Increasing Choice in Home Care – Submission

October 2015

The Federal Government announced significant reforms to home care as part of the 2015-16 Budget. Part of these reforms includes the introduction of consumer directed care (CDC) - designed to enable older people to make choices about their home care services.

Volunteering Tasmania recently provided feedback to the Department of Social Services on their “Increasing Choice in Home Care – Stage 1 Discussion Paper”. This submission provided comments on the introduction of CDC, the My Aged Care system and the consolidated CHSP. These changes are of importance to the volunteering sector.

This paper is a summary of the feedback provided to the Department.

The Commonwealth Home Support Program is built on volunteers. We consider investment in volunteer involving organisations and volunteer management is essential, therefore to the future of the program.

Volunteering Tasmania (VT) is concerned that the Department of Social Services (DSS) has overstated the functionality of the My Aged Care system in their discussion paper. VT regularly attends HACC-CHSP Provider Forums in Tasmania. Feedback from stakeholders in this sector highlights to us the problems for users of the My Aged Care (MAC) system. Service providers have consistently had significant problems with the functionality of this system. The DSS categorises these problems as ‘transitional change’ in the discussion paper. These problems are more significant. To date, service providers continue to receive inappropriate referrals or no referrals through the MAC system. Faults within the system have been consistently reported to the Department. To our knowledge limited progress has been made to resolve these issues.

MAC is the ‘entry point’ into the home care system. If functionality of this system is not improved, the implementation of Stage 1 will have a negative impact on both service providers and consumers. There has been a massive transition to MAC for volunteer involving organisations. These are service providers who are already significantly under resourced and have limited capacity to support this change. VT recommends that if the Department continues with this system investment is made to ensure its viability and effectiveness. Without an investment (both to service providers and within the Department itself) continuation in home care reforms will not be viable.
VT has no position on the philosophy of reforms to Home Care or, therefore, on making packages available to consumer on individual needs. We are concerned, however, about the impact this may have on volunteer involving organisations.

This system will replace the current system of planning and allocating home care places to providers at the regional level. VT suggests this will make it harder for volunteer involving organisations to:

- Recruit and retain appropriate paid staff;
- Recruit and retain appropriate volunteers;
- Plan and budget for service delivery; and
- Provide support for volunteers that help deliver services.

This will be particularly challenging for volunteer involving organisations in the not for profit sector, who already have limited support and capacity to transition to a new system.

VT is concerned that volunteer involving organisations already are under financial pressure to deliver services, and compete against other providers in the sector. Volunteer involving organisations that operate in the aged care sector face challenges around availability of trained support workers and volunteers. They will increasingly need to compete for skilled staff, and may need to rely on volunteers to deliver these services. We need to ensure organisations are well supported to transition to this new system so they have capacity to recruit, train and retain staff and volunteers in this space.