



**Analysis of the Australia Government response to the Royal
Commission into Aged Care Quality and Safety Final Report:
Care, Dignity and Respect**

July 2021

ABOUT CARERS AUSTRALIA

Carers Australia is the national peak body representing the diversity of Australians who provide unpaid care and support to family members and friends with a:

- disability
- chronic condition
- mental illness or disorder
- drug or alcohol problem
- terminal illness
- or who are frail aged

Our vision is an Australia that values and supports the contribution that carers make both to the people they care for and to the community as a whole.

We believe all carers, regardless of their cultural and linguistic differences, age, disability, religion, socioeconomic status, gender identification and geographical location should have the same rights, choices and opportunities as other Australians. They should be able to enjoy optimum health, social and economic wellbeing and participate in family, social and community life, employment and education.

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Executive Summary

As acknowledged in the Final Report of the Royal Commission into Aged Care Quality and Safety (hereinafter referred to as “the Commission”), the unpaid contribution of family and friend carers underpins the sustainability of the aged care sector. They make a vital contribution to the capacity of many older people to age at home – often at a cost to their own livelihood and wellbeing.

Of the 860,000 primary carers identified in the Australian Bureau of Statistics 2018 Survey of Disability, Ageing and Carers (SDAC), over a third cared for someone over the age of 65¹. A Deloitte Access Economics report on the Value of Informal Care in 2020 estimated the replacement cost of informal care in 2020 at \$77.9 billion². While they did not break down the replacement costs for carers of people under 65 and those over 65, carers of the aged clearly contribute a significant proportion of these savings.

However, carers of the aged have not fared well throughout the last decade of aged care reform. With the introduction of consumer-directed care, there has been a loss of focus on carers’ own needs for support over and above the support offered to those they care for, and what supports they do receive have become poorly focused, funded and fractured across aged care programs. An outstanding case in point has been their access to respite from caring, especially with respect to carers of people with dementia.

The Commission’s strong acknowledgement of the contribution made by informal carers to the sustainability of the aged care system and their right to adequate support was especially welcome by Carers Australia (refer to List 1).

Family and friend carers usually have a direct interest and involvement in all aspects of aged care, especially if they have been caring for the aged person prior to that person receiving paid care at home or entering into residential care. This involvement can extend from making or helping to make arrangements for entry into the aged care system, coordinating health and other needs, managing or helping to manage Home Care Packages (HCP’s) or entry into residential care and, in many cases, continuing to visit, assist with care and monitoring the wellbeing of the person they care for once they have gone into residential aged care.

In some circumstances, providing physical and emotional care, clinical care and managing finances and other aspects of life administration can be enormously stressful and exhausting for carers. This is especially the case for carers who are aged themselves, those that have other caring responsibilities such as the adult child of an aged person with a child with disability, or carers who have chronic health needs and other stressors and responsibilities in their life. The impacts of ageing can put strains on previously well-balanced relationships, especially for carers of people with dementia. In many cases, informal carers find they cannot combine work and care because of the absence of flexible working conditions and adequate leave entitlements.

In its formal response to the Commission’s 147 recommendations, the Government endorsed all of recommendations relating to informal carers and has made an upfront commitment of over \$798 million in additional funding in the 2021-22 Federal Budget to put these recommendations into practice.

This paper outlines the Commission’s recommendations and the Government response (refer to Box 2) with respect to informal carers, as well as identifying a number of other areas of reform identified by the

¹ Australian Bureau of Statistics, Survey of Disability, Ageing and Carers (SDAC), 2018, extracted from Table Builder [accessed online]

² Deloitte Access Economics, The Value of Informal Care in 2020, May 2020 [accessed online]

Commission and Carers Australia's further comments. Carers Australia welcomes the Government's comprehensive response to the recommendations of the Commission, especially with respect to the expansion of services to preserve the wellbeing of informal carers.

List 1: Summary - Carer specific recommendations of the Commission Final Report

- Encompass carers' rights to support in the new Aged Care Act.
- Consolidation of respite policy and program delivery within the recommended single Home Care Program for aged care.
- Incorporate appropriate assessment tools for informal carers seeking support for themselves as part of the development of a single assessment process for home care.
- Enable direct referral and information sharing for informal carers between My Aged Care and the Carer Gateway.
- Establish a local, community-based Carers Hub network where informal carers can come together to access information and advice.
- The establishment of a dementia support pathway for people living with dementia and their informal carers and families which will give them a direct and clear pathway to a range of ongoing social, psychological and educational supports, as well as improved diagnosis and treatment services.
- Review informal carers' leave entitlements under the National Employment Standards to assist them to combine work and care.
- Address barriers to accessing a range of respite options which best meet the needs of carers and those they care for through a dedicated respite support category within aged care that:
 - supports the availability of respite for the carers of older people earlier and more often to maintain their wellbeing and to sustain the caring relationship
 - provides a greater range of high-quality respite support in people's homes, in cottages and in purpose-built facilities
 - provides people with up to 63 days of respite per calendar year, and
 - is grant funded with a potential capital component in areas where supply is inadequate.

List 2: Summary of Australian Government's response to Commission recommendations 2021-22 Federal Budget

- A new Aged Care Act which recognises the rights of aged people and their carers, upholds the principles of consumer choice and control, and contains stronger protections for consumers and better accountability of aged care providers.
- Redressing the home care packages waiting list for those who have been found eligible.
- Measures to ensure the provision of an adequate, high quality aged care workforce which is properly trained, qualified and remunerated.
- Providing substantial additional support for those with dementia and their carers.
- Better integrating health and wellbeing services into aged care.
- Strengthening safety and quality regulation of aged care services and providing greater transparency in relation to individual provider performance

- Addressing inequities in service support for aged people with disability compared to the support now available for people with disability under the age of 65.
- Easing consumer navigation of the aged care system.
- Meeting the needs of all diverse and marginalised older people to achieve equitable outcomes.

RECOGNITION OF AND SUPPORT FOR INFORMAL CARERS

Legislative recognition of the rights of informal carers

The Government has accepted three of the four Commission recommendations with respect to the creation of a new *Aged Care Act* based on consumer rights and protections, including that the new Act specifically includes supports for informal carers of people receiving aged care³ and that a key principle of the Act is that informal carers of older people should have certainty that they will receive timely and high quality supports in accordance with assessed need⁴.

Carers Australia commentary:

In addition to incorporating carers' rights to support in the new *Aged Care Act*, the Act should incorporate acknowledgement of the Statement for Australia's Carers under the *Carers Recognition Act 2010* (Cwth), including that informal carers should be considered partners in the provision of care with other care providers⁵.

Assessment of carers' needs and identification, and referral to services along with those they care for

While informal carers are frequently intimately involved with and understand the care needs of those they care for, they are not routinely personally involved in assessment for services provided in the home, even though that assessment is actually guided by the support they provide. Importantly, neither is the impact of providing that care and their capacity to sustain it without help to meet their own needs, formally integrated in such assessments.

The Royal Commission's recommendations go to redressing this shortfall. Not only has it recommended that primary carers should be identified and involved in the assessment of the person they care for, it has recommended that carers should be assessed in their own right at the same time to identify their needs, and this should lead to referral to carers supports and services.⁶

Commission recommendations:

- Linking My Aged Care and the Carer Gateway by 1 July 2022, so that informal carers need only use one system to secure respite care and the full range of information, training and support services available on both sites.
- On and from 1 July 2022:

³ Recommendation 1, 2b

⁴ Recommendation 3, b (ii)

⁵ Federal Register of Legislation, *Carer Recognition Act 2010*

⁶ Recommendation 43 (c ii)

- enabling direct referral and information sharing for informal carers between My Aged Care, care finders, assessment services and the Carer Gateway
- providing accurate and up-to-date information on My Aged Care about the range of supports locally available to informal carers, including training, education, counselling, respite, income support, and access to the Carers Hub network (once established)
- On and from 1 July 2023:
 - requiring My Aged Care, care finders and assessment services to identify the primary informal carer when assessing a person for aged care
 - enabling care finders to refer the primary informal carer to assessment services for and access to formal respite care and other supports available
 - establishing and funding a community-based Carers Hub network.⁷

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted this recommendation and is responding through the measure Home Care - Support for informal carers. The Government will provide additional funding for the Carer Gateway to enable aged care assessors to pass information (with consent) to Carer Gateway providers, so that they can contact the carer directly. Carer Gateway providers will also be given the ability to book planned aged care respite services to avoid the current double-handling for clients between the Department of Social Services and the Department of Health.</p>	<p>\$103.4 million for early referrals to Carer Gateway services by aged care assessors for assistance such as counselling, coaching, peer support, and skills training. This will support approximately 134,000 informal carers.</p>

Carers Australia commentary:

- ACAT assessors should identify primary carers when assessing the needs of the people they care for and alert carers to services already available to them within aged care and the Carer Gateway as an immediate requirement. It does not need to wait until a separate carer needs assessment is available.
- As part of the development of a single assessment process for home care currently underway, incorporate appropriate assessment tools for informal carers seeking support for themselves (as opposed to for the older person). This does not need to wait until July 2023 if the new approach to home care assessments is completed earlier.
- There should be a scoping study exploring options for integration of elements of My Aged Care and the Carer Gateway to streamline carer experience and access to support services, including respite. Note that in a number of countries the assessment of aged care needs is “carer blind” where the assessment of older people’s needs is not modified by the amount of support being received by informal carers. A strong rationale for this is that it mitigates against carers being “trapped” in the

⁷ Recommendation 42

caring role as it relates to the person they care for receiving services, and the merit in “carer blind” assessments should be investigated further.

- Further analysis of the role and function of the proposed Carer Hubs needs to be undertaken to establish their relationship to services delivered through the regional Carer Gateway services, where the Carer Gateway was originally introduced to address a confusing patchwork of diverse and geographically fragmented carer support services.

Access to respite services

The Commission acknowledged the importance of carers’ being able to take a break from caring, whether over a number of weeks, regular short breaks over a shorter number of days and nights, and the breaks offered through day services for the people they care for. It also acknowledged that, under the current system, respite care is hard to get and, when it is available, is often unresponsive to the needs and circumstances of carers and those they care for.

Evidence before the Commission confirmed that, while respite care in residential facilities are often needed, moving into residential care, even for a short time, can be very confronting for the older person. In addition, the disparity between subsidies offered to providers for permanent care and respite care act as a disincentive to offer respite care. Residential respite is generally only available for long stays, where quality respite services offered in dedicated, more home-like facilities (cottage respite) for a shorter term are generally preferred.

Commission recommendations:

Implementation of a respite supports category within the aged care program that:

- supports the availability of respite for the carers of older people earlier and more often to maintain their wellbeing and to sustain the caring relationship
- provides a greater range of high-quality respite support in people’s homes, in cottages and in purpose-built facilities
- provides people with up to 63 days of respite per calendar year
- is grant funded with a potential capital component in areas where supply is inadequate.⁸

With respect to respite in residential care facilities, the Commission recommended the existing waiver of accommodation payments continue.

The Commission also recommended that assistance with planning for continued independent living and access to care for people with dementia should include regular and planned respite for carers.⁹

⁸ Recommendation 32

⁹ Recommendation 15,1 (d)

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted all the recommendations relating to respite, with a caveat in relation to the fee for the ordinary costs of living within residential aged care which will be subject to further consideration by the Pricing Authority.</p>	<p>\$134.9 million to support community respite, estimated to support 8,400 additional clients/year.</p> <p>\$60.1 million to increase outcome quality for people using respite through:</p> <ul style="list-style-type: none"> • engaging a national provider to prepare respite care plans for people living with dementia, developed with the individual and their informal carer at home. • training for residential care providers and staff to put respite care and activity plans into action for people living with dementia, and • increasing access to carer education in the early period after diagnosis for people caring for a person living with dementia using dementia respite. <p>\$441.4 million to implement changes to residential respite care, including a new respite care subsidy and a new respite accommodation supplement.</p>

Carers Australia commentary:

Noting these recommendations have been scheduled for implementation in 2022, the Government should undertake demand analysis to estimate service demand, and understand unmet need for respite care among carers as soon as possible. This type of analysis could also assist in determining locations for Carer Hubs and develop a planning ratio for respite care across the programs. At a minimum this should:

- describe the characteristics of the person accessing aged care services and the carer in need of respite
- explore ‘what’ respite is needed and current barriers to access or reasons for not accessing current respite services, including carer identification and awareness of the 63-day provision
- determine a clear map of what respite services are currently available, including geographic location, access pathways, eligibility requirements, type (short-term planned, ongoing planned or emergency), and models (residential, flexible, centre-based, cottage)
- consider data collection improvements to capture respite utilisation outside of residential facilities to continue to inform policy, planning and funding decisions, and
- involve economic modelling related to the varying respite delivery methods, including capital and ongoing costs.

Support for people with dementia and their carers

There are nearly 500,000 people living with dementia in Australia. While many are in residential aged care, others are ageing at home with the support of informal carers. Caring for a family member with dementia tends to be immensely taxing for carers, especially emotionally and mentally taxing. These carers have a

high need for respite, but find it very difficult to obtain respite care that does not distress the person they are caring for and lead to a deterioration in their condition.

Commission recommendations:

The Commission made a number of recommendations related to dementia support, including lifting the quality of dementia care, dementia-friendly residential design, specialist dementia care services, increased access to mental health services, and providing continuing education and training for those employed in the aged care sector.¹⁰

It also recommended the establishment of a dementia support pathway for people living with dementia for their informal carers and families. This pathway should involve:

- Providing information and advice on dementia and support services, including the aged care system
- Facilitating access to peer support networks
- Providing education courses, counselling and support services
- Providing assistance with planning for continued independent living and access to care, and (as noted above) regular and planned respite for carers
- Provision of information and material to general practitioners and geriatricians about the pathway and encourage them to refer people to the pathway at the point of diagnosis.¹¹

The Commission also recommended the development of a comprehensive set of National Aged Care Design Principles and Guidelines for accessible and dementia friendly design for residential aged care capable of application to a ‘small household’ model of accommodation as well as to enablement and respite accommodation settings.¹²

Government response	2021-22 Federal Budget allocation
<p>The Government has committed to nationally consistent local dementia support pathways which will be established to support GPs and other primary care clinicians with assessment and referral, and the introduction of measures to provide increased post-diagnostic support for people with dementia and their carers from July 2021.</p> <p>In addition, the Government will work with state and territory governments to better integrate dementia supports in the context of developing a new National Framework for Action on Dementia.</p> <p>The Government has also undertaken to work with the aged care sector and relevant stakeholders to develop a reformed Residential</p>	<p>\$53 million, in addition to the existing \$49 million investment, for enhanced early support for dementia carers, through:</p> <ul style="list-style-type: none"> • increasing early intervention assistance after diagnosis for the approximately 15,000 people diagnosed with dementia every year and their carers, including the National Dementia Helpline (NDH) so carers can stay in touch with services, and other National Dementia Support Program activities, such as counselling and carer education • clarifying and simplifying dementia care pathways between the NDH and GPs, memory clinics, My Aged Care, Carer Gateway, and aged care assessment teams - for carers and people living with dementia.

¹⁰ Recommendations
¹¹ Recommendation 15
¹² Recommendations 46 and 47

<p>Aged Care Accommodation framework, to commence from July 2024. This framework will include new National Design Standards for Residential Aged Care that incorporate accessible and dementia-friendly design that can be applied to traditional residential aged care facilities as well as small household models, while retaining room for providers to make use of innovative design solutions.</p>	<p>\$60.1 million to increase outcome quality for people using respite through:</p> <ul style="list-style-type: none"> • a national provider to prepare respite care plans for people living with dementia, developed with the individual and their informal carer at home. • training for residential care providers and staff to put respite care and activity plans into action for people living with dementia, • increasing access to carer education in the early period after diagnosis for people caring for a person living with dementia using dementia respite.
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Carers Australia commentary:

Carers Australia fully supports all the Commission’s recommendations in relation to dementia and support for the carers of people with dementia.

Review of improved leave entitlement for carers

Australia is a long way from best practice when ranked against comparable countries when it comes to carers’ leave entitlements.

In the course of its proceedings, the Commission commissioned a *Review of International System for Long-term Care of Older People*¹³. While Australia scored well in several areas of aged care, it is far from outstanding with respect to the support for carers of those people. In particular, a great many European countries offer conditions of leave which we would regard more equivalent to the various parental leave provisions available in Australia, and many go beyond that.

Under the *Fair Work Act 2012*, after 12 months with an employer, unless they are in casual employment, carers are entitled to two weeks paid Personal Leave (prorated for part-timers) which can be used for caring purposes.¹⁴ The problem is that this leave is also expected to cover their own sick leave, resulting in a situation where they either lose a proportion of paid sick leave or lose a proportion of carers’ leave.

In a comparison between Australia and 11 comparable OECD countries offering carers’ leave, Carers Australia found that Australia is the only country canvassed where carers’ leave entitlements are conflated with carers’ own sick leave. In other countries sickness leave and other leave appear to be quite separate.

Commission recommendations:

By 30 September 2022, the Australian Government should examine the potential impact of amending the National Employment Standards under Part 2-2 of the *Fair Work Act 2009* (Cth) to provide for an additional entitlement to unpaid carers’ leave. The results of this investigation should be made public by 31 December

¹³ Royal Commission into Aged Care Quality and Safety, Research Paper No.2, Review of International Systems of Long Term Care for Older People (prepared by Flinders University [Research Paper 2 – Review of International Systems of Long-term Care of Older People | Royal Commission into Aged Care Quality and Safety](#))

¹⁴ Fair Work Act 2009 s12 and 97

2022.¹⁵ This recommendation does not apply to only carers of the aged but to all carers within the definition incorporated into the *Carers Recognition Act 2010*.

Government response	2021-22 Federal Budget allocation
The Government has accepted this recommendation and it will be referred to the Productivity Commission for examination.	Not applicable

Carers Australia commentary:

Review of carers leave entitlements under the *Fair Work Act* should involve comparisons with leave provisions in comparable countries and should include public consultation and active engagement with current and former informal carers and the organisations which represent them.

OTHER KEY RECOMMENDATIONS OF THE COMMISSION THAT WILL SUPPORT CARERS INDIRECTLY

Support for people ageing at home

The provision of paid home care supports is of paramount importance to informal carers. In particular, the provision of Home Care Packages (HCPs) which meet the needs of the person they care for can have a great impact on their lives. As older Australians wait for very long periods of time to receive the level of HCP supports they have been assessed as needing, their level of health is likely to decline and their need for more intensive support to increase, making it difficult for them to remain at home.

Alternatively, informal carers will need to step in to provide the level of care required. If these carers are working, with wait times often exceeding a year and longer, they may have to give up their jobs. If they are in their 50s and 60s, which is often the case, they may face significant barriers to re-employment once their caring responsibilities reduce or cease. If the carer is an ageing partner, they may not be able to provide the level of care needed and are at risk of compromising their own health and wellbeing if they try to.

The proceedings of the Commission have amplified concerns about the effects of rationing the number of HCPs, including those at the right level to meet the needs of older people, and unacceptable processing delays.

Commission recommendations:

The following recommendations in the Commission’s report relating to home care that will also support carers can be summarised as follows:

- By July 2024, home care should be delivered as part of a new uncapped and better integrated aged care program that combines the former Commonwealth Home Support Program (CHSP), HCP and residential aged care programs. The new program would comprise separate categories for respite, social support, assistive technology and modification, care at home and residential care.¹⁶

¹⁵ Recommendation 43
¹⁶ Recommendation 25

- Once the wait list has been cleared, the Commission's has recommended that assessed level, quality care should be provided within a month.¹⁷
- By 1 July 2024, a new aged care program should be implemented that combines the existing Commonwealth Home Support Programme, Home Care Packages Program, and Residential Aged Care Program, including Respite Care and Short-Term Restorative Care. The new program should retain the benefits of each of the component programs, while delivering:
 - a common set of eligibility criteria identifying a need (whether of a social, psychological or physical character) to prevent or delay deterioration in a person's capacity to function independently, or to ameliorate the effects of such deterioration, and to enhance the person's ability to live independently as well as possible
 - an entitlement to all forms of support and care which the individual is assessed as needing
 - a single assessment process based upon a common assessment framework and arrangements followed by all assessors
 - certainty of funding and availability based upon assessed need
 - genuine choice and flexibility accorded to each individual about how their aged care needs are to be met (including choice of provider and level of engagement in managing care, and appropriate and adapted supports to enable people from diverse backgrounds and experiences to exercise choice)
 - access to one or multiple categories of the aged care program simultaneously, based on need
 - portability of entitlement between providers throughout Australia.¹⁸

¹⁷ Recommendation 30 (b)

¹⁸ Recommendation 25

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted in principle the clearing of the HCP waiting list and the investment necessary to meet this objective, but notes that the allocation of packages, and the speed at which they are taken up by senior Australians, will also be dependent on factors that vary across urban, regional, rural and remote areas of Australia such as the availability of provider and workforce supply.</p> <p>It will consider a broader implementation of this recommendation in the context of the development of a new support at home program and the capacity of the sector to expand sufficiently and be able to deliver quality and safe aged care for senior Australians.</p> <p>The Government is currently undertaking work in relation to a single assessment and a single home care program design.</p>	<p>\$7.5 billion towards supporting senior Australians who choose to remain in their home, including:</p> <ul style="list-style-type: none"> • \$6.5b for an additional 80,000 HCPs – 40,000 released in 2021– 22 and 40,000 in 2022–23, which will make a total of 275,598 packages available to senior Australians by June 2023 • \$10.8m to design and plan a new support in home care program which better meets the needs of senior Australians • \$798.3m to support the 1.6 million informal carers, including additional respite services for 8,400 senior Australians each year, and • \$272.5 million for enhanced support and face-to-face services to assist senior Australians accessing and navigating the aged care system.

Carers Australia commentary:

Carers Australia strongly supports the Commission’s recommendation that clearance of the HCPs waiting list is a high priority, although, given shortages in a qualified personal care workforce we believe the Commission’s deadline of December 2021 is likely to be over-ambitious.¹⁹

We are disappointed that there appears to be no commitment of the uncapping of supply by June 2024, or firm commitment to a single home care program inclusive of respite among other things.

However, we greatly appreciate increased investment in respite.

The quality and adequacy of the aged care workforce

One of the most significant concerns of carers is the adequacy of staffing levels and the quality of care employees provide to their family members. While there are issues around the quality of the home care workforce, in our experience the most carers’ concerns have centred around residential aged care where consumers, and their families, are often at their most powerless and vulnerable.

Commission recommendations:

There are a large number of recommendations in the Commission’s report relating to workforce. Those which particularly resonate with Carers Australia can be summarised as follows:

¹⁹ Recommendation 39 (a)

- The introduction of a national registration scheme for personal care workers with mandatory qualifications, criminal history screening, minimum English language proficiency, ongoing training requirements and the capacity for disciplinary action under a code of conduct.²⁰
- Establish an education and training scheme by 1 July 2021 to support requirements for a better trained workforce and which reimburses providers of home support, home care and residential aged care for the cost of educating and training the direct care workforce employed.²¹
- By 1 July 2022, the Australian Government should implement as a condition of approval of aged care providers, that all workers engaged by providers who are involved in direct contact with people seeking or receiving services in the aged care system undertake regular training about dementia care and palliative care.²²

The Commission also highlighted the need for improvements in award wages to attract sufficient staff with the appropriate skills to the sector,²³ and that minimum staff time standards for registered nurses, enrolled nurses and personal care workers are essential to improve the provision of safe and quality residential care.²⁴

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted the Commission’s recommendations with respect to education and training.</p> <p>With the introduction of the Australian National Aged Care Classification (AN-ACC) funding model on 1 October 2022, additional funding will be provided to support services to meet the Royal Commission’s recommended minimum 200 minutes care time standard, and having a registered nurse onsite for 16 hours per day. The minimum care time standard will become mandatory from 1 October 2023.</p>	<p>\$652.1 million to grow a skilled, professional and compassionate aged care workforce, which will be the powerhouse of the Government’s reform agenda.</p>

Carers Australia commentary:

Informal carers complement the work of salaried workers and, indeed, provide much of the same sort of care as salaried workers. In this sense they are part of the aged care workforce and have many of the same needs for training as paid workers to assist them to provide the best level of care they can. The projected decline in the informal carer workforce arising from a number of demographic changes is also an important factor to be taken into account in future workforce planning.

²⁰ Recommendations 77 and 78

²¹ Recommendation 114

²² Recommendation 80

²³ Recommendation 84

²⁴ Recommendation 86

Against this background, and given their legitimate stake in workforce development, we believe informal carers should be represented by the Aged Care Workforce Industry Council.

We also highlight that the Government has not responded to the recommendation to work with unions and providers to begin and awards valuation process, but notes that this matter is currently being considered by the Fair Work Commission (FWC).

Lifting the bar on quality, safety and transparency of service provision

Among the highest profile concerns arising during and from the Commission and accompanying media coverage was the inadequate delineation and enforcement of quality and safety standards for people in residential aged care and those receiving care at home. In most cases it is a family member who has brought disturbing instances of poor-quality care, including elder abuse, to the attention of the Commission and the public. There is a pressing need to restore public confidence in aged care quality.

The Commission’s recommendations:

That a new Australian Commission on Safety and Quality in Health and Aged Care (ACSQHAC) should develop a more comprehensive suite of quality indicators for residential aged care and aged care in the home, including a quality of life assessment tool. Such a tool will enable benchmarking of provider performance and the establishment of publicly available Star System which will help older people and their families in the selection of providers and to judge the performance of their providers once they are receiving services.²⁵

The Commission has also responded with recommendations for stronger investigation and enforcement powers and strong penalties for breaches to be imposed by the new Aged Care Safety and Quality Authority (ACSQA).²⁶ The Authority is to publish information on the outcomes of regulatory actions, including information on system-wide regulatory activity and outcomes, and enforcement action taken against individual providers.²⁷ It is also to actively engage with older people and their families and carers to ensure that their views are incorporated in the Authority’s compliance and decision-making, and are kept informed of the outcome of regulatory activities.²⁸

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted the recommendation for a new regulatory authority which will be informed by the outcomes of the capability review of the Aged Care Quality and Safety Commission (ACQSC) to be undertaken in 2023.</p> <p>Additional quality indicators, including indicators on quality of life, will be developed and implemented across residential aged care and in-home care by the end of 2022.</p>	<p>\$262.5 million to ensure the independent regulator, the ACQSC, is well-equipped to safeguard the quality, safety and integrity of aged care services, and effectively address failures in care.</p> <p>\$200.1 million to introduce a new star rating system to highlight the quality of aged care services, and better informing senior Australians, their families and carers.</p>

²⁵ Recommendation 22

²⁶ Recommendations 98-103

²⁷ Recommendation 10 (f)

²⁸ Recommendation 10 (2)

<p>The Star ratings system to benchmark provider performance will be implemented and star ratings will be published on My Aged Care by the end of 2022, providing information for people seeking residential aged care.</p>	
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Carers Australia recommends that:

Consumers and carers and their representative organisations should be given the opportunity to influence development of the new Quality Standards and future reviews.

Securing better access to health care

Access to high quality health care is vital to preserving and restoring the physical and mental wellbeing of older people and helping them to optimise their independence, whether those people are ageing in their homes or residential facilities. For those ageing at home, the more independent and healthier the person they care for is, the less stress their informal carer is likely to encounter.

Commission recommendations:

The Commission has identified a need to better integrate health and wellbeing services into aged care, including general practice, palliative care, pharmacy, primary care, allied health, community, oral and mental health systems.²⁹

The Commission also identifies an important role for health professionals to raise awareness about what is available in aged care. It specifically recommended that by 1 July 2022, the System Governor in cooperation with other levels of government, and working with health professionals, aged care providers and Primary Health Networks, should fund and support education, and the dissemination of information, and strategies to³⁰:

- improve public awareness of the resources available to assist people to plan for ageing and potential aged care needs
- improve knowledge about aged care among those responsible professionals with whom older people have frequent contact
- encourage public discussion about and consideration of aged care needs.

²⁹ Recommendations 4, 36, 38, 56, 59, 61b-d, 60, 64, 70, 71

³⁰ Recommendation 26

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted recommendations with respect to better integration of healthcare and aged care, including for people in residential care. In particular, there is an emphasis on clarification of the roles and responsibilities for the delivery of health care, mental health, oral health, allied health (although, unlike nurses and care workers, there are no mandatory times for allied health workers to engage with residents).</p> <p>The Government has indicated that a number of interface issues between different levels of Government need to be address to improve clarity on roles and responsibilities.</p>	<p>There are multiple allocations for healthcare throughout the Budget against different programs which will impact on aged care, including Medicare and mental health funding.</p>

Carers Australia commentary:

Carers Australia particularly welcomes the recommendation to establish a Seniors Dental Benefit Scheme.³¹ The importance of dental health to an older person’s self-esteem and confidence, nutrition, respiration, levels of pain, oral communication, and links with many other chronic conditions experienced by older people is often under-estimated.

Carers Australia has long recognised the potential value of health professionals, particularly general practitioners, as a direct and respected source of information about the availability of aged care services. In particular, they are often in a unique position to identify their patients as informal carers (especially when carers actually attend appointment for someone they are caring for) even when those carers don’t identify with this description themselves. While many GPs may be aware of aged care services, very few seem to be aware of supports for carers.

Awareness raising provided by professionals which can then, in turn, be transferred to their patients, must also have an informal carer focus.

Equity for people with disability receiving aged care

With the advent of the National Disability Employment Scheme (NDIS) and the Living Longer, Living Better national aged care reforms, people over the age of 65 with severe and profound disability lost access to equivalent disability services they might have previously had with their counterparts under the age of 65.

Commission recommendations:

By 1 July 2024, every person receiving aged care who is living with disability, regardless of when acquired, should receive through the aged care program daily living supports and outcomes (including assistive technologies, aids and equipment) equivalent to those that would be available under the NDIS to a person under the age of 65 years with the same or substantially similar conditions.³²

³¹ Recommendation 60

³² Recommendation 72

Government response	2021-22 Federal Budget allocation
<p>The Government has advised that this recommendation is subject to further consideration and will be considered in the framework to a new support at home program to be completed by the end of 2022.</p> <p>The Government has indicated that a number of interface issues between different levels of Government need to be address to improve clarity on roles and responsibilities</p> <p>Various measures have been introduced to support people with mental health and intellectual disabilities.</p>	<p>\$171.3 million for psychosocial support services, including a regional loading, for people with a severe psychosocial disability who are currently not supported by the National Disability Insurance Scheme</p> <p>\$79 million for Aboriginal and Torres Strait Islander mental health national crisis services and support</p> <p>\$12.7 million to improve the health and care of people with an intellectual disability.</p>

Carers Australia commentary:

Access to high quality disability supports also impacts on the care burden of informal carers, resulting in an improved capacity to preserve their own physical, mental and emotional health and pursue their own interests over and above the caring role.

Responding to the needs of diverse and marginalised older people and their informal carers and families

The Commission’s report has recognised the diversity of Australian society and that many require communications and services to be tailored to meet their special needs and preferences in order the receive equitable and effective access to aged care. It is stressed that information must be communicated in language and a form that is familiar to them and reflects their experiences and sensitivities.

Communications and services must reflect cultural safety and need be trauma-informed. Diverse and marginalised groups include Aboriginal and Torres Strait Islanders, people from CALD backgrounds, those from the LGBTI community, those who are homeless and those with disability. Specific recommendations also apply to people with dementia. When the Commission refers to culturally safety and trauma-informed services it encompasses all of these groups.

Commission recommendations:

Key recommendations include:

- As a condition of approval or continued approval of providers, training on cultural safety and trauma-informed service delivery be provided for all workers engaged by providers who are involved in direct contact with people seeking or receiving services in the aged care system.³³

³³ Recommendation 30

- Aged Care Quality Standards should reflect the Aged Care Diversity Framework and underlying Action Plans, including considering making them mandatory.³⁴
- Genuine choice and flexibility must be accorded to each individual about how their aged care needs are to be met (including choice of provider and level of engagement in managing care, and appropriate and adapted supports to enable people from diverse backgrounds and experiences to exercise choice).³⁵
- By 1 July 2024, a national audit be completed evaluating regional and local variations in levels of service in consultation with representative and peak organisations, including consumer experience information, with a view to identifying and addressing deficits. This is to be followed by a report in 2025 of the extent to the needs of diverse older people are being met across the aged care system.³⁶

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted these recommendations and is responding through measures empowering consumers of aged care with information to exercise choice and Home Care - Connecting senior Australians to aged care services.</p> <p>Development of a National Aged Care Data Strategy to identify, improve and better use data to inform current and future service demand, workforce, health interface interaction, quality and safety and outcomes of care, including in the area of diversity.</p> <p>Expand the education role of advocacy providers to assist aged care providers to understand the diversity of the community they are serving, and assess whether actual usage of their service reflects any barriers to access which must be rectified.</p> <p>Community Care Finders and assessors will receive training on cultural safety and trauma-informed service delivery.</p> <p>The Government will also implement a specialisations verification framework and audit process in June 2022 to ensure providers have demonstrated their capability to provide specialised services for people with diverse backgrounds and life experiences.</p>	<p>\$65.2 million to increase translating and interpreting services, including interpreting services in assessment planning and review, for Care Finders, and for translating key documents into community languages. This will assist more than 75,000 older people from culturally and linguistically diverse backgrounds.</p> <p>\$9.6 million to certify providers where specific services are offered that meet diverse needs.</p> <p>\$6.2 million to provide assistance to aged care providers to understand the diversity of the community they are serving.</p> <p>\$396.9 million for capital investment through the More equitable access to Aged Care for First Nations and Special Needs Groups measure for aged care providers to make improvements to buildings and build new services in areas where senior Australians currently do not have access, or where staff caring for their needs do not have suitable housing. First Nations peoples, homelessness providers and rural and remote areas will be initial priority areas to benefit from this measure from 2022-23.</p>

³⁴ Recommendation 31

³⁵ Recommendation 25 (e)

³⁶ Recommendation 30 (2a and 2b)

Carers Australia commentary:

While the Commission recommends that the key principles of the new *Aged Care Act* should include that the system should support the availability and accessibility of aged care for all older people, including people of diverse backgrounds and needs and vulnerable people, we would recommend that the rights of these people should be incorporated into the Act.

We also note that the Commission’s diversity focus is on older people accessing aged care themselves. The same rights and protections should be extended to their informal carers. We also highlight no specific response has been made of LGBTI older Australians and their carers.

Easing aged care system navigation

Navigating the aged care system in all its diversity and complexity is widely acknowledged to present real challenges to aged people and their informal carers, despite numerous attempts to make the task more accessible through My Aged Care.

Commission recommendations:

The Commission has recommended that the Australian Government fund support to engage a workforce of personal advisers to older people, their families and carers. The function of these care finders will be to assist older people with information about the aged care system, understand their entitlements, and provide case management to assist them to identify the best options to meet their individual circumstances and to exercise informed choice. These care finders may also involve linking older persons and their informal carers to services outside the aged care system such as housing, mental health or health care more generally.³⁷

Government response	2021-22 Federal Budget allocation
<p>The Government will provide funding to establish a network of Community Care Finders will be established to provide targeted, specialist face-to-face support to those who may not have capacity to seek out services for themselves. This service will also support these vulnerable senior Australians to access other supports at the local community level, such as health and social supports, where appropriate.</p>	<p>\$93.7 million in additional funding to introduce a network of up to 500 local Community Care Finders to improve engagement with vulnerable senior Australians, building on existing navigation supports to provide intensive face-to-face assistance to access aged care services and connect with other relevant health and social supports.</p>

Carers Australia commentary:

It can be a frustrating task even for people who are well-versed in finding their way around complex systems and engage confidently with government bodies and service providers, let alone for people who have lower levels of functional and digital literacy, face communication problems, and are less able to advocate for themselves. These people need the opportunity for tailored face-to-face communication with people who can assist them to access the services they need.

³⁷ Recommendation 29

Improving aged care through data, research and technology

Throughout the Commission’s report, the dearth of research in a wide range of aspect of aged care was identified, along with the lack of connection between a wide range of research bodies, both national and international, to assist with the translation of research into practice and facilitate the application of research outcomes with policymakers, research bodies, health care bodies, approve providers and the community.

Commission recommendations:

- Establishment of an Aged Care and Innovation Fund with funding equal to 1.8% of total Australian Government expenditure on aged care, without derogating from the amount of funding available for research and innovation through the Australian Research Council and the National Health and Medical Research Council.³⁸
- The Aged Care Research and Innovation Fund Council should set the strategy and agenda for research into, and innovation in, the delivery of aged care, including workforce-related research and technology, research into the socioeconomics of ageing, and research into the prevention and treatment of ageing-related health conditions.³⁹

Government response	2021-22 Federal Budget allocation
<p>The Government has accepted this recommendation in principle it considers that investment in aged care research should occur through existing, well-established research bodies. It considers the level of research funding recommended by the Royal Commission, equal to 1.8% of total Australian Government expenditure on aged care each year, is not sustainable.</p>	<p>Multiple research initiatives have been announced in Budget.</p>

Carers Australia commentary:

Given the crucial role of informal carers in providing care and contributing to the sustainability of the aged care system, and given the need to preserve their own mental and physical health, their economic needs, pursue their own goals and aspirations, and maintain their connectivity to wider family and friends and the community, research into aged care should also incorporate research into the informal carers of the aged.

³⁸ Recommendation 107

³⁹ Recommendation 107 (4b)