



**Carers Queensland Ltd. submission to –
Department of Health
Future reform - an integrated care at
home program to support older Australians
discussion paper**

August 2017

AN AUSTRALIA THAT VALUES AND SUPPORT ALL CARERS

Submission Title: Department of Health. Future reform –
an integrated care at home program to support older Australians

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CARERS QUEENSLAND LTD.

Family and friend carers provide unpaid care and support to family members and friends who have a disability, mental illness, chronic medical condition, terminal illness or are frail aged.

The activity and impact of providing care is best understood in terms of its context; as a relationship between two or more individuals, rooted in family, friendship or community. Caring is a role rarely chosen by most, nor does it discriminate. Children and young people, people of working age and older people, people with disability, people who identify as culturally and linguistically diverse, indigenous Australians, people with diverse bodies, genders, relationships and sexualities and those living in rural and remote Queensland provide care to a family member or friends on a daily basis. For some caring is a short-term commitment whilst for others, it is a role that literally lasts a lifetime.

Carers Queensland Ltd. is the peak body representing the diverse concerns, needs and interests of carers in Queensland. Carers Queensland believes that all carers regardless of their age, disability, gender expression or identification, sexual orientation, religion, socioeconomic status, geographical location or their cultural and linguistic differences should have the same rights, choices and opportunities and be able to enjoy optimum health, social and economic wellbeing and participate in family and community life, employment and education like other citizens. Carers Queensland's mission is to improve the quality of life of all carers throughout Queensland.

We believe we are in a unique position to advocate on behalf of the 474,400 carers living in Queensland. We aspire to provide an independent platform from which to advance the issues and concerns of carers and believe our knowledge and expertise in carer issues means we are able to provide the Government and industry with relevant and trusted information that will ensure that the needs of carers will be recognised, respected and acted upon. Our ambition is to ensure that carers are recognised and included as active partners in the development of government health and social policy, legislation and service delivery practices.

Our submission is informed by national and international peer reviewed data, our own experience as an aged care service provider, regional assessment service subcontractor, specialist carer support service provider and the personal and often difficult admissions of carers, those people who provide unpaid care and support to the most vulnerable in our society – children, adults and older people with disability, mental health problems, life-limiting illnesses, cognitive impairment and challenging behaviours.

ABOUT CARERS QUEENSLAND

Carers Queensland Ltd.

Stakeholder Categories

- ✓ Home care package provider
- ✓ Regional assessment service subcontractor
- ✓ Peak body – carers

Area of Operation

- ✓ Queensland

Permission to Publish

- ✓ Yes, publish all of my responses

POLICY CONTEXT

Australia's contemporary social policy with respect to carers is both complex and contradictory. The policy promotes a philosophy of choice whilst simultaneously reinforcing a welfare ideology that places the moral imperative on families to assume the caring role. This normalises the role of family and friend carers as providers of community and aged care. Consequently, carers have assumed responsibility for managing increasingly complex care and administrative arrangements and the associated risks without adequate support and resources.

RESPONSES

Carers Queensland commends the Commonwealth Department of Health on this much-needed review of care at home programs and welcomes the opportunity to respond.

Response 2.3

Carers Queensland supports the February 2017 reforms.

Response 3.1

Carers Queensland supports the 12 policy objectives listed in the Future Reform Discussion Paper, and recommend the following additions and deletion.

1. Insert additional policy objective:

- *Recognise and respect the contribution of family and friend carers*

Underpinning principle:

- a. *Giving effect to the Carer Recognition Act 2010 (Cth) and implementing The Statement for Australia's Carers*

2. Insert additional policy objective:

- *Seamless delivery of services between the aged care, health (particularly palliative care and chronic disease management) and disability sectors.*

3. Deletion of policy objective:

Carers Queensland does not believe *minimises red tape and unnecessary regulation* is a policy objective and recommend its removal from section 3.1.

Response 4.2

Carers Queensland supports the integration of the Regional Assessment and the Aged Care Assessment teams into one service.

Carers Queensland believes that the many benefits of an integrated assessment service to the consumer and the aged care sector outweigh other industrial arguments. The benefits include but are not limited to:

- ensuring consistency of approach to assessment practices
- provision of enhanced career options for existing regional assessment staff
- increasing availability of assessors in rural and remote areas
- reducing the number of different assessors, the consumer and/or their nominated representative has to communicate with over the aged care journey
- increasing availability of assessors with knowledge in specialist areas (e.g. Indigenous health, rural and remote health etc.).

Response 4.3.1

As a regional assessment service subcontractor and aged care provider, we respectfully recommend:

- i. the abolition of Home Care Packages Level 1
- ii. the transfer of this funding to Level 4 package funding
- iii. we do not support the establishment of Level 5 packages
- iv. we do not support any reduction in residential care funding to enhance home care funding

Response 4.4.1a

As a state based organisation Carers Queensland appreciates the cost and logistical issues inherent in delivering support services to rural and isolated populations. As such, we support the continuation of mixed funding (e.g. individualised budgets and block contracts); ensuring the continuity of service delivery where demand is low and open market viability is nil.

We believe the only reasonable and sustainable option in rural, remote and isolated areas is to continue to block contract some services.

We support ongoing block funding for services:

- that rely heavily on volunteer support (meals on wheels),
- are capital and infrastructure intensive (transport, day social support)
- support the carer in their caring role (information, unaccredited training and counselling)

Response 4.4.1b

From our experience, we know that many consumers and/or their nominated representatives do not have the knowledge or skills to effectively manage their individualised budget or select and arrange appropriate services. We support the use of independent agents to assist and support consumers to manage their budget and purchase their support service prudently.

We believe that whilst individualised funding may be appropriate for many it is not a suitable option in rural and remote areas where there is little or no market from which to choose support services.

Response 4.4.1c

Carers Queensland respectfully recommends that the Commonwealth investigate the use of vouchers; issued to an eligible consumer and/or their nominated representatives to exchange for specified services from approved providers on a 'as needed basis'. This model has been in operation in England and Wales successfully since 1998. The voucher system is genuinely consumer directed – enabling the consumer and/or their nominated representative to 'purchase or arrange' services on demand (ad hoc or episodic needs) without the necessity for an expensive and time-consuming repeat assessment. Vouchers can be used effectively in conjunction with other funding methods.

Response 4.5.1.

Carers Queensland does not support the institution of reablement/restorative support plans as the initial response to a referral for ongoing support. We believe a blanket approach to reablement and restorative care is contrary to the philosophy of consumer directed care and is disrespectful to those individuals whose condition/s is such that it would be inappropriate (e.g. those with palliative care needs).

Response 4.6.1

Carers Queensland recommends the development of dual or multi-purpose campuses that provide accommodation and support services for different population cohorts. Such dual-purpose sites would accommodate family members in specialist facilities, whilst enabling them to maintain easy contact with each other. For example, such a campus would have available both accommodation (aged/dementia/disability/mental health) and other support services such as dedicated respite or social support facility on the one site.

Response 4.6.2

We would hope that in a consumer directed environment service providers would prioritise the consumer's needs and, as and when required, source support service/s from other providers to meet the identified needs of the consumer. We believe the service providers have the accountability and responsibility to ensure that their consumers receive the services necessary to live as independently as possible in their community.

We do not support the institution of limits or restrictions that would see consumers and their nominative representatives in a position whereby they cannot access service/s.

We believe service providers should institute regular reviews to ensure that:

- The service arrangement/s meet the consumer's identified support needs/goals.
- Their own fiscal management ensures the ongoing viability of their organisation.

Response 4.6.2b

No – services should be provided based on identified ongoing need and the provision of ongoing services should be determined through regular review processes.

Response 4.8.1

Carers Queensland respectfully recommends and supports a 'block contract' model for those difficult to engage consumers or those consumers with a transitory lifestyle. For example - grey nomad consumers with nursing needs such as catheter care should be able to access nursing services as and when required at their current location by presenting the approved paperwork to an appropriate agency.

Response 4.8.2

We support the implementation and use of independent advocates (or systems wranglers) to assist consumers and their nominated representative to navigate the system and effectively communicate their needs, goals and issues with assessors and potential service providers.

Response 6.1.1

As the peak agency representing family and friend carers we understand the contribution carers make to the lives of the people they care for and support; the economic value of that support to the health and social care sectors and the personal costs incurred by carers including poorer health and wellbeing.

As such, we recommend that carers:

- Have the right to an assessment of their own concerns – their ability and willingness to continue to provide care and support
- Are included in the assessment processes – ensuring that the support plan can/will support the consumer and the carer
- Have access to respite outside of the support plan. The current policy of 'only emergency respite' being available outside of the support plan fails to recognise the needs of carers and diminishes them to nothing more than unpaid labour. Many carers have spoken of how demeaning it is to plead for additional respite, of having their need/s for respite being 'judged' by service providers, many of whom operate from a moral position rather than an inclusive, client directed philosophy.

Response 6.1.2a &b

We support the provision of technology through accredited providers (such as state health departments) who can:

- Purchase goods on contract; that is a lower cost than purchasing independently
- Offer equipment and technology to those consumers whose circumstance make them eligible for 'hardship' provision.

In rural and remote areas, we suggest greater collaboration with already established and respected agencies such as the Royal Flying Doctor Service to assist with the supply of consumables and equipment as identified in support plans.

Response 6.1.3

- Financial incentives for service providers – such as higher unit costs fees, subsidies for fuel, provision of subsidised accommodations for service provider staff.
- Additional time to undertake and complete basic training re My Aged Care.
- The provision of 'back-up' systems to compensate when the internet is not operational.
- Establishment of agreed procedures for implementation during adverse weather events to ensure the delivery of vital services or essential consumables and equipment.