act and answers to 'specific frequently asked questions and answers' for Government agencies as well as an 'Information Sheet *Carers Recognition Act 2021*' which was the same as that which was sent in April 2022. The correspondence did not provide any further clarification as to whether and how the Act applied to agencies. 2.28

The Assistant Minister for Families and Community Services advised the ACT Legislative Assembly on 9 June 2022 that implementation of the Act 'is a whole-of-government ... responsibility'. On 30 March 2023, the Assistant Minister for Families and Community Services responded to a question on notice with respect to 'which government agencies are considered care and carer support agencies'. The Assistant Minister advised that all government directorates are considered care and carer support agencies. This was a definitive and explicit statement as to the applicability of the Act, which had not been previously made by CSD. 2.33

There is an ACT Government webpage managed by the Health and Community Services Directorate called 'Carers Recognition Act: guidance for agencies that provide carer support'. Under the heading 'Purpose of the Act', the webpage provides a link to the Act and states that the Act 'applies to agencies that provide carer support'. The webpage does not provide any further guidance. The webpage does not provide guidance or advice that all ACT Government directorates and agencies are considered to be care and carer support agencies and therefore have obligations under the Act. The webpage also includes a link to a reporting template which provides guidance to agencies on what information to include in annual reports. 2.40

Annual report directions issued by CMTEDD since 2022 have identified requirements for reporting against the Act. Reporting requirements relevant to the Act have been included in Part 4 of the annual report directions, which 'sets out the reporting requirements on subjects that only apply to ... specific reporting entities'. Referring to the Act in Part 4 signals that that reporting requirement only applies to select 2.49

directorates and agencies. This is contrary to the position that all government directorates are care and carer support agencies and would therefore have reporting obligations.

In May 2025, CSD recognised that some agencies remained uncertain about whether they had reporting obligations under the Act. CSD requested that updated guidance material be provided to all directorates and agencies regarding their annual reporting obligations. Guidance was distributed by CMTEDD's Office of Industrial Relations and Workforce Strategy on 19 May 2025, which noted 'even if a directorate does not deliver carer support, it should still aim to promote and uphold the care relationship principles for its own staff who are carers'.

2.53

A review of ACT Government agencies' reporting on their obligations under the Act shows variability in whether agencies have actually reported as required as well as the sufficiency of their reporting (i.e. whether the reporting was detailed enough to cover most, if not all, prescribed information). Only three directorates (Community Services Directorate, Environment Planning and Sustainable Development Directorate and Chief Minister, Treasury and Economic Development Directorate) have included reporting under the Act in their annual reports since 2021-22. The reporting of two directorates (Canberra Health Services and ACT Health Directorate) has been sufficient to cover most, if not all, prescribed information, since they commenced reporting in 2022-23.

2.61

Support for community agencies

HCSO has sought to educate community organisations about the Act through a variety of mechanisms. In May 2022, a letter and information sheet was sent by the Minister's office to all community organisations listed on a 'January 2022 Community Sector email distribution list' (715 email addresses). This was followed by a ten-minute presentation at a CSD and Community Sector Update meeting. The email invitation was sent to 376 email addresses and there were 159 acceptances to the invite. In June 2025, CSD sent an ACT Community Partner Update newsletter which included a brief news item on 'NGOs and the Carers Recognition Act'. Community stakeholders have advised the Audit Office that there has been minimal communication and education about the Act and there is no easily identifiable point of contact within HCSO to answer questions about the Act.

2.73

The Act recognises that ACT Government agencies may fund or contract non-government organisations to provide support services or programs that directly impact people in care relationships, i.e. funded support agencies and secondary funded support agencies. When entering into a contract with a funded support agency, it is expected that HCSO would advise the funded support agency of its obligations under sections 10 and 11 of the Act (including with respect to secondary funded support agencies). A review of six high-value contracts that HCSO has with funded support agencies, all of which were executed soon after the Act came into effect, shows that only one of the six contracts referred to the Act.

2.80

Monitoring and review

HCSO does not monitor the implementation of the Act or otherwise monitor the performance of agencies and their compliance with the Act. Some Australian states have carer advisory councils established under their respective carers recognition legislation, which are explicitly tasked with providing an annual report to the Minister on performance and compliance with the Act. The ACT does not have a similar arrangement. 2.87

Support for ACT Government agencies

Planning for implementation

2.2 The Better Practice Guide to Successful Implementation of Policy Initiatives states:¹⁶

The likelihood of effective cross-entity implementation is greater when there is an overarching, high-level implementation plan that is coordinated by a nominated lead entity and contains clearly defined critical cross-entity dependencies and responsibilities.

It is vital that there is a clear and commonly understood identification of key elements of shared implementation planning. These elements may include: governance and decision-making arrangements; possible resource and scheduling constraints; risk management strategies; shared funding arrangements; the procurement and management of contracts; and monitoring, evaluation and reporting responsibilities.

2.3 HCSO did not develop a plan for the implementation of the Act. Activities associated with planning for the implementation of the Act were outlined in a 28 February 2022 document titled 'Advice to EGM [Executive Group Manager] re Carers Recognition Act 2021'. The document referred to:

- a letter and Information Sheet to inform community sector organisations of the commencement of the Act;
- a letter to Directors-General of other directorates advising them of the Act; and
- a proposed meeting between CSD, Carers ACT and the Minister's Office to discuss the 'potential role of Carers ACT in supporting implementation of the ... Act'.

Managing implementation

2.4 There was no dedicated funding or resources in HCSO to support the implementation of the Act. This work was, and continues to be, managed within existing staffing resources.

¹⁶ Australian National Audit Office and Department of the Prime Minister and Cabinet, *Better Practice Guide: Successful Implementation of Policy Initiatives* (October 2014), p.46.

2.5 There were also no dedicated resources allocated to other ACT Government directorates and agencies to support the implementation of the Act. In this respect, HCSD did not provide any education or training to agencies to support implementation.



2.6 HCSD did not develop a plan for the implementation of the Act. Its activities to implement the Act were managed within existing HCSD resources. HCSD did not provide any education or training to agencies to support implementation. By not effectively planning for, supporting or managing implementation, there is an increased risk that the Act will not be implemented effectively and ACT Government directorates and agencies do not recognise or support carers in the manner intended by the Act.

Informing agencies of their obligations as care and carer support agencies

CSD letter to agencies (April 2022)

2.7 On 4 April 2022, the Director-General of CSD sent a letter to the Head of Service and each of the Directors-General of CMTEDD, Education, EPSDD, Health, JACS and TCCS as well as the Chief Executive Officer of CHS, Chief Projects Officer of MPC, Work Health and Safety Commissioner and Chief Executive of CIT. The letter advised agencies that the Act would commence on 10 June 2022.

2.8 The letter stated:

An ACT Government directorate is included in the definition of ‘care and carer support agency’ if it is responsible for the assessment, planning, delivery, management and review of support services, programs or policies for people in care relationships.

2.9 The letter did not state whether the specific agency being addressed in the letter was a care and carer support agency.

2.10 The letter referred to an attached Information Sheet which ‘provides further information on obligations and reporting requirements established by the Carers Recognition Act’.

Information Sheet

2.11 The Information Sheet included a link to the Act and a summary of the Act’s purpose. Under the heading ‘Who does the legislation apply to?’ the Information Sheet stated:

The Carers Recognition Act establishes obligations for ‘care and carer support agencies’. These are entities that provide or administer support services ‘in relation to’ people in care relationships, and can be:

- an ACT Government directorate that manages or delivers support for people in a care relationship, or
- a non-government agency providing support to people in a care relationship.

2.12 Under the heading ‘ACT Government directorates’ the Information Sheet stated:

Obligations established under the Carers Recognition Act apply to any ACT Government directorate that is responsible for the assessment, planning, delivery, management and review of support services, programs or policies in relation to people in care relationships. Relevant ACT Government directorates must include information in their Annual Report demonstrating their compliance with obligations under the Carers Recognition Act. This reporting is to be done at the directorate level.

2.13 With respect to ‘Obligations relating to care relationship principles’, the Information Sheet summarised the obligation to raise awareness and understanding and consult with carers.¹⁷ The Information Sheet did not provide information on the obligations of agencies to uphold the care relationship principles when planning, implementing and reviewing relevant policies or to consider the care relationship principles when developing internal human resources policies.¹⁸

2.14 Under the heading ‘Reporting obligations’, the Information Sheet summarised the reporting obligations set out in the Regulation. The Information Sheet said that ‘a ‘care and carer support agency’ must report’. The Information Sheet did not explicitly identify whether (or which) ACT Government agencies have reporting obligations. The onus was on agencies to identify whether they had reporting obligations.

Development of a communications strategy

2.15 To assist ‘with a communications strategy for implementation’, CSD sought advice from the Policy and Service Design team on 21 April 2022. The request indicated that CSD was ‘looking to have a comms strategy drafted by mid-May, to enable comms before the 10 June commencement of the Act’. CSD sought advice on:

- Which agencies are required by the Act to report and consult, and on what matters?
- What matters are care and carer support agencies required to consult on?
- Whether the Act prescribes the approach to reporting in Annual Reports? Would centralised reporting be inconsistent with the Act? For example, could CMTEDD report on behalf of all ACT Government Directorates in its Annual Report?
- Whether the Act is enforceable? What could happen if an agency failed to comply with an obligation?

2.16 Email advice was provided to CSD on 26 April 2022:

An entity which provides “universal services” (TCCS, ACT Libraries, ACT Policing) is **not** likely to be a “care and carer support agency”:

¹⁷ *Carers Recognition Act 2021*, s10(1)(a) and s10(2)(a).

¹⁸ *Carers Recognition Act 2021*, s10(1)(b) and s10(2)(b).

- o their services or programs are unlikely to be characterised as being “support services or programs”;
- o their funding is unlikely to be sourced from an agency with responsibility for “support services or programs”.

However, that conclusion might change if, for example, the entity was provided with specific funding by a relevant agency.

2.17 Subsequent email communication in response to the advice indicated that it would be ‘good to talk some of the issues through’ but no further meeting was held to discuss the advice.



2.18 In early April 2022, the Director-General of CSD sent a letter to Directors-General advising of the commencement of the Act in June 2022. An Information Sheet accompanied the letter, which included a link to the Act and provided some information about the Act. The Information Sheet did not provide information on the obligations of agencies to uphold the care relationship principles when implementing policies or to consider the care relationship principles when developing internal human resources policies. The Information Sheet also did not explicitly identify whether (or which) ACT Government agencies have reporting obligations. The onus was on agencies to identify whether they had reporting obligations.



2.19 In late April 2022, for the purpose of developing a communications strategy for the implementation of the Act, CSD sought information from the Policy and Service Design team. Information was requested on inter alia ‘which agencies are required by the Act to report and consult, and on what matters’ and ‘what matters are care and carer support agencies required to consult on’. Information was also sought on annual reporting obligations. Advice was provided in return, which indicated that an agency that provided ‘universal services’ was unlikely to be a care and carer support agency.

Cross-directorate meeting of Chief Operating Officers

2.20 On 3 May 2022, at a monthly meeting of Chief Operating Officers from directorates, CSD was ‘asked several questions’ about the Act and the April 2022 letter from the Director-General of CSD. Correspondence within CSD subsequent to the meeting noted:

All Directorates are in receipt of the letter from our DG and many of the COO have been asked to provide advice on obligations.

Several Directorates asked questions about the Carers Recognition Act advice and [fact] sheets.

For the meeting on 24 May 2022 – would you please provide some talking points...and some worked examples for Directorates – specifically EPSDD and TCCS – both Directorates asked [CSD] to elaborate on their obligations.

2.21 On 24 May 2022 a meeting was held with the Chief Operating Officers to discuss agency obligations under the Act. The talking points for the meeting, which were prepared by the

Strategic Policy team within CSD, indicate that the Act is ‘unclear’ and that directorates should decide on their own approach:

The Act has a sound and positive purpose but is unclear as a legal document.

It is particularly unclear about what organisations have responsibilities and obligations.

CSD has based the guidance on what appears to be the ‘intent’ of the Act, and on providing flexibility to directorates and non-government organisations to determine the approach that works best for them.

2.22 Under the heading ‘Government agencies with obligations’, the talking points state that directorates have obligations if they employ people who are carers:

The intent appears to be (and logic suggests) that government directorates and agencies that employ people who are carers have obligations:

- to uphold the care relationships principles
- and report annually on how they consider the care relationship principles in their human resources policies.

Some directorates (primarily human services directorates) also have obligations that stem from their responsibility for services and programs in relation to people in care relationships.

CSD letter to agencies (June 2022)

2.23 On 27 May 2022, the Executive Group Manager of Strategic Policy sent a Director-General Brief to the Acting Director-General of CSD, noting that the Act was scheduled to commence in full on 10 June 2022. The brief advised that ‘[o]bligations for relevant agencies take effect from this date’.

2.24 The Executive Brief advised that agencies should self-determine whether they have obligations under the Act, but in doing so observed that this was a risk:

The Act provides limited clarity about who is and is not a care and carer support agency. Therefore, the information and communication package is based on CSD’s understanding of the intent of the Act and supports agencies to self-determine whether they have obligations under the Act. There is a risk that this may be regarded as insufficient by some stakeholders.

2.25 The Executive Brief recommended that the Acting Director-General approve a communication and information package for the implementation of the Act and approve and sign letters to Directors-General and agency heads. On 9 June 2022, the Acting Director-General approved the Executive Brief’s recommendations.

2.26 On 10 June 2022 (the date of the Act’s commencement in full), CSD sent correspondence to the Directors-General of CMTEDD, Education, EPSDD, Health, JACS and TCCS as well as the Chief Executive Officer of CHS, Chief Projects Officer of MPC, Work Health and Safety Commissioner and Chief Executive of CIT.

2.27 Attached to each letter was:

- an 'ACT Gov Directorates Carers Recognition Act background and FAQ' which provided background on the Act and answers to 'specific frequently asked questions and answers' for Government agencies;
- a 'Non-government orgs Carers Recognition Act background and FAQ' attachment which contained substantially the same information as was provided to Government agencies;
- an 'Information Sheet *Carers Recognition Act 2021*' (identical to the Information Sheet sent with the letters in April 2022);
- a 'Letter template from directorates to care and carer support agencies'; and
- a 'Carer Recognition Act reporting template and tips'.



2.28 In May 2022, there was a series of meetings of Chief Operating Officers at which questions were raised with respect to the Act and its applicability to directorates and agencies. CSD advised that directorates and agencies should self-assess whether they have obligations. On 10 June 2022 (the date of the Act's commencement in full), CSD sent further correspondence to Directors-General. The correspondence included inter alia an 'ACT Gov Directorates Carers Recognition Act background and FAQ' which provided background on the Act and answers to 'specific frequently asked questions and answers' for Government agencies as well as an 'Information Sheet *Carers Recognition Act 2021*' which was the same as that which was sent in April 2022. The correspondence did not provide any further clarification as to whether and how the Act applied to agencies.

Legislative Assembly updates (June 2022 to March 2023)

9 June 2022

2.29 On 9 June 2022, just before the Act commenced in full on 10 June 2022, the Assistant Minister for Families and Community Services provided an update on the implementation of the Act to the Legislative Assembly:

This is a whole-of-government and a whole-of-community responsibility. That is why the ACT government has been working closely with Carers ACT to develop and communicate support materials, like information sheets and reporting templates and frameworks, to help support carer support agencies, whether they are in the government or the non-government sector, to assist them with compliance and reporting against the act. That will also assist with any future reviews of the ACT.

I have written to carer support agencies to inform them that the Carers Recognition Act has commenced, to remind them of their obligations to carers under the act and also to encourage them to see the act as an opportunity to be more inclusive of carers. I am hoping that that provides some useful information on where we are at.

August 2022

- 2.30 On 15 August 2022, the Assistant Minister for Families and Community Services advised the Legislative Assembly that they had written to community organisations:

On 16 May 2022, I wrote to more than 700 representatives from the ACT community sector, informing them about the Carers Recognition Act 2021. The email had attached an information sheet outlining the purpose of the legislation and obligations for care and carer support agencies.¹⁹

March 2023

- 2.31 On 29 March 2023, in response to a question about what ‘work has been undertaken to make sure agencies are aware of and able to meet their reporting obligations?’ the Assistant Minister for Families and Community Services referred to the Information Sheet:

In terms of making sure that agencies are working on how they can implement the Carers Recognition Act, the ACT government has developed an information sheet to support carer support agencies, both government and non-government organisations, to meet their obligations under the Carers Recognition Act. On 16 May last year I wrote to more than 700 representatives from the ACT community sector, informing them of the passing of the act. In my letter, I provided an information sheet outlining the purpose of the legislation and the obligations for care and carer support agencies. That information sheet is publicly available. The government is also considering what additional supports could be made available.²⁰

- 2.32 On 30 March 2023, the Assistant Minister for Families and Community Services responded to a question on notice with respect to ‘which government agencies are considered care and carer support agencies’. The Assistant Minister advised that all government directorates are considered care and carer support agencies:

During question time yesterday I took a question on notice ... regarding which government agencies are considered care and carer support agencies. I can confirm that all government directorates are considered care or carer support agencies, which is why, as I was saying yesterday, the Director-General of the Community Services Directorate wrote to all directors-general informing them of the passing of the Carers Recognition Act and their obligations under the act and provided their directorates with support information.²¹



- 2.33 The Assistant Minister for Families and Community Services advised the ACT Legislative Assembly on 9 June 2022 that implementation of the Act ‘is a whole-of-government ... responsibility’. On 30 March 2023, the Assistant Minister for Families and Community Services responded to a question on notice with respect to ‘which government agencies are considered care and carer support agencies’. The Assistant Minister advised that all government directorates are considered care and carer support agencies. This was a

¹⁹ ACT Legislative Assembly, *Hansard* – 15 August 2022, pp.2582-3.

²⁰ ACT Legislative Assembly, *Hansard* - 29 March 2023, p.867.

²¹ ACT Legislative Assembly, *Hansard* – 30 March 2023, p.976.

definitive and explicit statement as to the applicability of the Act, which had not been previously made by CSD.

Webpage

- 2.34 There is an ACT Government webpage managed by the Health and Community Services Directorate called 'Carers Recognition Act: guidance for agencies that provide carer support'.²² The webpage went live on the CSD website on 10 June 2022, to coincide with the commencement of the Act. CSD advised that in January 2023 the webpage was accidentally missed in the migration to a new act.gov.au website. Consequently, the webpage was unavailable in the six-month period between February and August 2024. The webpage was most recently updated on 2 July 2025.
- 2.35 Under the heading 'Purpose of the Act', the webpage provides a link to the Act and states that the Act 'applies to agencies that provide carer support'. The webpage does not provide any further guidance. The webpage does not provide guidance or advice that all ACT Government directorates and agencies are considered to be care and carer support agencies and therefore have obligations under the Act.
- 2.36 The webpage states that agencies that provide carer support should 'respond in 3 ways: raise awareness, consult with carers, and report annually'. The webpage does not state that all agencies are also obliged to uphold the care relationship principles in relation to support services, programs or policies.²³
- 2.37 Under the heading 'care relationship principles', the webpage provides a five dot-point summary of the thirteen care relationship principles. The dot-point summary does not mention important care relationship principles such as the principle that carers should 'be provided with support that is timely, responsive, appropriate, respectful and accessible'.²⁴
- 2.38 Under the subheading 'ACT Government directorates' the webpage states:

The Act applies to ACT Government directorates and agencies that either or both:

- develop policies or programs for people in a care relationship
- fund other organisations to provide programs or services.

Directorates should consider the principles when drafting their human resources policies. This includes making sure staff who are carers know how their workplace can support them.

²² [Carers Recognition Act: guidance for agencies that provide carer support - ACT Government](#) (accessed 18 Sept 2025).

²³ *Carers Recognition Act 2021*, s10(1)(b).

²⁴ *Carers Recognition Act 2021*, s8(1)(g).

2.39 The webpage includes a summary of the reporting obligations and states that ‘ACT Government directorates and agencies should describe in their annual report how they complied with the Act’. The webpage includes a link to a reporting template which provides guidance to agencies on what information to include in annual reports.



2.40 There is an ACT Government webpage managed by the Health and Community Services Directorate called ‘Carers Recognition Act: guidance for agencies that provide carer support’. Under the heading ‘Purpose of the Act’, the webpage provides a link to the Act and states that the Act ‘applies to agencies that provide carer support’. The webpage does not provide any further guidance. The webpage does not provide guidance or advice that all ACT Government directorates and agencies are considered to be care and carer support agencies and therefore have obligations under the Act. The webpage also includes a link to a reporting template which provides guidance to agencies on what information to include in annual reports.



Recommendation 1

Support for ACTPS agencies

The Health and Community Services Directorate should:

- a) ensure that agencies are provided with clear and explicit information in relation to their obligations under the *Carers Recognition Act 2021* and what those obligations are; and
- b) establish processes for the implementation of the Act across the ACTPS, such as providing education and training to agencies and regularly monitoring and tracking progress.

Informing agencies of their annual reporting obligations

2.41 The annual reporting obligations of care and carer support agencies are set out in section 4 of the Regulation. The ACT Government webpage (currently managed by the HCSD) has a downloadable reporting template.²⁵

2.42 The reporting template accurately summarises the annual reporting obligations but does not include examples (as the Regulation does in Section 4) of the types of activities that should be reported.

²⁵ [Carer Recognition Act - reporting template](#) (accessed 17 June 2025).

Queries from agencies about annual reporting obligations

2.43 In 2022, two agencies were not clear about their reporting obligations and sought advice from CSD:

- on 22 June 2022, Housing ACT emailed CSD asking whether agencies will be provided with a reporting template and what information is required. On 28 June 2022, CSD replied, providing a link to the Act, guidance material and the reporting template and helpful tips document; and
- on 6 July 2022, CSD received a query from the Governance, Compliance and Legal Branch within EPSDD about the directorate's obligations under the Act. CSD sent a copy of the 'ACT Gov Directorates – Carers Recognition Act-background and FAQ' document.

Annual report directions

2.44 CMTEDD is the directorate responsible for issuing annual report directions.²⁶ These directions give effect to the *Annual Reports (Government Agencies) Act 2004* and mandate what information ACT Government agencies must include in their annual reports.

2.45 Annual report directions issued by CMTEDD since 2022 have identified requirements for reporting against the Act, as shown in Table 2-1.

Table 2-1 Annual report directions (2022 to 2025)

Title/Year	Part	Page	Link
Annual Reports (Government Agencies) Directions 2022	Part 4	Pages 33-34	https://www.legislation.act.gov.au/ni/2022-308/
Annual Reports (Government Agencies) Directions 2023	Part 4	Pages 34-35	https://www.legislation.act.gov.au/ni/2023-272/
Annual Reports (Government Agencies) Directions 2024	Part 4	Page 38	https://www.legislation.act.gov.au/ni/2024-175/
Annual Reports (Government Agencies) Directions 2025 (No 1)	Part 4	Page 40	https://www.legislation.act.gov.au/ni/2025-240/

Source: Annual Reports (Government Agencies) Directions 2022-2025.

2.46 Table 2-1 indicates that, since 2022, reporting requirements relevant to the Act have been included in Part 4 of the annual report directions.

²⁶ [Annual Reports \(Government Agencies\) Act 2004 | Acts](#) (accessed 12 August 2025).

2.47 Part 4 ‘sets out the reporting requirements on subjects that only apply to...specific reporting entities’.²⁷ Referring to the Act in Part 4 signals that that reporting requirement only applies to select agencies, not all agencies.

2.48 Part 5 of the annual report directions deals with whole-of-government reporting requirements, such as reporting requirements relevant to the *Human Rights Act 2004*. Part 5 sets out:

Information on multi-directorate initiatives and allows for a coordinating directorate to present particular information in the one place on behalf of the ACT Government’s ‘one government’ approach.



2.49 Annual report directions issued by CMTEDD since 2022 have identified requirements for reporting against the Act. Reporting requirements relevant to the Act have been included in Part 4 of the annual report directions, which ‘sets out the reporting requirements on subjects that only apply to ... specific reporting entities’. Referring to the Act in Part 4 signals that that reporting requirement only applies to select directorates and agencies. This is contrary to the position that all government directorates are care and carer support agencies and would therefore have reporting obligations.

Updated guidance (May 2025)

2.50 On 8 May 2025, a Senior Director in the Human Services Policy Branch prepared a brief for the Executive Group Manager of Strategic Policy within CSD, requesting clearance of updated guidance material to support reporting under the Act. The brief stated:

The ACT Government has a whole-of-government responsibility for upholding the care relationship principles, even for directorates that do not provide targeted carer services.

2.51 The brief recommended that the Executive Group Manager of Strategic Policy within CSD:

- agree to publish updated material about the Act on the ACT Government website;
- note the guidance material on reporting under the Act for distribution to ACT Government directorates and non-government organisations respectively; and
- note that the Chief Minister, Treasury and Economic Development Directorate will distribute an email to ACT Government directorates and other entities that report in parallel with ACT Government annual reporting.

2.52 On 19 May 2025, the Office of Industrial Relations and Workforce Strategy in CMTEDD sent an email to all ACT Government directorates, which included information provided by CSD ‘to support annual reporting obligations under the Carers Recognition Act 2021’. The email

²⁷ *Annual Reports (Government Agencies) Directions 2025 (No 1)*, p.38.

attached a 'Guide for ACT Government Directorates – Carers Recognition Act'. The Guide said:

All ACT Government directorates should comply with the Carers Recognition Act

The Carers Recognition Act applies to certain public sector entities, including ACT Government directorates and agencies that:

- provide policies, programs or services targeted to people in a care relationship and/or
- fund other organisations to provide such programs or services.

The ACT Government has a shared responsibility for upholding the care relationship principles. Even if a directorate does not deliver carer support, it should still aim to promote and uphold the care relationship principles for its own staff who are carers.²⁸



2.53 In May 2025, CSD recognised that some agencies remained uncertain about whether they had reporting obligations under the Act. CSD requested that updated guidance material be provided to all directorates and agencies regarding their annual reporting obligations. Guidance was distributed by CMTEDD's Office of Industrial Relations and Workforce Strategy on 19 May 2025, which noted 'even if a directorate does not deliver carer support, it should still aim to promote and uphold the care relationship principles for its own staff who are carers'.



Recommendation 2 Annual report directions

The Chief Minister, Treasury and Economic Development Directorate should revise the annual report directions to require agency reporting on the implementation of the *Carers Recognition Act 2021* under Part 5 of the directions (relating to whole-of-government reporting).

Compliance with reporting obligations

Recognition of reporting

2.54 The audit considered ACT Government agencies' reporting under the Act. The results of this analysis are shown in Table 2-2.

²⁸ It is noted that the updated and explicit guidance caused the Education Directorate to commence reporting on its obligations under the Act in its *Annual Report 2024-2025*.

Table 2-2 ACT Government agencies reporting (2021-22 to 2024-25)

Agency	2021-2022	2022-2023	2023-2024	2024-2025
Canberra Health Services	No	Yes	Yes	Yes
Education Directorate	No	No	No	Yes
Community Services Directorate	Yes	Yes	Yes	Yes
ACT Health Directorate	No	Yes	Yes	Yes
Transport Canberra and City Services	No	No	No	No
Environment, Planning and Sustainable Development Directorate	Yes	Yes	Yes	Yes
Chief Minister, Treasury and Economic Development Directorate	Yes	Yes	Yes	Yes
Justice and Community Safety Directorate	No	No	No	Yes

Source: Canberra Health Services annual reports 2021-2025; Education Directorate annual reports 2021-2025; Community Services Directorate annual reports 2021-2025; ACT Health Directorate annual reports 2021-2025; Transport Canberra and City Services annual reports 2021-2025; Environment, Planning and Sustainable Development Directorate annual reports 2021-2025; Justice and Community Safety Directorate annual reports 2021-2025.

2.55 A review of ACT Government agencies' reporting shows:

- three directorates (Community Services Directorate, Environment Planning and Sustainable Development Directorate and Chief Minister, Treasury and Economic Development Directorate) have included reporting under the Act in their annual reports since 2021-22;
- Canberra Health Services and the ACT Health Directorate commenced reporting in 2022-23;
- the Transport Canberra and City Services Directorate has never included reporting under the Act in its annual reports despite 'Transport Canberra' being explicitly named in the Act as an example of a *public sector entity*; and
- the Education Directorate and Justice and Community Safety Directorate only commenced reporting in 2024-25.

2.56 In undertaking this analysis, the Audit Office also acknowledges that it has not reported on its activities with respect to the Act.

Sufficiency of reporting

2.57 The Act requires that annual reports must include any information prescribed by regulation. The Regulation prescribes the following information:

- measures taken to promote the care relationship principles;
- measures taken to ensure people are aware of and understand the care relationship principles;

- measures taken to uphold the care relationship principles in assessing, planning, delivering, managing or reviewing support services, programs and policies in relation to people in care relationships;
- a summary of any consultation undertaken with carers or entities representing carers; and
- a statement about how the agency has incorporated the care relationship principles in the agency's internal human resources policies in relation to employees who are carers.

2.58 For those agencies that have complied with reporting obligations, the Audit Office analysed the sufficiency of the information that agencies have included in their annual reports between 1 July 2021 and 30 June 2025. The assessment of sufficiency or insufficiency involved considering whether the reporting was detailed enough to cover most, if not all, prescribed information. The results of this analysis are shown in Table 2-3.

Table 2-3 Sufficiency of ACT Government agencies' reporting (2021-22 to 2024-25)

Agency	2021-2022	2022-2023	2023-2024	2024-2025
Canberra Health Services	-	✓	✓	✓
Education Directorate	-	-	-	✓
Community Services Directorate	✗	✓	✗	✓
ACT Health Directorate	-	✓	✓	✓
Transport Canberra and City Services	-	-	-	-
Environment, Planning and Sustainable Development Directorate	✗	✗	✗	✗
Chief Minister, Treasury and Economic Development Directorate	✗	✗	✗	✗
Justice and Community Safety Directorate	-	-	-	✗

Source: Canberra Health Services annual reports 2021-2025; Education Directorate annual reports 2021-2025; Community Services Directorate annual reports 2021-2025; ACT Health Directorate annual reports 2021-2025; Transport Canberra and City Services annual reports 2021-2025; Environment, Planning and Sustainable Development Directorate annual reports 2021-2025; Justice and Community Safety Directorate annual reports 2021-2025.

2.59 A review of the sufficiency of ACT Government agencies' reporting shows:

- the reporting of two directorates (Canberra Health Services and ACT Health Directorate) has been sufficient to cover most, if not all, prescribed information, since they commenced reporting in 2022-23;
- the Education Directorate's first and only report from 2024-2025 was sufficient; and

- reports of the Community Services Directorate have varied in quality and detail. While two of the reports have been sufficient, the reports in 2021-22 and 2023-24 included generic statements about the Act but did not include the prescribed information.

2.60 The reporting of two directorates (the Environment Planning and Sustainable Development Directorate and the Chief Minister, Treasury and Economic Development Directorate) has not been sufficient. The brief text in the Environment Planning and Sustainable Development Directorate's reports has remained the same for the last four years. While it refers to 'policies and procedures' to support employees who are carers, it provides no further detail. The Chief Minister, Treasury and Economic Development Directorate reports on activities to support carers in delivering the Lifetime Care and Support Scheme but the directorate has not provided a statement about how it supports employees who are carers. The Justice and Community Safety Directorate's first and only report from 2024-25 was also not sufficient because while it referred to how it seeks to support staff who are carers, it did not include any other prescribed information.



2.61 A review of ACT Government agencies' reporting on their obligations under the Act shows variability in whether agencies have actually reported as required as well as the sufficiency of their reporting (i.e. whether the reporting was detailed enough to cover most, if not all, prescribed information). Only three directorates (Community Services Directorate, Environment Planning and Sustainable Development Directorate and Chief Minister, Treasury and Economic Development Directorate) have included reporting under the Act in their annual reports since 2021-22. The reporting of two directorates (Canberra Health Services and ACT Health Directorate) has been sufficient to cover most, if not all, prescribed information, since they commenced reporting in 2022-23.

Support for community agencies

2.62 On 1 December 2021, the Executive Group Manager of Strategic Policy in CSD provided a Ministerial Brief to the Assistant Minister for Seniors, Veterans, Families and Community Services, proposing correspondence to stakeholders announcing the passage of the Act. The brief included a proposed letter to stakeholders, an information sheet explaining the Act and a list of community stakeholders and email addresses.

2.63 The Assistant Minister for Seniors, Veterans, Families and Community Services signed the brief on 22 December 2021 and provided the following feedback:

Once the Act comes into effect, could you please send the letter out to the entire community services forum email list ... to ensure that community organisations who are unsure if they will be affected also understand what this new legislation means.

Correspondence to community organisations

- 2.64 On 16 May 2022, the letter and information sheet was sent by the Minister’s office to all community organisations listed on a ‘January 2022 Community Sector email distribution list’. The list contains 715 email addresses.

Community Sector Update meeting

- 2.65 On 21 June 2022, CSD gave a ten-minute presentation on the Act at a CSD and Community Sector Update meeting. The email invitation was sent to 376 email addresses, including representatives from community organisations such as Carers ACT, ACTCOSS, Salvation Army, YWCA, Barnardos, Anglicare and ADACAS. There were 159 acceptances to the invite. The presentation covered general information about the Act, the care relationship principles, who has obligations under the Act, what the obligations are and reporting requirements.

Community Partner Update newsletter

- 2.66 In June 2025, CSD sent an ACT Community Partner Update newsletter which included a brief news item on ‘NGOs and the Carers Recognition Act’. The newsletter stated as follows:

The Carers Recognition Act (the Act) outlines rules for non-government organisations (NGOs) that receive funding from the ACT Government either directly or through another NGO, to provide support services or programs for carers.

If your organisation is covered by the Act you are required to complete certain activities relating to awareness raising, consulting, and reporting.

- 2.67 NGOs were encouraged to ‘learn more’ by visiting ‘the Open Gov web page’.

Feedback from community stakeholders

- 2.68 The Audit Office engaged with key stakeholders representing carers in the ACT. Stakeholders advised that:

- communication with, and education provided to, community organisations about the Act had been lacking; and
- the implementation of the Act has not been supported – there is no resourcing, education, or enforcement of obligations.

- 2.69 Stakeholders also advised that there has been no easily identifiable point of contact within HCSD to ask questions about the Act or Regulation. The HCSD webpage provides a general contact but does not specify which division or branch within the directorate is responsible for the Act.

Carers ACT survey (July 2023)

2.70 Further insight into community stakeholder understanding of the Act can be found in a July 2023 Carers ACT survey of carers in the ACT for a federal *Inquiry into the Recognition of Unpaid Carers* conducted by the Standing Committee on Social Policy and Legal Affairs.²⁹ The survey asked carers the following questions:

Table 2-4 Survey results, ACT carers (July 2023)

Survey question	Yes responses	No responses
17. Are you aware that the ACT Government created a Carer Recognition Act specifically for Canberra in 2021?	35	108
18. Do you believe the ACT Carers Recognition Act has increased (or is increasing) the recognition of carers in Canberra?	17	18

Source: Carer Survey results (July 2023) provided by Carers ACT.

2.71 The survey results show that of the carers surveyed, 75.5 percent were not aware that legislation for carers had been passed in 2021, compared to 24.5 percent who were aware of the legislation. There was an almost equal split between positive and negative responses as to whether the Act has increased the recognition of carers in Canberra.

2.72 In 2024, Carers ACT reported that ‘87 percent of carers ... believe further work is needed to have their role understood and valued by the wider ACT community’.³⁰



2.73 HCSD has sought to educate community organisations about the Act through a variety of mechanisms. In May 2022, a letter and information sheet was sent by the Minister’s office to all community organisations listed on a ‘January 2022 Community Sector email distribution list’ (715 email addresses). This was followed by a ten-minute presentation at a CSD and Community Sector Update meeting. The email invitation was sent to 376 email addresses and there were 159 acceptances to the invite. In June 2025, CSD sent an ACT Community Partner Update newsletter which included a brief news item on ‘NGOs and the Carers Recognition Act’. Community stakeholders have advised the Audit Office that there has been minimal communication and education about the Act and there is no easily identifiable point of contact within HCSD to answer questions about the Act.

²⁹ [Inquiry into the recognition of unpaid carers – Parliament of Australia](#) (accessed 9 July 2025).

³⁰ ACT Legislative Assembly, *Inquiry into Loneliness and Social Isolation in the ACT*, Submission No. 31: Carers ACT (published 26 March 2024), p.5.



Recommendation 3

Community stakeholder engagement

The Health and Community Services Directorate should:

- a) identify further opportunities to educate community stakeholders on a regular basis about the *Carers Recognition Act 2021*; and
- b) establish and publicise a branch-level point of contact to respond to stakeholder queries about the Act.

Funded and secondary funded support agencies

- 2.74 The Act defines a *funded support agency* as an ‘entity that is: a) funded by a public sector support agency; and b) responsible for providing a support service or program that directly impacts on people in care relationships’.
- 2.75 A *secondary funded support agency* is defined in the Act as an entity contracted or funded by a funded support agency to provide a support service or program for which the funded support agency has responsibility.
- 2.76 These definitions extend the reach of the Act to entities that are funded, contracted, or subcontracted by a public sector support agency to provide support services or programs. These definitions recognise that ACT Government agencies may fund or contract non-government organisations to provide support services or programs that directly impact people in care relationships. In the *ACT Carers Strategy 2018-2028 First Three-Year Action Plan*, for example, 22 of the 25 actions described non-government organisations as a lead agency, support agency or both.
- 2.77 When negotiating a contract, deed or agreement with a funded support agency, it would be expected that:
- HCSD would advise the funded support agency of its obligations under sections 10 and 11 of the Act (including with respect to secondary funded support agencies); and
 - any relevant contract, deed or agreement would stipulate the obligations of a funded support agency under sections 10 and 11 of the Act (including with respect to secondary funded support agencies).
- 2.78 The audit considered a selection of high-value contracts that HCSD has with funded support agencies to test whether those contracts referred to the Act. All of the contracts, some of which were variations to existing deeds, were executed soon after the Act came into effect. The findings are presented in Table 2-5.

Table 2-5 Contracts with funded support agencies

Subject	Contract	Execution Date	Funded support agency	Refers to Act?
Out of home care. ³¹	Deed of Variation (Variation 7 to Service Funding Agreement). ³²	15 July 2022	ACT Together (Barnardos)	✘
	Deed of Variation (Variation 4 - A Step Up for Our Kids Service Funding Agreement). ³³	15 July 2022	Uniting Children and Families ACT	✘
Community Assistance and Temporary Supports. ³⁴	Community Assistance and Temporary Supports (CATS) Program. ³⁵	26 Sept 2023	Carers ACT	✘
	Community Assistance and Temporary Supports Program. ³⁶	21 Sept 2023	Anglicare	✘
	Community Assistance and Temporary Supports (CATS) Program. ³⁷	21 Sept 2023	ACT Disability Aged and Carer Advocacy Service	✘
Policy outcomes for foster and kinship carer advocacy described in the <i>Next Steps for Our Kids Strategy 2022-2030</i> .	Next Steps Deed of Grant. ³⁸	29 June 2022	Carers ACT	✓

Source: ACT Audit Office analysis.

2.79 Table 2-5 shows that only one out of the six contracts analysed, which relate to the delivery of services that directly impact carers, referred to the Act.



2.80 The Act recognises that ACT Government agencies may fund or contract non-government organisations to provide support services or programs that directly impact people in care

³¹ Out-of-home care placements are provided for children who are unable to live with their families. The most common out-of-home care arrangements in the ACT include foster care, kinship care, and residential care. See ACT Audit Office, [Management of key contracts under A Step Up For Our Kids](#), pp.13-14.

³² [Panel Contract - 2015.25341.220](#), see Variation No 7 (accessed 11 February 2026).

³³ [Panel Contract - 2015.25341.210](#) see Variation 4 (accessed 11 February 2026).

³⁴ The CATS Program provides short-term support for ACT residents with a health issue, illness or injury. The program aims to prevent hospitalization. Carers of an eligible person can apply for the program: [Short-term support when you are unwell: Community Assistance and Temporary Supports Program - ACT Government](#) (accessed 11 February 2026).

³⁵ [Contract - 2023.957.010](#) (accessed 11 February 2026).

³⁶ [Contract - 2023.076.009](#) (accessed 11 February 2026).

³⁷ [Contract - 2023.576.008](#) (accessed 11 February 2026).

³⁸ [Contract - DG.2022.031](#) (accessed 11 February 2026).

relationships, i.e. funded support agencies and secondary funded support agencies. When entering into a contract with a funded support agency, it is expected that HCSD would advise the funded support agency of its obligations under sections 10 and 11 of the Act (including with respect to secondary funded support agencies). A review of six high-value contracts that HCSD has with funded support agencies, all of which were executed soon after the Act came into effect, shows that only one of the six contracts referred to the Act.



Recommendation 4

Funded and secondary funded support agencies

The Health and Community Services Directorate should ensure that all its contracts with funded and secondary funded support agencies reflect the obligations set out in the *Carers Recognition Act 2021*.

Monitoring and review

2.81 Monitoring implementation is necessary and important because, as stated in *Strengthening Performance and Accountability: A Framework for the ACT Government*:

To manage effectively, decision-makers rely on a timely flow of meaningful information. An effective monitoring system gathers and disseminates information about milestones, risks, budget and achievements to decision-makers.


2.82 HCSD does not monitor the implementation of the Act or otherwise monitor the performance of agencies and their compliance with the Act.

2.83 Some Australian states have carer advisory councils established under their respective carers recognition legislation, which are explicitly tasked with providing an annual report to the Minister on performance and compliance with the Act (refer to Appendix B). The Western Australian Carers Advisory Council, for example, provides an annual compliance report to the relevant Minister, which describes whether the reporting of organisations is compliant, not compliant or not applicable. The ACT does not have a carer advisory council.

2.84 Reviewing and evaluating outcomes is also a key component of the performance and accountability cycle. As stated in *Strengthening Performance and Accountability: A Framework for the ACT Government*:

A commitment to rigorous evaluation is an important aspect of government accountability, especially in circumstances where a policy is new (and the results cannot be reasonably foreseen as a result of prior research) and expensive. The rigorous evaluation of policy initiatives also helps to build an evidence base that in turn can be used to inform the development of future policies.

For this reason, agencies are expected to continuously and critically evaluate their own activities.

- 2.85 HCSD has not undertaken any review or evaluation of the implementation of the Act.
- 2.86 HCSD advised that an evaluation will be undertaken as part of the statutory review of the Act which is required to be completed by June 2028. This statutory review will necessarily involve reviewing the operation and effectiveness of the Act after the end of its fifth year of operation.³⁹
-  2.87 HCSD does not monitor the implementation of the Act or otherwise monitor the performance of agencies and their compliance with the Act. Some Australian states have carer advisory councils established under their respective carers recognition legislation, which are explicitly tasked with providing an annual report to the Minister on performance and compliance with the Act. The ACT does not have a similar arrangement.

³⁹ *Carers Recognition Act 2021*, s 15.

3 Agency practices

- 3.1 This chapter discusses the activities of Canberra Health Services and the Education Directorate, in their capacity as care and carer support agencies, to implement the *Carers Recognition Act 2021*.



Conclusions

Agency practices in response to the obligations specified in the Act have varied. Canberra Health Services (CHS) and the Education Directorate have recognised and implemented support for carers in different ways and to different effect, depending on their operational needs and priorities.

Canberra Health Services has sought to enhance awareness of carers generally as well as staff who are carers, while the Education Directorate has consistently made strong efforts to support young carers within schools.

Canberra Health Services has demonstrated a more proactive and explicit acknowledgement of the Act by integrating the Act into policies, procedures and guidelines and specifically consulting with carers when planning or reviewing support services or programs.



Key findings

Planning to implement the Act

Paragraph

Both CHS and the Education Directorate received correspondence about the Act from CSD in April and June 2022. CHS recognised that it had responsibilities under the Act and made plans for implementation in June 2022. On 2 May 2023, an Implementation Plan developed by the People and Culture Branch was approved. The Implementation Plan was clear and actionable because it aligned reporting obligations with actions/evidence and dates for completion.

3.16

The Education Directorate was initially unsure whether it had obligations under the Act and sought confirmation from CSD, which was obtained on 1 June 2022. The Education Directorate identified an intention to develop communications associated with the Act and consult with staff who are carers on the development of human resource management policies. The Education Directorate did not develop an implementation plan with clear and actionable activities.

3.17

Raising awareness and understanding

Both CHS and the Education Directorate have undertaken various activities to raise awareness and understanding of the needs of carers. Since 2023, CHS has sought to enhance awareness and understanding of the care relationship principles, both internally and externally, by developing an information sheet for carers, a factsheet

3.39

for staff, a staff network with an associated strategy and by promoting National Carers Week.

The Education Directorate has, since at least 2021, made strong efforts to develop and distribute information about supports for young carers. More recently the Directorate has also sought to raise awareness of the needs of its own staff who are carers. In 2026, the Education Directorate is seeking to establish a Carers Network for its staff and a Parent Intranet Page for staff who are parents. 3.40

Support services, programs and policies

Both CHS and the Education Directorate have sought to recognise and uphold the care relationship principles in ways directly relevant to each organisation. In June 2022, the Strategy and Governance – Policy Team within CHS commenced reviewing and updating policy, procedure and guideline templates to include the Act in related legislation and prompt authors to consider the Act during future document development. CHS also seeks to uphold the care relationship principles in delivering services such as Child and Adolescent Mental Health Services. 3.49

The Education Directorate supports young carers by enabling them to be identified as carers when being enrolled in a school. If a young person identifies as a carer then ‘individual schools will use this information to facilitate conversations with families and to support students at the school/college level’. Various supports and flexible arrangements may be implemented as a result. The *Safe and Supportive Schools Policy*, which is an important policy for students and their families, does not mention the Act or include the Act in the list of relevant legislation. 3.50

Consultation with carers

CHS has consulted with carers and entities representing carers when planning or reviewing support services and programs. It has done this via a Disability and Carers Staff Network and by seeking direct feedback on policy documents and frameworks from carer organisations such as Carers ACT. The Education Directorate has sought feedback from all staff, staff representatives, unions and other organisations on various plans and guidelines. In doing so, however, the Directorate has not specifically and explicitly sought feedback from carers or entities representing carers. 3.62

CHS specifically consults with carers through two key advisory groups: the Consumer and Carer Advisory Committee and CHS Network Partnering with Consumers Committee. The Advisory Committee seeks to provide ‘advice to Canberra Health Services (CHS) on the quality and safety of health care provided by CHS. This includes providing consumer and carer perspectives on the experience of care as well as planning, design, delivery, measurement, and evaluation of health care’. The Education Directorate has consulted with carer support services as needed on specific issues. 3.71

Human resources policies

Both CHS and the Education Directorate have sought to support staff who are carers in ways directly relevant to each organisation. Both directorates support staff who are carers by virtue of their commitment to flexible working arrangements and ACTPS-wide human resources policies. CHS has a Strengths, Engagement and Development (SED) process for staff performance and development, which asks staff what they need and how work arrangements can be improved. One of the examples provided is to discuss flexible work arrangements for carers with additional responsibilities outside work. The Education Directorate has also recognised the needs of its teachers who may be carers through its *Classroom Teacher Recruitment Guidelines*, which allows for carer responsibilities to be considered in compassionate transfer decisions.

3.84

Evaluation

CHS collects feedback from carers via surveys and, in November 2025, evaluated its own compliance with the Act via a legislative compliance self-assessment. The self-assessment identified nil gaps or actions required. The Education Directorate collects feedback from staff (including carers) via the biennial ACTPS staff survey. It does not specifically monitor or evaluate its compliance with the Act, e.g. through a legislative compliance self-assessment.

3.92

Planning to implement the Act

Canberra Health Services

- 3.2 On 14 April 2022, the CHS Strategy and Governance team sent an email to the various teams and divisions within CHS advising that the Act would commence on 10 June 2022 and that CHS had various responsibilities under the Act. The email attached the Information Sheet that had been provided by CSD (refer to paragraphs 2.12 to 2.16).
- 3.3 On 10 June 2022, the Chief Executive Officer of CHS received the letter from CSD advising that the Act took effect as of that date (refer to paragraphs 2.26 to 2.27) and instructed senior staff to action the letter.
- 3.4 On 14 June 2022, the Strategy and Governance team within CHS advised the Acting Deputy CEO of CHS:
- CHS already consults with carers 'for development/review of policy documents, Health information sheets (consumer handouts), frameworks, plans, programs and Models of Care' and has 'well established processes for receiving carer feedback' through the Consumer Feedback and Engagement team;

- ‘when CHS policy or guidance documents that are being reviewed/developed mention carers or patient support people, the policy team confirm that Carers are specified in the consultation list and documents themselves. The team will ensure the Carer Recognition Act 2021 is now added to the related Legislation list in our policy, procedure and guideline templates’; and
- several further actions were intended to be undertaken to meet the legislative requirements, including:
 - developing a Health Information Sheet for carers;
 - ensuring the agency’s activities to implement the Act are reported in the annual report;
 - ensuring that employees in a care relationship are supported and recognised and that carers are consulted when planning or reviewing support services and programs; and
 - ensuring that each division that provides clinical services educates their staff on the requirements of the Act.

3.5 On 15 June 2022, the Acting Deputy CEO signed off the proposed actions and instructed staff to ‘ensure progress on actions as proposed’.

3.6 On 13 April 2023, the Strategy and Governance team provided the following progress update to the Legislative Compliance, Communications and People and Culture teams via email:

In June 2022 the Carers Recognition Act 2021 came into effect, the a/g DCEO at the time agreed to a number of actions to ensure CHS compliance with the legislation, see attached email. Due to staffing issues the Policy Team has not had capacity to co-ordinate the completion of the actions until now.

3.7 On 13 April 2023 emails were sent:

- instructing the Patient Experience team to develop ‘a Health Information Sheet to inform carers how CHS supports them, ways to be involved in the person they care for treatment/care at CHS and how we meet our responsibilities under the Act’;
- advising the Communications team that once the information required for the annual report was collated, the Communications team would be involved in including information about the Act on the website and a Hub page; and
- requesting that the People and Culture Branch provide information on how CHS supports employees who are carers. The email advised that this information would be included in the annual report and on the CHS Health Hub and website.

3.8 On 2 May 2023, an Implementation Plan developed by the People and Culture Branch was approved. The Implementation Plan was clear and actionable. It set out:

- what prescribed information must be reported on;

- what activities will be undertaken and evidence gathered; and
- a completion date in 2023 for each activity.

Education Directorate

3.9 Between 6 April 2022 and 19 April 2022, there were email discussions within the Education Directorate, between the Strategic Policy team, the Learning and Wellbeing Policy and Design team and the People and Performance Branch, which sought to clarify team and branch responsibilities as they relate to the implementation of the Act.

3.10 On 19 May 2022, the Diversity and Inclusion team sent a draft document with 'Comments and Recommendations' on the Act, to the People and Performance Branch, for internal clearance. The recommendations were as follows:

1. Develop a whole Directorate communication campaign that raises awareness of the carer's relationship principles, the Parents and Carers Hotline, resources etc.
2. Establish an EDU Carer's Employee Network that has synergy with other Directorate Employee Networks.
3. In consultation with employees with carer responsibilities, develop internal human resource policies about the principles and their application within our workforce.
4. Establish monitoring and reporting mechanisms.
5. Give consideration of the potential application to the current Enterprise Agreement bargaining process.

3.11 On 19 May 2022, in response to the draft document, the Diversity and Inclusion team was asked to clarify whether 'we have confirmed with CSD that EDU is not considered a 'care and carer support agency'?' On 19 May 2022, the Diversity and Inclusion team recommended that Education had obligations under the Act.

3.12 On 20 May 2022, the Diversity and Inclusion team was asked to seek clarification from CSD. On 1 June 2022, the Diversity and Inclusion team indicated that they were able to 'get some good advice from CSD' and advised:

Discussions with Community Services Directorate (CSD) indicate that a broad interpretation of the Act should be adopted. CSD have advised that every Directorate falls within the scope of the Act by virtue that they employ people who have unpaid caring roles in their personal lives. For Education, we also have students who are carers, so this applies for them also.

3.13 On 10 June 2022, the Director-General of Education received the letter from CSD advising that the Act had come into effect (refer to paragraphs 2.23 to 2.27). The letter (and accompanying guidance material) was also sent by CSD's Strategic Policy Branch to the People and Performance Branch in the Education Directorate.

- 3.14 On 14 June 2022, the People and Performance Branch was instructed to review the correspondence and take appropriate action. On 15 June 2022, the Diversity and Inclusion team was instructed as follows:

As per the advice you received previously from CSD, they clarified the extent to which it applies to EDU with the two main factors being that we are an employer of carers and that we have policies in relation to students who are carers.

...

From a quick scan of the docs, it looks like we need to get some communications out via ConnectED to make staff aware of the Act and the principles of the Act, whilst also ensuring that we consult with staff who are carers on the development of any HR policies that impact on them.

- 3.15 On 4 November 2022, the Director-General of Education responded to the Director-General of CSD letter dated 9 June 2022 and advised:

The Directorate is committed to ensuring our human resource policies consider the care relationship principles and obligation outlined under the Act. I can advise that members of our diverse community with caring responsibilities who have direct involvement with the Directorate are acknowledged and supported, where appropriate.

The Directorate is committed to actions under the ACT Carers Strategy 2018-2028 which provides a framework to support and recognise the work of carers, acknowledging the difference they make to our community and responding to the key challenges faced by carers.

Further, the Directorate supports school and teaching staff to identify young carers during enrolment, asking students if they care for or have a person in their care. This helps to identify young carers at the beginning of their learning journey, so educational supports can be put in place to help them remain engaged in education. In addition to the delivery of in-school supports, schools can work with young carers that they identify to link them with services provided by external agencies such as Anglicare and Carers ACT.



- 3.16 Both CHS and the Education Directorate received correspondence about the Act from CSD in April and June 2022. CHS recognised that it had responsibilities under the Act and made plans for implementation in June 2022. On 2 May 2023, an Implementation Plan developed by the People and Culture Branch was approved. The Implementation Plan was clear and actionable because it aligned reporting obligations with actions/evidence and dates for completion.



- 3.17 The Education Directorate was initially unsure whether it had obligations under the Act and sought confirmation from CSD, which was obtained on 1 June 2022. The Education Directorate identified an intention to develop communications associated with the Act and consult with staff who are carers on the development of human resource management policies. The Education Directorate did not develop an implementation plan with clear and actionable activities.

Raising awareness and understanding

- 3.18 Awareness and understanding are important to ensure that carers are respected, recognised and included in decisions that affect them and the other person in the care relationship. The Act requires agencies to take all practicable measures to ensure that employees and agents, as well as people in care relationships who are receiving support services, are aware of, and understand, the care relationship principles.⁴⁰

Canberra Health Services

Information for Carers – Health Information Sheet

- 3.19 The Strategy and Governance – Policy Team within CHS developed a Health Information Sheet, which was made available to all staff on the CHS Policy and Guidance Documents Register on 25 October 2021. Further consultation occurred in 2022 and the final version was published on the register in September 2023. The Health Information Sheet discusses self-care for carers, how to be involved as a carer, assistance with decision-making, patient discharge and what carers can do if they have an urgent medical concern.

Factsheet about the Act

- 3.20 In July 2023, the People and Culture Division within CHS developed a Factsheet for staff about the Act. The updated 2025 version of the Factsheet outlines who a carer is and provides information on the care relationship principles. The most recent version of the Factsheet was uploaded onto the Health Hub in November 2025. It is available to all CHS staff.

Disability and Carers Staff Network

- 3.21 In July 2023, CHS launched a Disability and Carers Network. The Terms of Reference, which were finalised in August 2023, state that the aim of the network is to ‘increase awareness and reduce barriers and stigma for staff with disability and caring responsibilities’. Membership is ‘open to all CHS staff who are interested in contributing to CHS disability and carers inclusion’. Meetings focus on progressing network strategy, planning network events and activities; and providing input into policies and procedures.
- 3.22 Meetings are intended to be held monthly. Meetings were held in November 2023, February, March, May, June, August and October 2024 and February 2025. The meeting in October 2024 discussed carers leave and the importance of aligning the definition of unpaid carers with the Act.

⁴⁰ *Carers Recognition Act 2021*, s 10(1)(a).

- 3.23 CHS has advised that the network currently has 36 members, eight of which have identified as carers.

Disability and Carers Network Strategy

- 3.24 In April 2024, CHS released a *Disability and Carers Network Strategy 2024* for the Disability and Carers Network. The strategy identified three focus areas with associated actions to be undertaken in the 12 months to April 2025. Actions include developing an inclusive language guide, promoting existing supports and entitlements, designing a desktop background and digital screen for the Disability and Carers Network and creating a register of barriers and challenges for staff with disability and carers.

National Carers Week

- 3.25 For National Carers Week in October 2024 CHS published an article on the intranet. The article suggested ways for colleagues and managers to support carers and listed supports and resources for carers.

Education Directorate

Young Carers Service Portal page

- 3.26 On 17 November 2021, the Education Directorate established a 'Young Carers' Service Portal page and associated subpages, which aim to help teachers understand how they can support young carers to stay engaged in their education, find resources and support agencies for young carers. The pages include information about respite care and supports, financial assistance and scholarships, publications and useful websites and teacher resources.
- 3.27 As at 28 January 2026, the page had been viewed 628 times. The page was last updated on 21 July 2025.

Presentation on Support and Identification of Young Carers

- 3.28 On 6 May 2025, the Wellbeing Inclusion Policy and Service Design team delivered a presentation on 'Support and Identification of Young Carers' at the Successful Student Transitions Workshop. The workshop was attended by approximately 90 staff, including teachers and support staff from primary schools, high schools and colleges. The presentation had six slides, one of which listed the following supports for young carers:
- School level supports
 - Individual Learning Plan
 - Young Carers Bursary through the Young Carers Network (Carers ACT)

- Financial Support through Carers Gateway (Australian Government)
- Groups like CYCLOPS and Carers ACT

3.29 At the presentation, staff were advised that a copy of the presentation and additional resources were available on Google Drive. At that time, 42 staff had access to the Google Drive. Following the presentation, an additional 37 staff requested access.

Distribution of CYCLOPS materials

3.30 On 4 June 2024, the Education Directorate distributed a school bulletin with information about CYCLOPS (Connecting Young Carers to Life Opportunities and Personalised Support). The bulletin attached a 'toolkit for schools', a brochure about the CYCLOPS Young Carers Program and a referral form for the CYCLOPS -Anglicare Young Carers Program.

3.31 On 4 June 2024, the Wellbeing and Inclusion Policy and Service Design team emailed the key contacts for School Youth Health Nurses working in ACT public high schools, noting the release of the toolkit for schools and providing the contact details for CYCLOPS. The CYCLOPS materials remain available on the Directorate's intranet.

Young Carer Bursary

3.32 The Young Carer Bursary program, which is run by Carers Australia, provides financial support to young carers.

3.33 The Education Directorate has promoted the bursary via all-staff bulletins on a number of occasions between July 2023 and October 2025. The October 2025 bulletin contained information about the bursary, eligibility and a contact for further information. In October 2025, emails promoting the bursary were also sent to school youth health nurses and allied health staff including social/youth workers.

National Carers Week

3.34 The Education Directorate has promoted National Carers Week to its staff on two occasions via a Diversity and Inclusion Newsletter in October 2022 and an all-staff bulletin in 2025.

Intranet article about flexible working

3.35 On 20 March 2025, the Education Directorate distributed an article on the staff intranet (ConnectED) about eResources to support flexible working. The resources had been developed by the CMTEDD Office of Industrial Relations and Workforce Strategy. The intranet page was created on 18 February 2025 and, as at 24 March 2026, had received 175 views.

Carers Network

3.36 In February 2025, the Education Directorate prepared a draft Project Plan to establish a Carers Network. On 28 October 2025, the Executive Branch Manager of the People and Performance Branch sent a brief to the Director-General of Education requesting agreement to the establishment of a Carers Network by 10 November 2025. The brief states:

The establishment of a Carers Network will support the Directorate to fulfil its obligations to respect and recognise carers, and provide a voice for staff to input into HR policies.

3.37 As of February 2026, the brief is yet to be approved by the Director-General.

Intranet Page for staff who are parents and carers

3.38 The Education Directorate has proposed a Parent Intranet Page for staff who are parents. The page is designed to centralise 'all relevant information for would-be and current parents and their managers'. The proposed page would provide information on different types of leave relevant to carers (such as foster and short-term care leave) and flexible working arrangements. As of January 2026, the content of the page has been approved but it has not yet been published.



3.39 Both CHS and the Education Directorate have undertaken various activities to raise awareness and understanding of the needs of carers. Since 2023, CHS has sought to enhance awareness and understanding of the care relationship principles, both internally and externally, by developing an information sheet for carers, a factsheet for staff, a staff network with an associated strategy and by promoting National Carers Week.



3.40 The Education Directorate has, since at least 2021, made strong efforts to develop and distribute information about supports for young carers. More recently the Directorate has also sought to raise awareness of the needs of its own staff who are carers. In 2026, the Education Directorate is seeking to establish a Carers Network for its staff and a Parent Intranet Page for staff who are parents.

Support services, programs and policies

3.41 The Act requires agencies to take all practicable measures to ensure that its employees and agents respect and recognise carers when assessing, planning, delivering, managing or reviewing support services, programs and policies.

Canberra Health Services

3.42 In June 2022, the Strategy and Governance – Policy Team within CHS commenced reviewing and updating policy, procedure and guideline templates to refer to the Act and prompt authors to consider the Act during document development.

3.43 CHS has provided examples of upholding the care relationship principles in current support services, programs and policies. These are summarised in Table 3-1.

Table 3-1 Analysis of CHS policies, procedures, frameworks and plans

Title	Purpose	References to the Act
<i>Procedure: Policy Document (Policies, Procedures, Guidelines, and Placeholders) Development and Review.</i>	Outlines the 'CHS Network wide processes for initiation, development, monitoring and evaluation of policy documents, including regular review'.	The Act is listed in relevant legislation. Attachment A instructs that carers needs be considered as follows: 'Carers Recognition impact – ensuring that all Carers are recognised under the Carers recognition Act 2021. CHS documents associated with Carers should review this document to ensure the rights and recognition of a Carer is supported. The act can be found Carers Recognition Act 2021 Acts'.
<i>Procedure for Organisational Plans, Guidance and Patient Care Document Management</i>	To ensure a consistent approach to the development and governance of 'strategy, framework, plan, model of care and clinical pathway documents used across the Canberra Health Services (CHS) Network'.	The Act is listed in relevant legislation. The procedure stipulates that: 'Authors of documents that affect carers should review the Carers Recognition Act 2021 to ensure the rights of carers are supported. The Act can be found on the ACT legislation register'.
<i>Policy on Partnering with Consumers and Carers</i>	To 'ensure CHS creates effective partnerships to include patient, carer and consumer input'.	The policy lists the Act in relevant legislation. The definition of 'carer' used in the policy reflects the definition of carer in the Act. The policy states that it is informed by the Act, and that CHS implements the care relationship principles as follows: 'We recognise and respect carers as individuals with their own needs, knowledge, and rights, and implement the care relationship principles within the Carers Recognition Act 2021. This ensures carers receive appropriate, timely and accessible support, have their views and cultural identities considered in care-related decisions and are provided with support that reflects their specific needs'.
<i>Exceptional Care Framework 2024-2029.</i>	Defines what exceptional care is; roles and responsibilities; how team members and consumers will be supported; and	The Framework is said to be supported by four foundational pillars. The Act is specifically mentioned in the context of Foundation 2 – Partnering with consumers, as follows:

Title	Purpose	References to the Act
	how progress will be tracked.	'We recognise and respect carers as individuals with their own needs, knowledge, and rights, and implement the care relationship principles within the Carers Recognition Act 2021. This ensures carers receive appropriate, timely and accessible support, have their views and cultural identities considered in care-related decisions and are provided with support that reflects their specific needs.'
<i>Disability Action and Inclusion Plan 2022-2025.</i>	The objective of the Plan is to 'improve the experience and outcomes of people with disability, their families and carers – both those accessing health care, and those who work within our services'.	The Plan includes actions across four key focus areas. While there is no mention of the Act in the Plan, many of the actions specified under the four focus areas refer to carers, including consideration of carers needs, and the provision of appropriate services, information, resources and support.

Source: ACT Audit Office analysis.

Child and Adolescent Mental Health Services

3.44 Appendix C includes a case study of how the Child and Adolescent Mental Health Services (CAMHS) in CHS upholds the care relationship principles in delivering services. The case study illustrates how carers are consulted and involved at different stages of service delivery, from the design of buildings and infrastructure through to providing feedback on a service and receiving follow-up support.

Education Directorate

Support services for young carers

3.45 The Education Directorate identifies young carers by asking in the online enrolment form whether 'the child has carer responsibilities?'. An information icon linked to the question indicates that carer responsibilities mean 'daily care for someone with a severe disability, a medical condition, or who is frail or aged'.

3.46 If there is a 'yes' response, the Education Directorate has advised that 'individual schools will use this information to facilitate conversations with families and to support students at the school/college level'. The support services that may be provided include:

- permission to use a phone to contact home;
- options for catching up on schoolwork from home;
- assisting young carers to make connections with community supports during school time;
- financial assistance to attend camps and excursions;

- flexibility with deadlines for assignments if requested due to caring responsibilities; and
- flexible and personalised learning options.

Priority access to care services

3.47 In support of Recommendation 7 of the Teacher Shortage Taskforce Final Report,⁴¹ the Education Directorate has drafted a Memorandum of Understanding (MoU) between the Directorate and Early Childhood Education and Care Services providers to give priority access to eligible ACT public school staff employed by the Education Directorate. All ACT public school staff employed by the Education Directorate, whether full-time or part-time, are eligible to apply. The MoU benefits carers seeking to retain employment in public schools. The MoU has been finalised and the Education Directorate has commenced engaging with providers for possible agreements.

Safe and Supportive Schools policy

3.48 The current *Safe and Supportive Schools Policy* (published 9 November 2016) applies to all school staff, parents/carers and students attending Canberra public schools and all other Education Directorate staff. It does not mention the Act or include the Act in the list of relevant legislation.



3.49 Both CHS and the Education Directorate have sought to recognise and uphold the care relationship principles in ways directly relevant to each organisation. In June 2022, the Strategy and Governance – Policy Team within CHS commenced reviewing and updating policy, procedure and guideline templates to include the Act in related legislation and prompt authors to consider the Act during future document development. CHS also seeks to uphold the care relationship principles in delivering services such as Child and Adolescent Mental Health Services.



3.50 The Education Directorate supports young carers by enabling them to be identified as carers when being enrolled in a school. If a young person identifies as a carer then ‘individual schools will use this information to facilitate conversations with families and to support students at the school/college level’. Various supports and flexible arrangements may be implemented as a result. The *Safe and Supportive Schools Policy*, which is an important policy for students and their families, does not mention the Act or include the Act in the list of relevant legislation.

⁴¹ Recommendation 7 was as follows: ‘The Education Directorate will develop strategies with the AEU to support parents and carers to return to the teaching workforce, such as facilitating access to early learning centres and out of school hours care programs’: *EDU and AEU Teacher Shortage Taskforce Final Report*, p.20.

Consultation with carers

3.51 The Act requires agencies to consult with carers, and an entity representing carers, when they are planning or reviewing support services and programs in relation to people in care relationships.⁴²

Canberra Health Services

3.52 CHS undertakes consultation with carers when planning or reviewing support services and programs:

- CHS implemented the Disability and Carers Staff Network in July 2023. The purpose of the Network is to ‘increase awareness and reduce barriers and stigma for staff with disability and caring responsibilities’;
- CHS has developed the Models of Care: Consultation Flow Process. This diagram includes three phases: development, consultation and finalisation. In the ‘consultation’ phase, although carers are not referenced specifically, the diagram refers to consultation with all CHS staff and consumer groups, which may include carers;
- throughout 2024, CHS consulted with carer organisations such as Carers ACT and the Health Care Consumers’ Association for the purpose of consolidating nine governance frameworks into the Exceptional Care Framework (discussed in Table 3-1);
- in October 2024, CHS established a working group to develop a ‘Partnering with Consumers document suite’. The working group included a representative from Carers ACT. The purpose of the working group was to review and improve various written documents to ‘support effective partnerships with consumers, their families and carers’. The work included revising several documents, including the *Partnering with Consumers and Carers Policy* as well as the *Working with Consumers and Carers Representatives Welcome Booklet*, *Open Disclosure Consumer Handout* and *Consumer Carer and Community Representative Reimbursement Procedure*; and
- on 20 June 2025, the Quality, Safety and Governance team within CHS sought input and feedback from Carers ACT on the following policy documents:
 - Cognitive impairment (Delirium and Dementia)
 - Telehealth Consultation
 - Paediatric Advance Care Planning.

⁴² *Carers Recognition Act 2021*, s 10(2)(a).

Education Directorate

Consultation groups

- 3.53 The Education Directorate has the following consultation groups which include carers:
- Disability Education Reference Group, which is chaired by the Executive Branch Manager of Strategic Policy, meets quarterly and includes Carers ACT. Meetings ‘focus on the education of students with disability in ACT public schools, and members provide input and advice to the Directorate, including the perspective of carers’; and
 - ACT Parents, which is chaired by the Executive Group Manager of Service Design and Delivery, meets quarterly and represents parents and carers. In addition, ‘the Directorate engages with ACT Parents on an ad hoc basis and proactively to consult on reform initiatives and priority work programs, including policy reviews’.

Directorate Consultative Committee

- 3.54 The Education Directorate has a Directorate Consultative Committee (DCC). One of its key objectives is to provide a forum for consultation. Members includes senior staff from different branches in the Directorate, senior staff and principals from schools and colleges as well as representatives from unions. There are no members whose role is specifically to represent carers. Staff who are carers are able to have their views represented in Committee meetings through their elected member or union representative.
- 3.55 A review of agendas, meeting minutes and/or action logs from the Committee meetings between February 2024 and November 2025 indicate the Act was not discussed at any of these meetings.

Draft Classroom Teacher Recruitment Guidelines

- 3.56 In mid-2024, the Education Directorate drafted *Classroom Teacher Recruitment Guidelines*. A consultation webpage was established through EDU Engage, an internal platform accessible by all Education staff through the intranet. The webpage invited feedback from ‘all key stakeholders including the AEU [Australian Education Union]’. Staff were not specifically asked to declare their carer status when providing feedback.

Draft Gender Equity Action Plan 2024-2028

- 3.57 In developing the draft *Gender Equity Action Plan 2024-2028*, the Education Directorate planned to engage with Directorate staff through all staff workshops in March 2024, an EDU Engage webpage in March 2024 and via staff networks in April 2024. The directorate established a consultation webpage which invited input through a short, anonymous survey. A draft of the Gender Equity Action Plan was circulated by email to members of the Directorate Consultative Committee in June 2024.

Draft Access and Inclusion (Disability) Employment Action Plan 2024-2028

- 3.58 In developing the *Access and Inclusion (Disability) Employment Action Plan 2024-2028*, the Education Directorate established an EDU Engage webpage that invited ‘engagement and feedback from staff across all areas of the Directorate’. The webpage invited feedback via an anonymous survey or directly by email. The survey asked staff to identify as carers, if relevant.
- 3.59 A draft was circulated by email to members of the Directorate Consultative Committee for feedback in August 2024. Feedback was received from the ACT Branch of the AEU. The Education Directorate has advised that in March 2026 a consultation workshop was scheduled specifically for employees with caring responsibilities. There were no registrations for the workshop. The Education Directorate has advised that it recognises the risk of this lack of engagement and is proposing a revised engagement strategy.

School Leader Recruitment Guidelines

- 3.60 In late 2025, the Education Directorate sought feedback on the revised *School Leader Recruitment Guidelines*. The guidelines were shared through EDU Engage for staff feedback, either by completing a survey, or by email. Feedback was received from the ACT Principals Association and the Australian Education Union.

Planning priority access to early learning centres/YWCA services

- 3.61 In December 2024, the Education Directorate consulted with the Young Women’s Christian Association (YWCA) regarding access to early learning centres/YWCA services for returning families that work for the Education Directorate and corporate memberships. A potential partnership was discussed but has not progressed.



- 3.62 CHS has consulted with carers and entities representing carers when planning or reviewing support services and programs. It has done this via a Disability and Carers Staff Network and by seeking direct feedback on policy documents and frameworks from carer organisations such as Carers ACT. The Education Directorate has sought feedback from all staff, staff representatives, unions and other organisations on various plans and guidelines. In doing so, however, the Directorate has not specifically and explicitly sought feedback from carers or entities representing carers.

Engagement with carer support services

Canberra Health Services

Consumer and Carer Advisory Committee

- 3.63 In 2023 CHS established a Consumer and Carer Committee. The current committee is known as the Consumer and Carer Advisory Committee. It seeks to provide ‘advice to Canberra

Health Services (CHS) on the quality and safety of health care provided by CHS. This includes providing consumer and carer perspectives on the experience of care as well as planning, design, delivery, measurement, and evaluation of health care’.

- 3.64 Members include representatives from the Health Care Consumers’ Association (as Chair), Carers ACT, ACT Mental Health Consumer Network, Gender Agenda, Advocacy for Inclusion and a consumer and carer. The committee meets every second month, and it reports to the CHS Network Executive Committee which is the highest level of governance at CHS.
- 3.65 A summary of community organisation attendance at meetings between 2023 and 2025 is presented in Table 3-2.

Table 3-2 Consumer and Carer Advisory Committee meetings

Meeting date	No. of community organisations in attendance
3 November 2023	4 representatives
2 February 2024	6 representatives
14 June 2024	6 representatives
9 August 2024	5 representatives
25 October 2024	4 representatives
14 February 2025	5 representatives
11 April 2025	7 representatives
13 June 2025	9 representatives
8 August 2025	12 representatives
10 October 2025	7 representatives

Source: ACT Audit Office analysis.

Network Partnering with Consumers Committee (current)

- 3.66 CHS also has a CHS Network Partnering with Consumers Committee, which endorsed Terms of Reference on 21 May 2025. The purpose is to ‘[monitor] and [provide] assurance that systems in place within health service organisations continue to improve the reliability, safety and quality of health care’. Members include representatives from the Health Care Consumers’ Association, Carers ACT and ACT Mental Health Consumer Network. The committee meets monthly and reports to the Network Clinical Governance Committee.
- 3.67 Table 3-3 shows representation and attendance at these meetings between May 2025 and October 2025.

Table 3-3 Network Partnering with Consumers Committee minutes

Meeting date	Health Care Consumer's Association attended	Carers ACT attended	ACT Mental Health Consumer Network attended
21 May 2025	✓	✓	✓
18 June 2025	✓	✓	✓
16 July 2025	✓	✓	✓
20 August 2025	✓	✓	✓
17 September 2025	✗	✗	✗
15 October 2025	✗	✓	✗

Source: ACT Audit Office analysis.

Education Directorate

3.68 As discussed in paragraphs 3.30 to 3.31, the Education Directorate has met with CYCLOPS on the following occasions:

- 25 July 2023 'to discuss supports they provide to young carers, how they work with ACT public schools, and how the Directorate could support this network'; and
- 21 May 2024 to 'discuss their updated *Making Education Work for Young Carers Toolkit for Schools* and how it would be promoted to ACT public schools'.

3.69 On 10 July 2023 representatives from the Education Directorate attended an information webinar delivered by Carers Australia on the Young Carer Bursary and how to support applicants.

3.70 The Engagement Plan for a refresh of the *Safe and Supportive Schools Policy* indicates that the Education Directorate plans to consult with CYCLOPS for the purpose of reviewing the policy.



3.71 CHS specifically consults with carers through two key advisory groups: the Consumer and Carer Advisory Committee and CHS Network Partnering with Consumers Committee. The Advisory Committee seeks to provide 'advice to Canberra Health Services (CHS) on the quality and safety of health care provided by CHS. This includes providing consumer and carer perspectives on the experience of care as well as planning, design, delivery, measurement, and evaluation of health care'. The Education Directorate has consulted with carer support services as needed on specific issues.

Human resources policies

3.72 The Act requires agencies to consider the care relationship principles when developing internal human resources policies.⁴³

Canberra Health Services

3.73 The *ACTPS Health Professional Enterprise Agreement 2023-2026* and *ACTPS Administrative and Related Classifications Enterprise Agreement 2023-2026* enables employees to request flexible working arrangements to support their caring responsibilities. Flexible arrangements can include flexible start and finish times, flexible hours, home-based work and reduction of hours.

3.74 The CHS People and Culture team provides information to employees who are carers via:

- an Intranet article entitled 'Caring for those who care for others' which includes advice for managers on supporting staff who are carers;
- a factsheet on the Act which outlines how carers should be recognised and supported; and
- links to external resources (including the Australian Government Carer-Inclusive Workplace Initiative, and ACT Kinship and Foster Carers Resource Hub) on the Canberra Health Services Health Hub.

3.75 The Human Resources Business Partners and Advisory team provides informal and formal advice to managers on recognising carer responsibilities through: HR Advisory support, manager advice and guidance materials and interpretation of enterprise agreement and policy provisions.

3.76 CHS has a Strengths, Engagement and Development (SED) process for staff performance and development, which is informed by a SED Guide. The Guide asks staff what they need and how work arrangements can be improved. One of the examples provided is to discuss flexible work arrangements for carers with additional responsibilities outside work.

3.77 CHS has its own procedures for recruitment and procedures for flexible working arrangements relating to private practice or other commitments. Although these documents refer generally to processes for recruitment and selection of staff, and the flexible working arrangements available to specialists and senior specialists, neither specifically mention care or carers.

⁴³ *Carers Recognition Act 2021*, s 10(2)(b).

3.78 CHS has also adopted several ACTPS-wide human resources policies which potentially benefit carers:

- *ACTPS Work Health and Safety Management System Implementation Policy*;
- *ACT Government Flexible Working Arrangements Policy: Facilitating Flexible Working Arrangements*;
- *ACT Government Flexible Working Arrangements Policy: Working Remotely Interstate or Overseas Policy*;
- *ACT Government Personal Leave Guidelines*, which includes leave to care or support members of an employee's immediate family or household who are ill or injured; and
- *ACTPS Shared Capability Framework* which describes the skills, knowledge and behaviour that can universally be expected of every ACT Public Servant at different levels in every workplace across the Service. It refers to embracing diversity (Domain 2: Team Work) and ethical behaviour (Domain 3: Achieves Results with Integrity) as key capabilities.

3.79 CHS' 2025 ACTPS Employee Survey results indicate that 5.9 percent of respondents to the survey identified as carers.

Education Directorate

3.80 Similar to the *ACTPS Health Professional Enterprise Agreement 2023-2026* and *ACTPS Administrative and Related Classifications Enterprise Agreement 2023-2026* the *ACTPS Education Directorate (Teaching Staff) Enterprise Agreement 2023-2026* also enables employees to request flexible working arrangements to support their caring responsibilities.

3.81 The Education Directorate has recognised the needs of its employees who are carers through:

- *Birth Leave Guideline*: the guideline 'outlines the conditions for birth leave for all staff employed by the Education Directorate' which would be relevant for carers of newborns with additional care requirements, such as a disability or ongoing medical condition; and
- *Primary Care Giver Leave Guideline*: the guideline outlines the eligibility, principles and procedure for school-based teachers, school leaders, school psychologists, school assistants and cleaning services officers seeking primary care giver leave. The guideline states that an employee who has completed 12 months of continuous service and is a primary care giver may access a maximum of 18 weeks of paid leave, commencing before the child is 26 weeks of age. This guideline would be relevant to primary care givers where the child also has additional care requirements, such as a disability.

3.82 The Education Directorate has also recognised the needs of its teachers who may be carers through its *Classroom Teacher Recruitment Guidelines*. The purpose of the guidelines is to outline the procedure and timelines for the filling of classroom teacher vacancies. The guidelines cover compassionate transfers, which provide an avenue for priority consideration for placements in limited circumstances (such as a classroom teacher returning from parental leave who wishes to be placed at a school closer to home, where a vacancy exists). The Directorate has advised that carer responsibilities have been considered in compassionate transfer decisions.

3.83 The Education Directorate's 2025 ACTPS Employee Survey results indicate that 9 percent of respondents to the survey identified as carers.



3.84 Both CHS and the Education Directorate have sought to support staff who are carers in ways directly relevant to each organisation. Both directorates support staff who are carers by virtue of their commitment to flexible working arrangements and ACTPS-wide human resources policies. CHS has a Strengths, Engagement and Development (SED) process for staff performance and development, which asks staff what they need and how work arrangements can be improved. One of the examples provided is to discuss flexible work arrangements for carers with additional responsibilities outside work. The Education Directorate has also recognised the needs of its teachers who may be carers through its *Classroom Teacher Recruitment Guidelines*, which allows for carer responsibilities to be considered in compassionate transfer decisions.

Evaluation

Canberra Health Services

3.85 CHS conducts the following surveys specifically relevant to obtaining feedback from carers:

- Canberra Health Services Paediatric and Neonatal Experience Survey, for carers to give feedback on whether they were listened to, involved in making decisions, kept informed and respected; and
- Consumer and Carer Representative Feedback Survey, for carers to provide feedback on their experience partnering with CHS as carer representatives.

3.86 CHS also surveys consumers, which may involve giving feedback on the treatment of carers. Examples are:

- the Your Experience of Service survey for mental health consumers, which asks consumers if there were 'opportunities for families and carers to be involved in your treatment and care'; and
- the CHS Inpatient Experience Survey, which asks consumers about their overall experience of treatment and care.

3.87 CHS compiles biannual Partnering with Consumers Reports and summarises results from these surveys. The report from July 2025 includes actions to improve partnering with carers, for example Action 2.8 aims to improve access and understanding for carers from culturally and linguistically diverse backgrounds.

Legislative Compliance Self-Assessment

3.88 In November 2025, the Quality, Safety and Governance team within CHS completed a Legislative Compliance Self-Assessment Questionnaire, which assessed compliance with the Act. The self-assessment has two parts. First, it recognises that CHS has obligations as a care and carer support agency under the Act. It assessed CHS as compliant with its obligations, with a medium risk rating. The self-assessment identified nil gaps or actions required.

3.89 Second, the self-assessment recognises that CHS has reporting obligations as a care and carer support agency under section 11 of the Act. It assessed CHS as compliant with these obligations, with a medium risk rating. It cites several 'current controls' as evidence in support of compliance. The self-assessment identified nil gaps or actions required.

Education Directorate

3.90 The Education Directorate participates in the biennial ACTPS Staff Survey. Carers are included as a diversity cohort and the Education Directorate has advised that survey results can be segmented and analysed for the purposes of comparing carer responses with responses from the broader staff cohort.

3.91 The Education Directorate does not specifically evaluate how its support services, programs and policies seek to uphold the care relationship principles, nor does it conduct a legislative compliance self-assessment against the Act.



3.92 CHS collects feedback from carers via surveys and, in November 2025, evaluated its own compliance with the Act via a legislative compliance self-assessment. The self-assessment identified nil gaps or actions required. The Education Directorate collects feedback from staff (including carers) via the biennial ACTPS staff survey. It does not specifically monitor or evaluate its compliance with the Act, e.g. through a legislative compliance self-assessment.



Recommendation 5

Planning and managing implementation

The Education Directorate in its capacity as a care and carer support agency should establish an implementation plan for managing the implementation of the *Carers Recognition Act 2021*.

Appendix A: Carers with specific characteristics

The Act recognises several categories of carers with specific characteristics. A brief description of these categories is provided below.

Young carers

Young carers are ‘people up to 25 years old who provide unpaid care and support to family members or friends who have a disability, mental illness, chronic condition, mental illness, an alcohol or other drug issue or who are frail aged’.⁴⁴

In 2022, 12.9 percent of all carers were under the age of 25, an increase from 8.9 percent in 2018.⁴⁵ In 2020, almost 50,000 young carers were under 15 years of age.⁴⁶ Young carers are over-represented amongst females, Aboriginal and Torres Strait Islander people, and people from culturally and linguistically diverse backgrounds.⁴⁷

Aboriginal and/or Torres Strait Islander carers

It is estimated that 14 percent of the Aboriginal and/or Torres Strait Islander population are carers, compared to 10.5 percent of the non-Indigenous Australian population.⁴⁸ Aboriginal and/or Torres Strait Islander carers living in regional, rural, and remote areas often experience language and cultural barriers and geographic barriers in accessing health and welfare services. They may also face barriers to health literacy.⁴⁹

LGBTIQ+ carers

For the 2022 *Survey of Disability, Ageing and Carers*, the Australian Bureau of Statistics asked carers about their sexual orientation. 3.4 percent of primary carers surveyed described their sexual orientation as gay or lesbian, bisexual, or used a different term such as asexual, pansexual or queer.⁵⁰

⁴⁴ Carers Australia, [Young carers](#) (accessed 3 November 2025).

⁴⁵ ABS, [Disability, Ageing and Carers, Australia: Summary of Findings, 2022 | Australian Bureau of Statistics](#) (accessed 23 January 2026).

⁴⁶ Deloitte, [The value of informal care in 2020](#), p.39 (accessed 29 August 2025).

⁴⁷ ABS, [2071.0 - Census of Population and Housing: Reflecting Australia - Stories from the Census, 2016](#) (accessed 29 Aug 2025); Hutchings, K. et al, *Young Carers in Australia industry research report*, Griffith University: Brisbane, Australia (2021), pp. 5, 12.

⁴⁸ ABS, [Disability, Ageing and Carers, Australia: Summary of Findings, 2022 | Australian Bureau of Statistics](#) (accessed 23 January 2026).

⁴⁹ Carers Australia, [Aboriginal and Torres Strait Islander Carers](#) (accessed 15 April 2026).

⁵⁰ ABS, [Disability, Ageing and Carers, Australia: Summary of Findings, 2022 | Australian Bureau of Statistics](#), see ‘Selected characteristics of primary carers’, (accessed 29 January 2026).

The 2024 National Carer Survey found that the average age of LGBTQ+ carers was 48 years,⁵¹ which was significantly younger than other carers in the sample (58 years).⁵² Across all service types, LGBTQ+ carers were significantly more likely to report negative experiences in terms of carer inclusion. LGBTQ+ carers also felt significantly less recognised for their caring role compared to other carers in the sample.⁵³

Culturally and linguistically diverse (CALD) carers

In 2022, the Australian Bureau of Statistics *Survey of Disability, Ageing and Carers* found that 29.9 percent of primary carers were born overseas and 12.7 percent primarily spoke a language other than English at home.⁵⁴

The Carers Australia webpage states that '[k]ey issues affecting CALD carers include barriers to services, and the quality and effectiveness of those services. Barriers to accessing carer services and supports can vary between individuals, families, or service providers, and can include missing out on financial support such as the Carer Payment and Carer Allowance, and impacts to their health and wellbeing'.⁵⁵

Carers who are people with disability

In 2022, of the 3.0 million carers in Australia, almost two in five (38.6 percent) had a disability.⁵⁶

Young people with disability are more likely to be carers than young people without disability — 6.1 percent of young people aged 0-14 years with disability were carers in 2022, compared with 1.7 percent of people in this age group without disability.⁵⁷

⁵¹ Carers NSW, [2024 National Carer Survey LGBTQ+ carers](#) (accessed 29 January 2026).

⁵² Carers NSW, [2024 National Carer Survey Summary Report](#), p.6.

⁵³ Carers NSW, [2024 National Carer Survey LGBTQ+ carers](#) (accessed 29 January 2026).

⁵⁴ ABS, [Disability, Ageing and Carers, Australia: Summary of Findings, 2022 | Australian Bureau of Statistics](#), see 'Selected characteristics of primary carers', (accessed 29 January 2026).

⁵⁵ Carers Australia, [Culturally and linguistically diverse carers](#) (accessed 3 November 2025).

⁵⁶ ABS, [Disability, Ageing and Carers, Australia: Summary of Findings, 2022 | Australian Bureau of Statistics](#), see 'Disability status of carers', (accessed 29 January 2026).

⁵⁷ ABS, [Disability, Ageing and Carers, Australia: Summary of Findings, 2022 | Australian Bureau of Statistics](#), see 'Disability status of carers', (accessed 29 January 2026).

Appendix B: Jurisdictional comparison

Table B-1 below provides a summary of the relevant legislation in each jurisdiction and whether the legislation establishes reporting obligations and a Carers Advisory Council.

Table B-1 Relevant legislation by jurisdiction

Jurisdiction	Title of Act	Effective	Reporting Obligations	Act establishes Carers Advisory Council
Australian Capital Territory	Carers Recognition Act 2021	10 June 2022	Yes ⁵⁸	No
Commonwealth	Carer Recognition Act 2010	18 Nov 2010	Yes ⁵⁹	No
New South Wales	Carers (Recognition) Act 2010	19 May 2010	Yes ⁶⁰	Yes
Northern Territory	Carers Recognition Act 2006	29 Nov 2006	Yes ⁶¹	No
Queensland	Carers (Recognition) Act 2008	4 May 2009	No	Yes
South Australia	Carers Recognition Act 2005	1 Dec 2005	Yes ⁶²	No
Tasmania	Carer Recognition Act 2023	20 April 2023	Yes ⁶³	No
Victoria	Carers Recognition Act 2012	1 July 2012	Yes ⁶⁴	No
Western Australia	Carers Recognition Act 2004	1 Jan 2005	Yes ⁶⁵	Yes

Source: ACT Audit Office analysis.

Table B-1 shows that:

- the Australian Capital Territory was the second last jurisdiction in Australia to implement Carers Recognition legislation;

⁵⁸ *Carers Recognition Act 2021* (ACT) s 11.

⁵⁹ *Carers Recognition Act 2010* (Cth) s 8.

⁶⁰ *Carers (Recognition) Act 2010* (NSW) s 8.

⁶¹ *Carers Recognition Act 2006* (NT), s 7.

⁶² *Carers Recognition Act 2005* (SA), s 7.

⁶³ *Carers Recognition Act 2023* (Tas), s 7.

⁶⁴ *Carers Recognition Act 2012* (Vic), s 12.

⁶⁵ *Carers Recognition Act 2004* (WA), s 7.

- the Carers Recognition legislation in all states and territories, except Queensland, includes reporting obligations; and
- New South Wales, Queensland, and Western Australia are the only jurisdictions to have established a Carers Advisory Council to represent carers and provide advice to government on issues affecting carers.

Appendix C: CAMHS case study of implementation

The Mental Health, Justice Health and Alcohol & Drug Services (MHJHADS) Division in Canberra Health Services delivers mental health care services including prevention, assessment, treatment and rehabilitation. In doing so, it collaborates with consumers, families, parents and carers.

The MHJHADS Division at the Canberra Hospital is structured in two parts, one providing services to adults and the other providing services to children and adolescents.

Child and Adolescent Mental Health Services (CAMHS) provides assessment and treatment for children and young people up to the age of 18 who present with moderate to severe mental health conditions with some services providing clinical support to adults. These include:

- Eating Disorders;
- Mental Health Intellectual Team; and
- Perinatal Infant Mental Health Services.

The Specialist Youth Mental Health Outreach (SYMHO) team provides assessment and treatment to young people aged 14-25 who are experiencing psychosis and for young people aged 14-18 who are at ultra-high risk of developing psychosis.

Table C-1 provides a summary of key stages of interaction between carers and CAMHS, which demonstrate how CHS implements the care relationship principles in a practical way in delivering a service:

Table C-1 Carer interaction with Child and Adolescent Mental Health Services

Key stage	Description of carer involvement
Infrastructure and design of CAMHS building and facilities	Carers had input into the design of CAMHS spaces including common areas, individual rooms, sensory spaces, de-escalation and isolation rooms.
Governance	Carers are represented on key governance committees such as the MHJHADS Governance Committee, Consumer and Care Advisory Committee and Network Partnering with Consumers Committee.
Policy development and review	Carer organisations, including Carers ACT, provide targeted input into the development and review of policy documents, such as the Procedure for <i>Transition of care for young people receiving mental health services from CAMHS to Adult services</i> .
Education and training for staff	Staff within CAMHS received education and training about carers via a presentation on Including Carers in Mental Health practice.
Admission	Carers and family members are typically present at the time of admission at which staff explain the facility's rules and policies.

Key stage	Description of carer involvement
Tour	Carers are given a tour of the facility and rooms and provided with information about the daily schedule and visiting hours.
Initial assessment	Carers may provide input as CAMHS staff build a detailed picture of the child or young person's mental health.
Family meeting	This meeting occurs as soon as possible after admission and typically involves carers and family members. CAMHS staff may provide tailored information and support for carers/family members in distress.
Multidisciplinary Team Meetings	These meetings occur daily to discuss the treatment for each child or young person. They involve clinicians, psychologists, social workers, occupational therapists, registered nurses and consultant psychiatrists. Consideration of carers needs is built into the meeting agenda.
Care Plan	Risk assessments are completed, and a care plan is designed. Clinical nurses seek out information from carers on individual child or young person needs.
Communication	This occurs throughout care and treatment, in relation to significant changes in behaviour, condition, risk level or a shift to high risk or high dependency etc. Patients can contact family/carers using a landline.
Treatment	Carers are advised of changes in treatment and/or the care plan. Carers may express concerns about medication dosages and discuss this with clinicians. CAMHS staff may request carer permission to administer medication if a patient refuses to accept treatment.
Visits	Carers are able to visit during visiting hours (4-8pm) on Monday – Friday. There are also additional visiting hours on the weekend. Patients may leave CAMHS with a carer/family member during those hours to attend special events.
Discharge	Carers are involved in discharge planning. Carers/family are provided with information about medication, and contact numbers for support services, Carers/family are advised that patient history and information is available through their Digital Health Record.
Feedback	Currently, carers can give feedback directly to staff via email or a consumer and carer feedback form. The Carer Experience Survey is being rolled out for future use in CAMHS.
Provision of advice and further support	Carers are notified of additional supports available, and other services, such as the Adolescent Day program, which is a voluntary four-week program staffed by a multidisciplinary team who offer therapeutic activities for children and young people recently discharged from CAMHS.

Source: ACT Audit Office site visit to CAMHS, 20 January 2026.

Audit reports

Reports Published in 2025-26	
Report No. 03 - 2026	University of Canberra financial governance arrangements
Report No. 02 - 2026	Management of the Home Buyer Concession Scheme
Report No. 01 - 2026	Diversity, equity and inclusion in the ACT public service
Report No. 07 - 2025	2024-25 Financial Audit Program – Overall Results
Report No. 06 - 2025	Annual Report 2024-25
Report No. 05 - 2025	Specialist assessment services for dementia and cognitive decline
Reports Published in 2024-25	
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Report No. 09 - 2024	2023-24 Financial Audits – Overview
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