

6 December 2024

Department of Health and Aged Care GPO Box 9484 Canberra ACT 2601 Australia Online submission: <u>Consultation | Department of Health and Aged Care</u>

# Age Care Consultation: Funding for the Support at Home Program

National Seniors Australia (NSA) welcomes the opportunity to provide feedback to stage 2a on the draft rules on Funding for the Support at Home Program (draft rules). NSA is the leading advocacy organisation for older Australians. Through our research and advocacy activities, NSA works to improve the well-being of all older Australians.

The new Support at Home Program has the potential to improve aged care services. Ensuring a smooth transition, addressing potential inequities, and supporting the workforce are critical to its success.

While we appreciate the efforts to engage stakeholders during this stage, the draft rules' lack of detail significantly limits our ability to provide comprehensive and considered feedback. Our submission highlights several omissions and inconsistencies that need to be addressed to enable stakeholders to better understand the rules for the new Support at Home Program.

For example, it is disappointing the *Simplified outline of this instrument* (Part 1, Section 4) is missing and is "To be drafted". We understand this may reflect the draft status of the Aged Care Rules 2024. However, it is critical for consultation purposes that the outline be included as it would offer a clear summary of the rule's scope, purpose and application. This would assist advocacy organisations, such as NSA, and older Australians and their families to understand the proposed rules so they can provide useful feedback to the Department of Health and Aged Care.

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There is a lack of information within the draft rules about how certain payments operate (e.g. interim budgets). This hinders our ability to provide feedback or to understand whether payments are adequate.

We are therefore concerned that the amounts listed for funded services are inadequate question why the draft rules do not include references to annual indexation or future review of payment amounts to ensure payments remain adequate over time.

By addressing these inconsistencies and providing clear information about the proposed rules, stakeholders will be better placed to provide considered feedback.

A carefully designed funding framework for the Support at Home Program, with clear rules, conditions, and procedures for allocating, managing, and utilising funds under the program, will assist older Australians and their families when accessing appropriate care and services.

More substantive feedback about specific issues is provided below as an attachment to this correspondence.

Yours sincerely,



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## Substantive feedback

### Interim budgets

The inclusion of interim budget levels for Support at Home packages raises questions about how these packages will be allocated and under what conditions.

The draft Rules include the amount of funding that an individual may receive under S 204 *for the purposes of the Act.* S 204 states:

"the following table sets out the base provider amount for a registered provider in relation to an individual covered by ... of the Act for individuals for the classification type ongoing for the service group home support.

According to the draft rules an individual may be eligible for an interim budget.<sup>1</sup> However, we note that the term *"interim budget"* is not set out in either the consultation draft, the Aged Care Bill 2024, nor its explanatory memorandum.

From the **Support at Home program Handbook** (Handbook)<sup>2</sup> available on the Department of Health and Aged Care website, it states,

"Under Support at Home, when wait times for services exceed expectations, participants will be assigned an interim allocation of their Support at Home classification budget while waiting to receive their full funding".

This will be set at 60% of their budget, with the remaining 40% allocated when the funding becomes available. Wait times will vary by priority level. "More details about the new prioritisation mechanism will follow in the coming months."

The Handbook does not provide information on how an interim allocation is assigned, and disappointingly, the draft rules do not clarify on what basis an individual will be assigned an interim budget allocation. It is unclear under what conditions, if at all, the department is obliged

<sup>&</sup>lt;sup>1</sup>New Aged Care Act Rules Consultation Release 2a

<sup>&</sup>lt;sup>2</sup> Support at Home Program Handbook



to offer an interim budget. We are unsure how an individual has the right to be allocated an interim budget and under what time frames.

The lack of a formal process for allocating an interim package raises concerns about the rationing of interim packages within the Support at Home program. This makes it challenging for older Australians to understand how the new program will operate and what they can expect. According to the latest available information, nearly 75% of individuals on the Home Care waitlist have never been offered an interim Home Care Package<sup>3</sup>. Our concern is that, without a formal prescribed process, this will continue under the new Support at Home program.

A significant criticism of the Royal Commission into Aged Care Quality and Safety was the rationing of aged care services, including home care packages. This rationing resulted in many older Australians being unable to obtain the care and support they were assessed as needing. The Commissioners stated in their final report that:

"The aged care system has been affected by piecemeal approaches and policy compromises that detract from quality care. For several decades, one of the priorities for governments dealing with the aged care system has been to restrain the growth in aged care expenditure. This priority has been pursued irrespective of the level of need, and without sufficient regard to whether the funding is adequate to deliver quality care. This has occurred through limiting expenditure without accounting for the actual cost of delivering services, rationing access to services, and neglecting reform of the funding model" <sup>4</sup>.

NSA agrees and wants to see a needs-based, demand-driven system that ensures aged care services are accessible to all individuals based on assessed needs without arbitrary caps, limitations or rationing. However, unless there is a formal defined process for allocating packages within the Aged Care Act or the Aged Care Rules, this rationing will likely continue, despite changes to the funding model to increase available funds.

Home Modifications Division 3 - Tier Amounts

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<sup>&</sup>lt;sup>3</sup> Australian Institute of Health and Welfare (AIHW) Home Care Packages

<sup>&</sup>lt;sup>4</sup> Aged Care Royal Commission Final Report: Care, Dignity and Respect Volume 2, p188.



We are concerned the funding caps for Low-Tier Home modifications need more careful consideration, partly because there is no detail on how these have been set and differences between the Handbook and the draft rules. While we acknowledge that the Handbook was written in advance of the draft rules, we would like to understand the logic used to determine a cap of \$500 in the Handbook (refer to Table on page 45), versus \$1,000 in Section 221 of the draft rules<sup>5</sup>. Inconsistencies like these create considerable confusion for stakeholders, which undermines the effectiveness of consultation efforts.

There is also a lack of clarity about what funding can be used for. This relates to questions about how these rates are determined. For example, the draft rules propose an annual allocation of \$1,000 for continence products and \$2,000 for assistance dogs under Section 212A of the draft rules. These figures appear to be approximate and subject to change.

As there is limited information about what these payments can be used for, this raises concerns about the adequacy of these payments. We would like the legislation to stipulate a formal process for reviewing these payments to ensure they are adequate and appropriately targeted in the future. For example, such payments must have indexation applied to continue to be sufficient and should be reassessed periodically to ensure they meet needs and costs.

### Home Modifications High Funding Tier - Lifetime Cap

The consultation draft applies a \$15,000 lifetime cap for Home Modifications under the high funding tier. Yet, there is no information about how or why a person would be classified as HM high. As such, we do not understand why, according to the Handbook, a person only has 12 months (with a possible extension of 12 months) to spend this money. Without clearly understanding the method for categorising people as low, medium or high, we question whether the 12–24-month period is adequate or fair.

There is also a question about whether the timeframe adequately accommodates circumstances where a person is approved for the payment but cannot find appropriate services to deliver the modifications within the proposed timeframe.

### **Continence Products**

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<sup>&</sup>lt;sup>5</sup>Support at Home Program Handbook



NSA questions whether the amount provided for continence products is appropriate and adequately nuanced to account for differing needs. Cost analysis informs us that given the average cost of \$1.70 per disposable incontinence underwear, an annual budget of \$1,000 would cover approximately 588 products, equating to about 1.6 per day. This may be insufficient for an individual requiring more frequent changes, potentially leading to out-of-pocket expenses.

Individuals should have access to budget that reflects their needs. According to funding reform webinar Q&A fact sheet:

Under AN-ACC, funding is linked to each classification (1 - 13) based on the measured average costs of providing all the specified care and services as needed for the people in each class. This means all care recipients who reside at a residential aged care home on a permanent basis will be required to receive continence products through their aged care home, based on need

It is crucial to ensure that funding adjustments do not disadvantage older Australians with high needs yet is appropriate for those with lower requirements. It does not provide dignity to an individual if they cannot access these hygiene basic products due to funding restrictions.

### Assistance Dogs

The proposed \$2,000 allocation for assistance dogs lacks detailed information on what expenses it covers (e.g., training, maintenance, veterinary care).

Additionally, funding adequacy must be reviewed regularly to reassess proposed funding amounts, ensuring they align with the actual costs incurred by individuals and accounting for price inflation. This will help guarantee that allocations are sufficient to meet the needs of older Australians without causing financial strain in the future.

### Conclusion

Our submission highlights several key areas requiring attention.

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The draft rules should include a draft *simplified outline of this instrument* to ensure stakeholders have adequate information to provide feedback.

There is a lack of information within the draft rules about how certain payments operate (e.g. interim budgets). This hinders our ability to provide feedback or to understand whether payments are adequate.

We question whether the amounts listed for funded services is adequate and wonder why the draft rules do not include references to annual indexation or future review of payment amounts to ensure they remain adequate over time.

Addressing these concerns will better fulfil the objectives of the draft rules for the Support at Home Program providing equitable, sustainable, and quality care to older Australians.

NSA remains committed to collaborating with the Department of Health and Aged Care to ensure the program's success and welcomes continued engagement throughout this consultation process.