

# Stage 4b

# Aged Care Rules

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## Contacts



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## About UnitingCare Australia

UnitingCare Australia is the national body for the Uniting Church's community services network and is an agency of the Assembly of the Uniting Church in Australia.

We give voice to the Uniting Church's commitment to social justice through advocacy and by strengthening community service provisions.

The UnitingCare Network is the largest network of social service providers in Australia, supporting 1.4 million people every year across 1,600 urban, rural and remote communities. We focus on articulating and meeting the needs of people at all stages of life and those that are most vulnerable.

The UnitingCare Aged Care Network is the largest not-for-profit aged care provider network in Australia. Our services support approximately 97,000 older people, comprising 8.5% of total residential beds and 10% of Home Care Packages nationally.

## Introduction

UnitingCare Australia welcomes the opportunity to provide a submission on stage 4b of the Aged Care Rules ('Rules') consultation process. We have previously lodged submissions on Stage 2a and Stage 2b. Topics to be addressed are the prioritisation and place allocation process for access to the Support at Home Program, and entry into residential aged care.

## Prioritisation – Home Support

UnitingCare Australia notes that under the new Rules, the queue for home support will be determined through a points system and priority categories (section 87-5). While we agree that people with higher or more urgent needs should receive care more quickly, we are concerned about the cohort of individuals that may perpetually sit in the Standard and Medium categories and wait several months before they can access the Support at Home Program. We recommend there be a strong focus on transparency, so that people can have confidence in the system and understand the rationale for their place in the queue.

### Points system

While UnitingCare Australia supports the circumstances that makes someone eligible for an extra point, such as a cognitive impairment, a risk of homelessness, or living in a certain MM category, there will be a vast amount of people who won't obtain any points until they've waited more than 6 months. This could include someone living in a metropolitan area with their spouse, without any cognitive impairment. Even once they have an additional point because they've waited for six months, it still won't guarantee eligibility for a High or even Medium priority, and they may never move out of the Standard category.

The circumstance listed as "the individual has a need for urgent access to services" is welcome, however it's not clear whether this would be met through results of an assessment, and what discretion the Department would have in assigning someone two points for this reason. We would urge the Single Assessment Team and the Department to be consistent and disciplined in their application of this category. Transparency will also be crucial here so that older Australians can have confidence in the system and understand the rationale behind their place in the queue.

### Prioritisation

We understand the current National Prioritisation System has allowed a fairly consistent approach to prioritising access to Home Care Packages. This is noting the default priority is 'medium' and only a small percentage of clients are approved as 'high priority'. However, with the four prioritisation categories proposed under these Rules, and the large volume of people looking to access home care, it's not clear whether only those in the Urgent and High categories would realistically gain access, or whether there'd be an equitable approach to providing access all four categories. In other words, if everyone is sitting in the same queue, then it's possible that the Urgent and High categories will never be exhausted, and some individuals may perpetually sit in the Standard category with no expectation of moving up the queue. We question what their options will be.

### Communication

In terms of communicating to the older person, it's not clear whether they will be told what category they have been assigned and what this means for expected wait times and their place in the queue. We encourage the Department to consider what level of transparency will be offered to older people waiting to access home support.

In addition, while those in the Standard and Medium categories may not have an immediate need for services, this could change over time. The Department will need to clarify what people's options are if their needs change, and whether they must undergo a new assessment to be assigned more points. Otherwise, if an individual's only option is to wait for six months before gaining an extra point and potentially move up a category, that should be made clear.

### Transition arrangements

Lastly, with over 83,000 people currently on the waitlist for a Home Care Package, we query how they will be grandfathered to the new queue for Support at Home. Will they be automatically prioritised as needing urgent access, (regardless of what points they might be assigned under the new system), or will they be assigned a category based on their most recent assessment and be morphed into the Support at Home queue? This needs to be made clear so expectations are managed with older people and their families.

## Urgency Ratings – Residential Care

UnitingCare Australia also holds concerns about the criteria for assigning an urgency rating to an individual seeking to access residential aged care (section 87-10). The criteria for a High rating is sensible and clear, however the lack of nuance in the Medium and Low ratings may result in an individual being assigned a category that does not reflect their needs or is no longer relevant as their needs change.

On the face of this proposed rule and associated provisions in the Act, an individual would be assigned a Low rating if they are not expected to seek access to residential aged care in the next six months. It's understood this would be based on a prioritisation report by an approved needs assessor. However, even if an individual is assigned a Low rating, their needs may change rapidly and then the Medium or High rating is more appropriate. We query what discretion or levers the Department will have to move an individual up a rating and what the required processes are, i.e. will the individual need to undergo another assessment?

### Communication

We note that being assigned the Medium category means the individual is expected to seek access to residential care in the next six months. While the prospect of seeking access is the threshold, people are likely to believe that seeking an assessment is equal to seeking access. They will then wonder why they cannot move into residential care as soon as they would like. With this in mind, we encourage the Department to issue appropriate guidance which outlines what the urgency ratings mean for how long an individual may need to wait.

Lastly, we note that under the new places to people model, a stated benefit for residential providers is that they will have greater freedom to adjust and expand service offerings to meet demand. Meeting demand can only happen with visibility of that demand. Therefore, we urge the Department to consider what transparency will be offered to providers about the number of people in their area that have been assigned to each urgency rating, so they can plan bed allocation and case mix as appropriate.

## CHSP Service Agreements

The Rules include the details of the new requirement for Service Agreements with people accessing CHSP (Section 148-70 (5)). Alongside the broader industry, UnitingCare Australia holds concerns around this new requirement, including use of individual agreements not typically required in block funded programs, as well as the appropriateness and need for formal service agreements for low risk service types, such as transport. Importantly, we are concerned about the significant work required to develop agreements and negotiate them with CHSP clients. For most providers in our network, these agreements would need to be created for thousands of clients.

We note there is ongoing uncertainty regarding the deeming of existing CHSP service arrangements under the new Act. We recommend the deeming arrangements for CHSP consumers are formalised and published, and we call for the urgent release of the transition arrangements for introducing Service Agreements for CHSP consumers.

## Conclusion

UnitingCare Australia acknowledges the efforts that have gone into finalising these Rules, and we welcome the opportunity to discuss these matters further with the Department. We thank you for the opportunity to contribute to this important process.