

Submission on a New Program for In-Home Aged Care: Discussion Paper

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Overview

Volunteers are an essential but distinct component of Australia's aged care workforce.

In this submission, Volunteering Australia responds to the Department of Health and Aged Care's discussion paper outlining proposed reforms to in-home aged care. We argue that the development of the new program needs to specifically consider the nature of volunteer roles and how it will promote and support volunteer engagement.

In relation to the broader suite of aged care reforms, the Australian Government needs to take a more strategic approach to volunteers in the aged care sector, through the development of a national aged care volunteering framework, and to consider the role of volunteers in meeting reform objectives.

Introduction

Background and context

Volunteers are a vital part of the aged care workforce, as recognised in the Aged Care Workforce Strategy¹. The Royal Commission into Aged Care Quality and Safety recommendation 44² set out how the Australian Government should promote volunteers and volunteering in aged care to support older people to live meaningful and dignified lives.

Participation of volunteers in organisations has been declining for well over a decade, with aged care volunteering particularly badly hit since the onset of COVID19³. The Australian Government has funded Volunteering Australia to lead the development of a new National Strategy for Volunteering⁴ in response to this decline and other challenges being faced.

Reform in aged care needs to be understood in this wider volunteering context and support the continued, and increased, engagement of volunteers in aged care.

About the consultation

The Department of Health and Aged Care (the department) is leading the development of a wide range of reforms including a new Aged Care Act, regulatory model and mandatory Code of Conduct. This follows several reviews into aged care, including the Royal Commission into Aged Care Quality and Safety, which all found that the aged care system needs significant improvement.

In line with the Royal Commission's recommendation, the Government is developing a new in-home aged care program, which will begin on 1 July 2024.

¹ <https://www.health.gov.au/resources/publications/a-matter-of-care-australias-aged-care-workforce-strategy>

² The full list of the Royal Commission's recommendations available here
<https://agedcare.royalcommission.gov.au>

³ <https://www.volunteeringaustralia.org/wp-content/uploads/AGED-CARE-CENSUS-2020-factsheet-Final.pdf>

⁴ <https://volunteeringstrategy.org.au/>

The “*New Program for In-Home Aged Care Discussion Paper*” seeks views and feedback on the development of the initial new in-home aged care program. The department has sought responses to five questions:

- What are your views on managing services across multiple providers?
- What are your views on Care Partners for Older Australians?
- What are your views on a funding model that supports provider viability and offers value for money?
- What are your views on support that meets assessed needs but is responsive to changes over time?
- What are your views on encouraging innovation and investment?

About the submission

This submission was drafted by Volunteering Australia in collaboration with the State and Territory peak volunteering bodies.

This submission first describes the roles that volunteers play in in-home aged care and the scale of their involvement. This is important, as while several of the questions posed in relation to the discussion paper do not appear directly relevant to volunteering, volunteers do work throughout in-home aged care and are a diverse and significant element of the workforce. The submission provides feedback on possible unintended consequences that require mitigation, general considerations and opportunities for innovation to support volunteer engagement.

This submission complements previous ones concerning aged care and the wider care and support sector, most recently:

- Submission on the Aged Care data strategy⁵
- Submission on the Care and Support Sector Code of Conduct⁶
- Submission on Aligning Regulation across Aged Care, Disability Support, and Veterans’ Care⁷
- Submission to the Royal Commission into Aged Care Quality and Safety⁸.

About in-home aged care in Australia

In-home aged care supports about 1 million older Australians⁹. These services range from transport and house cleaning to clinical care, such as nursing and allied health. Volunteers are active in many of these areas of support from meal delivery and transport to domestic care and companionship.

⁵ <https://www.volunteeringaustralia.org/download/153/2022/30934/volunteering-australia-submission-on-the-aged-care-data-strategy.pdf>

⁶ <https://www.volunteeringaustralia.org/download/154/2021/26963/december-2021-submission-on-the-care-and-support-sector-code-of-conduct.pdf>

⁷ <https://www.volunteeringaustralia.org/download/154/2021/26964/december-2021-submission-on-aligning-regulation-across-the-care-and-support-sector.pdf>

⁸ <https://www.volunteeringaustralia.org/download/142/2020/22701/july-2020-submission-to-the-royal-commission-into-aged-care-quality-and-safety.pdf>

⁹ <https://www.health.gov.au/resources/publications/a-new-program-for-in-home-aged-care-summary>

The current in-home aged care system includes 4 government-funded programs:

1. Commonwealth Home Support Programme¹⁰ (CHSP) provides entry-level services to support older Australians with daily living.
2. Home Care Packages¹¹ (HCP) assists older Australians with more complex care needs to live independently and safely at home.
3. Short-term Restorative Care¹² (STRC) helps older Australians to manage and adapt to their changing aged care needs.
4. Residential respite¹³ enables older Australians to stay at an aged care home for a short time. Respite can be organised in advance and available in unexpected situations.

The new program for in-home aged care encompasses each of these programs.

Volunteers in in-home aged care

Volunteers contribute in significant and diverse ways across aged care. The 2016 National Aged Care Workforce Census and Survey estimated that volunteers were engaged extensively across aged both residential and in-homes care, with 51 per cent of home care and home support outlets engaging the services of volunteers.

The roles volunteers undertake differ across residential and in-home aged care. For example, volunteers are more likely to undertake 'shopping/appointment assistance' and 'meal-preparation assistance' in in-home aged care than in residential facilities. Community aged care providers are more likely to engage volunteers in 'transport assistance' than residential aged care providers¹⁴.

The more recent 2020 Aged Care Census¹⁵ revealed that volunteers were disproportionately affected by the COVID-19 pandemic compared to the paid workforce, with volunteer activity decreasing significantly and not yet returning to pre-pandemic levels. This has been evident across both residential and in-home care.

Volunteers also fulfill an important role within the context of the Aged Care Diversity Framework, formulated by the Department of Health in 2017 to guide consumers, aged care providers and the government to build inclusive practices in the aged care sector.¹⁶ Around one-third (37%) of older Australians are born overseas, with 18% speaking a language other than English and 6% speaking little or no English.¹⁷ Volunteers from culturally and linguistically diverse communities play an important

¹⁰ [Commonwealth Home Support Programme](#)

¹¹ [Home Care Packages](#)

¹² [Short-term Restorative Care](#)

¹³ [Residential respite](#)

¹⁴ 2016 Aged Care Census

¹⁵ <https://www.volunteeringaustralia.org/wp-content/uploads/AGED-CARE-CENSUS-2020-factsheet-Final.pdf>

¹⁶ <https://www.who.int/en/news-room/fact-sheets/detail/human-rights-and-health>; Aged care diversity framework pg. 2

<https://www.health.gov.au/sites/default/files/documents/2019/12/aged-care-diversity-framework.pdf>

¹⁷ Older Australians – Web Report, Australian Institute of Health and Welfare, 30 November 2021

30 November 2021, <https://www.aihw.gov.au/reports/older-people/older-australians/contents/about>

role in the aged care sector. They work with older people from similar backgrounds to provide language support, interpretation, and faith-based services.¹⁸

The wide-ranging reforms being developed from now through until 2025 need to rebuild, drive and embed volunteer participation in aged care. The extent of reforms and the failure to delineate volunteers from paid workers risks unintended consequences to the volunteer workforce.

To mitigate this, the Australian Government needs to take a more strategic approach to volunteers in the aged care sector, through the development of a national aged care volunteering framework, and to consider the role of volunteers in meeting reform objectives.

Proposed new in-home aged care program: overarching considerations

Volunteers are different from paid workers in their role types, obligations and work expectations. Our main concern is for volunteers to be considered as an essential, but distinct, component of the aged care workforce in designing and implementing the new in-home care program.

While the new program is necessarily provider focused, volunteers are not specified in the documentation on the new program. This makes it difficult to engage in the consultation, and we urge the department to rectify this in all future engagements.

The new in-home program needs to ensure the regulatory burden on volunteer engagement is lightened. Too often, new regulatory requirements are introduced without consideration of their impact on volunteers and typically increase the regulatory burden on volunteers.

The new National Strategy for Volunteering is currently in development. In the discovery phase of the project, which involved over 400 consultation meetings and forums earlier in 2022, one of the key insights that emerged was the burden of current regulation.

In the Discovery Insights¹⁹ report, the volunteering ecosystem called for 'fit-for-purpose' regulation and highlighted several concerns with existing regulatory regimes in placing burdens on organisations and in discouraging volunteers.

Regardless of merit, the proposed systemic changes could result in a period of uncertainty and fear for older Australians with the introduction of increased personal responsibility and new technologies (particularly where there are technology literacy and access challenges). The roll-out will have to be carefully implemented for all involved. It could negatively affect volunteers if they need to assist older Australians to navigate the new system and could reduce volunteer satisfaction if frustrations or concerns are directed towards them. This in-turn can impact volunteer retention and workforce management.

¹⁸Actions to Support Older Culturally and Linguistically Diverse People, Department of Health, 2019 <https://www.health.gov.au/sites/default/files/documents/2019/12/actions-to-support-older-cald-people-a-guide-for-aged-care-providers.pdf>. National Ageing and Aged Care Strategy for People from CALD backgrounds, 2012. <https://fecca.org.au/wp-content/uploads/2015/06/national-cald-aged-care-strategy.pdf>

¹⁹ <https://volunteeringstrategy.org.au/wp-content/uploads/2022/08/National-Strategy-for-Volunteering-Discovery-Insights-Report.pdf>

Responses to specific consultation questions

Q1: What are your views on Managing Services Across Multiple Providers?

Through the Department of Health and Aging's consultation process, many older Australians voiced a desire for more choice and flexibility on the providers they use to ensure better targeted care, deal with service scarcity (particularly in remote, rural and regional Australia) and allow them to choose the best quality care for them. While many older Australians were happy to use a single provider, the option to engage other providers was strongly supported.

The majority of aged care volunteers work for one volunteer involving organisation or provider (for example Meals on Wheels) even if they assist multiple aged care recipients. It is unclear whether or how a multiple provider approach might impact on volunteers and volunteer engagement. It is critical that volunteers are considered in the implementation of this model to ensure volunteers are not adversely impacted by lack of coordination, double-bookings or uncertainty around schedules between multiple providers. These issues could have a negative impact on volunteer engagement and retention.

As such, with in-home aged care recipients able to manage their own suite of providers, we support a case management approach to coordinate the various care streams. This element is partly addressed through the care partner concept in question 2.

Q2: What are your views on Care Partners for Older Australians?

During the department's co-design process for in-home aged care, older Australians emphasised that care management should be a partnership between themselves and an appropriately trained person – or care partner – who can support them to achieve the best outcomes from aged care services.

The role involves clinical oversight and monitoring to understand and identify the changing needs of older Australians. It also includes an element of checking and safeguarding the safety of the older Australian. While care management also includes an element of onboarding and coordination of services, the focus is not on administrative tasks such as scheduling care workers.

Volunteering Australia supports the concept of a care partner, especially in a multi-provider setting to ensure care is targeted, fit-for-purpose and delivered in partnership with the older Australian. It is critical, however, that the inclusion of a care partner is seamless for volunteers.

Volunteers are generally onboarded, trained, managed and rostered by a single organisation. While ensuring the volunteer continues to be considered part of the overall package of support, the change to a care partner model must not involve any additional requirements for the volunteer including reporting, training and coordination. To avoid additional complexity, the care partner relationship should be between the care partner and the volunteer manager or volunteer involving organisation.

Q3: What are your views on a funding model that supports provider viability and offers value for money?

The Royal Commission²⁰ proposed a new funding model to support in-home aged care and support services through a mix of grants and activity-based funding and either an individualised budget or case-mix classification approach. The model proposed by the department in this discussion paper reflects this and is a mix of grant funding and arrears-based service payments.

Consideration needs to be given to how the proposed new funding model affects volunteer engagement. Volunteering is time freely given, but enabling volunteering is not free. Like paid workers, volunteers need induction, training and ongoing management. Volunteers need to be considered strategically in workforce planning and resourcing. The funding model needs to be an accurate reflection of the level of support volunteers provide in aged care overall as well as the associated economic benefits. This aspect would need to be factored into the associated data collection and compliance arrangements.

Q4: What are your views on support that meets assessed needs but is responsive to changes over time?

Not applicable.

Q5: What are your views on encouraging innovation and investment?

The discussion paper notes that reforms to in-home aged care present an opportunity to “reconsider how to incentivise innovation and investment in the aged care system” overall.

While the discussion focusses mainly on aged care providers and paid worker scenarios, as a vital part of Australia’s aged care workforce there is also opportunity to look at innovation to support volunteers and volunteering. For example, one of the questions raised in the discussion paper is: “How might we encourage innovations that increase the quality of care?” Initiatives that improve the volunteer experience are likely to contribute to retaining high quality volunteers in the aged care sector and by extension lead to high quality support. Some examples of areas for innovation to improve the volunteer experience, and that of those they volunteer for, include:

- the creation of a mental health tool kit for volunteers
- new ways to engage and ensure CALD volunteers are supported and matched with recipients
- dynamic onboarding, a concept that sees volunteers trained for the levels required for the actual activity they undertake as needed and through their volunteering journey rather than requiring all training upfront
- information portal, a single source of volunteer information that be searched linking the right volunteers and skillsets to the older Australian or provider matching credentials, screening, location and interests
- portable credentials within the aged care sector for those who do work across multiple providers.

²⁰ <https://agedcare.royalcommission.gov.au/>

Recommendations

- Volunteers should be considered as an essential, but distinct, component of the aged care workforce in designing and implementing the new in-home care program.
- The further development of the in-home aged care program should explicitly consider volunteers and ensure the regulatory burden placed on volunteers and volunteer engagement is reduced for low-risk interactions (for example, infrequent companionship visits).
- The wide-ranging reforms being developed from now through until 2025 need to rebuild, drive and embed volunteer participation in aged care.
- To avoid unintended consequences the Australian Government needs to take a more strategic approach to volunteers in the aged care sector, through the development of a national aged care volunteering framework, and to consider the role of volunteers in meeting reform objectives.
- Volunteers must be considered in the implementation of the proposed multi-provider model to ensure they are not adversely impacted by lack of coordination, double-bookings or uncertainty around schedules between multiple providers.
- We support the concept of a care partner, especially in a multi-provider setting, however it is important that the inclusion of this new role is seamless for volunteers and does not add administrative burden or complexity.
- The reforms provide an opportunity to encourage innovation to support volunteers and volunteering. Initiatives that improve the volunteer experience are likely to contribute to retaining high quality volunteers in the aged care sector.
- Consultation on the development of the in-home aged care program and upcoming reforms should involve specific and tailored consultation with relevant volunteering stakeholders, including with volunteers, the peak volunteering bodies and providers that involve volunteers.

Authorisation

This submission has been authorised by the Chief Executive Officer of Volunteering Australia.



Mr Mark Pearce
Chief Executive Officer

Endorsements

This position statement has been endorsed by the seven State and Territory volunteering peak bodies.



About Volunteering Australia

Volunteering Australia is the national peak body for volunteering, working to advance volunteering in the Australian community. The seven State and Territory volunteering peak bodies work to advance and promote volunteering in their respective jurisdictions and are Foundation Members of Volunteering Australia.

Volunteering Australia's vision is to promote a strong, connected, and resilient Australian community through volunteering. Our mission is to lead, strengthen, and celebrate volunteering in Australia.

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