Submission: Volunteering Australia

Discussion paper:

Future reform – an integrated care at home program to support older Australians

Submissions close on 21 August 2017

Instructions:

- Save a copy of this template to your computer.
- It is recommended that you read the relevant pages in the discussion paper prior to responding.
- You do not need to respond to all of the questions posed in the discussion paper.
- The numbering of the questions in the template corresponds to the numbering in the discussion paper.
- Please keep your answers concise and relevant to the topic being addressed.
- Upload your completed submission on the Consultation Hub. Alternatively, if you are experiencing difficulties uploading, you can email your submission to: agedcarereformenquiries@health.gov.au

Thank you for your interest in participating in our consultation.

Tell us about you

What is your full name?

First name ***Lavanya***

Last name ***Kala***

What is your organisation's name (if applicable)?

Volunteering Australia

What stakeholder category/categories do you most identify with?

☐ Commonwealth Home Support Program[1] service provider	☒ Peak body – consumer
	☐ Peak body – carers
☐ Home Care Package service provider	☐ Peak body – provider
☐ Flexible care provider	
☐ Residential aged care service provider	☐ Seniors membership association
☐ Aged care worker	☐ Professional organisation
☒ Volunteer	☐ Disability support organisation
	☐ Financial services organisation
☐ Regional Assessment Service	☐ Union
☐ Aged Care Assessment Team/Service	
	☐ Local government
☐ Consumer	☐ State government
☐ Carer or representative	☐ Federal government
☐ Advocacy organisation	
	☐ Other Click here to enter text.

Where does your organisation operate (if applicable)? Otherwise, where do you live?

☐ NSW	☐ SA
☐ ACT	☐ WA
☐ Vic	☐ NT
☐ Qld	☐ Tas
☒ Nationally	

*May we have your permission to publish parts of your response that are **not** personally identifiable?*

☒ Yes, publish all of my response

☐ No, do not publish any part of my response

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[1] Includes Home and Community Care Providers in Western Australia

Section 2. Reform context

2.3 Reforms to date

Comments

We would welcome your views and feedback on the February 2017 *(Increasing Choice)* reforms.

Refer to page 6 of the discussion paper

Volunteering Australia welcomes the opportunity to provide a response to the Department of Health on the *Future reform – an integrated care at home program to support older Australians.*

Volunteerism continues to engage Australians in increasingly diverse and significant ways. Recent data indicates there are 5.8 million Australians or 31 per cent of the population who are engaged in formal volunteering activities and programs.[i] Volunteering Australia is providing a response in support of the extensive number of Volunteer Involving Organisations and Volunteering Support Services funded under the Commonwealth Home Support Program (CHSP) and Home Care Packages (HCP).

A 2017 Senate inquiry report into the *Future of Australia's aged care sector workforce* also highlighted this with, "83 per cent of residential facilities and 51 per cent of home care and home support outlets utilising volunteer staff."[ii] The inquiry also heard that "there are five volunteers for every paid worker in the not-for-profit sector, at a value of about $290 billion per annum. In 2016, 23,537 volunteers provided 114,987 hours of care to older Australians in residential facilities."[iii][iv][v]

As the national peak body for volunteering in Australia, we outline concerns on the reforms nationally for these groups, particularly in relation to individualised funding, as well as the need for adequate funding for volunteer management, and recognition of volunteering as a priority area in these reforms, given the essential role of volunteers in supporting older Australians.

Section 3. What type of care at home program do we want in the future?

3.1 Policy objectives

Question

Are there any other key policy objectives that should be considered in a future care at home program?

Refer to page 9 of the discussion paper

Volunteering Australia highlights that volunteers are essential to the aged care workforce, delivering frontline services and ancillary support in aged care and residential settings. Volunteer engagement should be a key policy objective of a future care at home program. So many services are funded through CHSP, and wouldn't operate without volunteer engagement.

Volunteering Support Services, such as Volunteering SA&NT and Volunteering Tasmania, and Volunteer Involving Organisations across the country are funded through the CHSP program. In our view, the definition of the 'formal workforce' should be extended to include volunteers, considering the role they play in Home Care Packages (HCP) and CHSP funded services.

There is a huge impact on sector support if Volunteering Support Services and Volunteer Involving Organisations are not funded as a priority funding area. Furthermore, the impact on the aged care sector is critical given the crucial role that volunteers play.

Furthermore, the operational cost of engaging volunteers is incredibly high and must be accounted for within a future care at home program. Organisations encounter significant costs with the training and management of volunteers, but many times these costs are not factored into funding structures. Volunteering Australia recommends that there is additional funding and support for Volunteer Involving Organisations in a future care at home program to engage volunteers. This will also ensure that organisations can fund access to training, education, supports and service for their volunteer workforce. This will also reduce barriers for individuals to engage in volunteering, and encourage people to begin volunteering in residential aged care settings.

The Productivity Commission's 2011 inquiry into Caring for Older Australians highlighted that the informal care provided by volunteers should be factored in to funding. Recommendations made in the report highlighted that "Funding for services which engage volunteers in service delivery consider the costs associated with:

- Volunteer administration and regulation
- Appropriate training and support for volunteers."[vi]

The aged care sector will need to offer meaningful volunteering experiences to attract and retain people to these roles. The 2011 Productivity Commission report emphasised a need to improve support for informal carers, with many financially and socially disadvantaged because of their caring activities. The same can be applied to volunteers, with many of their supports administered in an ad hoc way.

Volunteering Australia recommends the use of the *National Standards for Volunteer Involvement* as a best-practice guide for volunteer participation in the residential settings. The National Standards have been developed in consultation with the volunteering sector to support the involvement of volunteers and act as a resource for organisations in which volunteers are involved. They are a best-practice framework for organisations to consider the role of volunteers within their organisations and cover the impact effective volunteer involvement can have on achieving strategic goals.

Section 4. Reform options

4.4.1 Changing the current mix of individualised and block funding

Question

Which types of services might be best suited to different funding models, and why?

Refer to pages 14 – 15 of the discussion paper

Volunteering Australia supports a mixed funding model, with an emphasis on block funding. A block funding model will ensure there is sufficient services and infrastructure in place to guarantee choice and control for consumers. Volunteering Australia also stresses that many Volunteer Involving Organisations in the volunteer sector support block funding, noting the potential of reduced capacity and service provision on an individualised funding model.

While individualised funding is aimed at promoting the capacity of consumers, the reality is that there are issues, particularly in relation to recruitment. There is a real need to account for this cost structure, with flow on effects in engaging and offering supports and services. The block funding model supports an integrated care at home program, and reinforces recruiting and training volunteers, assisting service providers toward achieving best practice and quality standards, and helping both participants and service providers with capacity building.

Question

What would be the impact on consumers and providers of moving to more individualised funding?

Refer to pages 14 – 15 of the discussion paper

Volunteering Australia raises concerns for both consumers and providers of moving towards a more individualised funding model. Block funding is critical in a future care at home program, with current program needs supported by CHSP funding, rather than individualised service.

Individualised funding also allows Volunteer Involving Organisations to recruit, train and retain volunteers of their own accord, creating their own structures. By bypassing formalised structures, such as quality and safeguarding frameworks, which are essential to protecting, recruiting, training, and effectively managing volunteers in home care and aged care more broadly, there poses great risks to both consumers and providers. Volunteering Australia recommends that while in some instances individualised funding is necessary; block funding provides effective oversight for organisations that engage volunteers.

Question

Are there other ways of funding particular services or assisting consumers with lower care or support needs, e.g. a combination of individualised funding and block funding, vouchers etc.?

Refer to pages 14 – 15 of the discussion paper

In our view, block funding is preferable for many Volunteering Involving Organisations across the country funded by CHSP. Volunteering Australia understands that there is a push toward market-based systems, however, this approach creates inequality for those who cannot access the system. A combined model of funding is too complex to navigate, and individualised funding, while helpful in some instances, is not an ideal funding model for the volunteering sector. Block funding is essential for an integrated care at home program to continue, and will continue to allow for support mechanisms such as community care workers or sector support workers.

4.5.1 Refocussing assessment and referral for services

Question
How could a wellness and independence focus be better embedded throughout the various stages of the consumer journey (i.e. from initial contact with My Aged Care through to service delivery)?

Refer to page 16 of the discussion paper

Volunteers play a critical role in fostering wellness and independence for people in an integrated care at home program. The social capital derived from volunteer engagement in aged care settings is of great benefit to both participants and volunteers. Volunteers play a unique role in assisting consumers by developing meaningful relationships, and reducing social isolation.

Volunteers have an integral role to play in service delivery, by building on operational strength, promoting provider goals, and achieving outcomes. A 2011 Productivity Commission report into *Caring for Older Australians* stated that, "Volunteers also play an important role in service delivery and seek to enhance the wellbeing of those they assist as well as gain a sense of satisfaction themselves."[vii]

Feedback from organisations who engage volunteers highlighted a difference between outcomes achieved between paid staff and volunteers. This was identified in Volunteering Australia's Response on the National Disability Insurance Scheme Amendment (Quality and Safeguards Commission and Other Measures) Bill 2017, where "a *Survey of Victorian Disability Organisations* found that 83 per cent of respondents saw the role of volunteers as unique, with volunteers providing an extra social connection and community participation, genuine relationships, and the value of lived experiences."[viii][ix][x]

4.6.1 Ensuring that services are responsive to consumer needs and maximise independence

Question
How do we maximise the flexibility of care and support so that the diverse needs of older people, including those with disability, are met?

Refer to pages 16 - 17 of the discussion paper

Volunteering Australia is cognisant of the specialised role that volunteers can play in supporting the diverse needs of older people, including those with disability.

For people from culturally and linguistically diverse (CALD) backgrounds, forming relationships with people from a similar cultural background can be of profound benefit. Consumers should be able to connect with people of their own age, gender, and from a shared culture. Volunteers can play a key role in building social capital, and provide an integral link in cultivating social connections for many participants. Employing strategies to assist with this, and by ensuring that volunteers are a priority in an integrated care at home program would maximise the flexibility of care and support the needs of diverse consumers.

Community transport schemes also provide valuable assistance to older people. These schemes often rely on volunteers and contribute to the social capital of local communities. The use of assistive technologies can increase the independence of many older people in residential settings, and reduce the physical and emotional burden on carers and volunteers. For example, wheelchairs, home modifications and lifting devices, can limit the amount of time and energy required by carers, as well as the physical exertion required. This also limits the number of injuries sustained by carers as part of their caring activities. Greater access to assistive technologies can also reduce carer or volunteer burnout, or defer the use of more intensive aged care services.[xi]

In our view, volunteers should be supported in their role, with adequate access to assistive technologies, and have access to the services that they need. In our view, respite and other services should be more easily accessible and responsive to the

needs of informal carers and volunteers.[xii] Volunteering Australia recommends consideration for the costs associated with volunteer administration and regulation, including appropriate training and support for volunteers.

It is the view of Volunteering Australia that specialist education and training for volunteers engaged in residential settings is integral, particularly for those engaged with specific population groups. This type of training is specialised and can be resource-intensive. This issue was identified in the 2011 Productivity Commission Report, in regards to a huge increase in the number of volunteers in the aged care workforce. The report noted, "Funding for services which engage volunteers in service delivery should consider the costs associated with: volunteer administration and regulation; and appropriate training and support for volunteers."[xiii]

The National Aged Care Alliance report on the *Aged Care Quality Framework* identified that there should be the inclusion "of adequate training and ongoing support of volunteers to ensure the provision of quality services and protection for consumers."[xiv]

The report also noted the meeting of "cultural obligations, connection to family, and connection to country is a key concept underpinning the physical and psychosocial health and wellbeing" of clients.[xv]

In our view, training is essential to the delivery of a human-rights based approach to service, and must be carried out by Volunteer Involving Organisations. Volunteering Australia's 2016 *State of Volunteering in Australia Report* identified that many smaller residential aged care facilities may not have had the opportunity to offer training for their volunteers either due to funding restraints or lack of access.[xvi] Volunteer Involving Organisations must receive adequate support to ensure they can provide this training for their volunteers.

4.8.1 Supporting specific population groups

Question
How can we make the care at home system work better for specific population groups, particularly those whose needs are not best met through current CDC models and administrative arrangements?

Refer to page 19 of the discussion paper

Volunteering Australia highlights that many Volunteer Involving Organisations across the country deliver targeted services to diverse population groups with specific needs. This is done so using Volunteering Australia's *National Standards for Volunteer Involvement* as a best-practice guide for volunteer participation in all sector participation. The advice provided by the *National Standards for Volunteer Involvement* provide tailored information for organisations on how to recruit, induct, manage and retain volunteers.

Volunteering Australia once again stresses that a push toward a market-based system for both consumers and providers will create inequity for those who are unable to access the system. It is imperative that there is adequate support for digital inclusion skills for consumers from specific population groups to access My Aged Care.

In addition, we recommend that building specialised Volunteering Support Services and Volunteer Involving Organisations into representative structures is essential to ensuring they are involved in the design and monitoring of funding models and administrative arrangements, and will guarantee they have a say on all policy that affects them. This is crucial to make the care at home system work better for specific population groups.

4.8.2 Supporting informed choice for consumers who may require additional support

Question
What additional supports could be considered to ensure that people with diverse needs can access services and make informed choices and exercise control over their care?

Refer to page 19 of the discussion paper

Volunteering Australia reiterates the importance of building people and representative organisations into structures and frameworks to ensure that people with diverse needs can both access services, make informed choices, and exercise control over their care. External bodies such as the National Disability Advocacy Program (NDAP) in the disability sector, provide people with disability the chance to enjoy choice and control, and allow for a 'citizen advocacy' approach to disability advocacy. Volunteer Involving Organisations and Volunteering Support Services should also have adequate opportunity to advocate for consumer needs, given the direct interaction they have with consumers and the knowledge they have of their needs. This could be in the form of a special advisory committee.

4.10 Other suggestions for reform

Question

Do you have other suggestions for care at home reform, or views on how changes might be progressively introduced or sequenced?

Refer to page 20 of the discussion paper

Through the introduction of the reforms, Volunteering Australia recommends that all volunteer roles within the care at home reform system are considered in line with the *National Standards for Volunteer Involvement*, as a best-practice guide for volunteer participation, in coordination with the National Aged Care Quality Regulatory Processes.

Volunteering Australia appreciates the opportunity to provide a submission to the Department on 'Future reform – an integrated care at home program to support older Australians'. We strongly encourage the Department to consider the voluntary contributions and ensure there is greater consideration in the introduction of the reforms.

We are committed to working with the relevant agencies to advance these measures and would welcome further opportunities to consult or expand on our recommendations raised in this response.

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[i] i Australian Bureau of Statistics (2015) 'General Social Survey: Summary Results, Australia, 2014', available online at http://www.abs.gov.au/ausstats/abs@.nsf/mf/4159.0.

[ii] The Senate (2017), Future of Australia's aged care sector workforce, Community Affairs References Committee, p13.

[iii] Volunteering SA&NT Inc (2017), *Committee Hansard,* p34.

[iv] Flinders University (2017), *Committee Hansard,* National Institute of Labour Studies, Table 4.21, p26.

[v] The Senate (2017), Future of Australia's aged care sector workforce, Community Affairs References Committee, p36.

[vi] Productivity Commission (2011), Caring for Older Australians, Carers, Overview, http://www.pc.gov.au/inquiries/completed/aged-care/report/aged-care-overview-booklet.pdf, pLXX.

[vii] Productivity Commission (2011), Caring for Older Australians, Volume 1, http://www.pc.gov.au/inquiries/completed/aged-care/report/aged-care-overview-booklet.pdf, p92.

[viii] Extended Families Australia, Inclusion Melbourne, Interchange Incorporated and People Outdoors (2015) 'Volunteering and the National Disability Insurance Scheme: A Survey of Victorian Disability Organisations'.

[ix] ibid., p2.

[x] Volunteering Australia (2017), Response on National Disability Insurance Scheme Amendment (Quality and Safeguards Commission and Other Measures) Bill 2017, https://www.volunteeringaustralia.org/wp-content/files_mf/1501210867VAResponseontheNationalDisabilityInsuranceSchemeAmendmentQualityandSafeguardsCommissionandOtherMeasuresBill2017.pdf, p8.

[xi] Productivity Commission (2011), Caring for Older Australians, Volume 2, http://www.pc.gov.au/inquiries/completed/aged-care/report/aged-care-overview-booklet.pdf, p338.

[xii] Productivity Commission (2011), Caring for Older Australians, Carers, Overview, http://www.pc.gov.au/inquiries/completed/aged-care/report/aged-care-overview-booklet.pdf, pLXXXV.

[xiii] Commonwealth of Australia (2013) 'Portfolio Budget Statements 2013-14: Budget Related Paper No. 1.14, Prime Minister and Cabinet Portfolio', https://www.dpmc.gov.au/sites/default/files/publications/pbs_2013- 14_Portfolio.doc, p25.

[xiv] National Aged Care Alliance (2017), NACA Response: Single Aged Care Quality Framework, April 2017, http://www.naca.asn.au/Publications/NACA%20response%20Single%20Aged%20Care%20Quality%20Framework.pdf, p6-7.

[xv] National Aged Care Alliance (2017), NACA Response: Single Aged Care Quality Framework, April 2017, http://www.naca.asn.au/Publications/NACA%20response%20Single%20Aged%20Care%20Quality%20Framework.pdf, p6-7.

[xvi] Volunteering Australia and Volunteering and Contact ACT (2016), Submission to NDIA ILC Framework Consultation, p9.