Our ref: R05/0058 Out-22565
Further contact: Margaret Kay

30 June 2014

Home Support Policy Team
PO BOX 7576
Canberra Business Centre ACT 2610

LGNSW Submission on Commonwealth Home Support Programme Discussion paper

Local Government NSW (LGNSW) is pleased to make a written submission on the Commonwealth Home Support Programme Discussion paper.

Please note that our submission does not contain confidential information, however it is provided subject to endorsement by the LGNSW Board.

Should you require further information or wish to discuss the matters raised in our submission, please contact Margaret Kay, Senior Policy Officer – Ageing and Disability at LGNSW, on 02 9242 4000.

Yours sincerely

Noel Baum
Director – Policy
Key Directions for the Commonwealth Home Support Programme Discussion Paper

Submission template

Completed submissions are to be sent by 30 June 2014 to:
CHSP@dss.gov.au (preferred method) OR

Home Support Policy Team, Level 6, Sirius Building
Department of Social Services PO BOX 7576
Canberra Business Centre, ACT 2610

Submissions received after Monday 30 June 2014 may not be considered.

Unless otherwise stated, the information and feedback you provide may be used for publishing purposes. Please state if you do not wish for your comments to be published

Instructions for completing the Submission Template
- Download and save a copy of the template to your computer.
- You do not need to respond to all of the questions.
- Please keep your answers concise and relevant to the topic being addressed.
- Refer to the Discussion Paper: Key Directions for the Commonwealth Home Support Programme (Hyperlink) for context on the questions.
Name (first and surname): Noel Baum

If submitting on behalf of a company or organisation
Name of organisation: Local Government NSW (LGNSW)

Stakeholder category (e.g. service provider, client, peak body, academic): Peak body for Local Government

State/Territory: NSW

Contact email address: margaret.kay@lgnsw.org.au

**Question 1:** Are there any other key directions that you consider should be pursued in the development of the Commonwealth Home Support Programme from July 2015?

While the Commonwealth Home Support Programme (CHSP) discussion paper represents an opportunity to improve the services offered to clients, it should also be acknowledged that many of the features of the current program do work well and it is vital that quality of these features are not compromised. In summary these are:

- A local and specialist provision of services when provided by Local Government or other locally based organisations
- High volume of volunteer support for services provided by Local Government organisations
- Responsive information provision for older people when Local Government organisations provide both services and sector support roles.

**A broader view of support for older people**
The CHSP is a key element in enabling older people to remain independent and living in their own homes for as long as possible. As such, it is important to see how the CHSP fits with Home Care packages and other "unfunded" supports for older people. LGNSW suggests that a longer term vision, which covers the breadth of supports for older people, needs to be articulated. The benefits accrued from programs which have a preventative effect need to be taken into account, therefore allowing the most effective use of resources by targeting those most in need for home based care.

Other “unfunded” programs which enhance the independence and healthy ageing of older people need to be acknowledged and linked into a complete program for the home based support of older people. These include recognition of the role of Local Government in providing local supports for older people, such as strategic program and facilities planning to support an ageing population in their LGAs, information provision on services and activities for seniors, planning for healthy ageing, and supporting organisations that do this work.

A seamless end to end aged care system must recognise the contribution that the "unfunded" service system has in supporting the provision of basic home support services to frail older people and their carers. The “unfunded” system comprises activities and support by organisations such as councils, Men’s Sheds, social and recreational services, Senior Citizens Centres, Combined Pensioner and Superannuants services, etc. For example, our
members report that in the Illawarra the “unfunded” service system comprises of between 50 and 66% of the total support system available to older people.

**Local Information**

Information on the range of local services, activities and supports available is important to support older people’s participation in their community as well as to support people with disability to connect with mainstream services, and facilitate their participation in the community through the *National Disability Insurance Scheme*. Councils are a key source of this information.

The community care system is complex, and many older people are unclear which organisation provides services in their area for community care. They most often call their local council for information and referral as advice from Carelink has been unreliable. Under the current funding arrangements, council staff in funded Ageing and Disability positions are able to provide immediate advice at the point of the initial phone call and provide comprehensive information based on local knowledge.

While the role of Sector Support has been included in the CHSP streams, there is still a need for locally relevant, culturally appropriate information covering the whole constellation of activities and supports that enable older people to remain independent and participate in their communities. There is much more available to older people than just CHSP and Home Care Packages. Provided by independent sources, such as councils, this information complements information received through *My Aged Care*. LGNSW argues that information provision, including about mainstream and council run services and other programs that support healthy ageing, should be acknowledged and funded, as it currently is in many councils in NSW (see further detail below on Ageing and Disability positions in NSW councils).

In the Illawarra region, Ageing and Disability staff in councils receive enquiries about the aged care system on a daily basis and this can amount to up to 30 emails/enquiries per day each. Many councils produce an Aged and Disability Services Directory. These directories are a sought after source of information on the services available across each LGA. It is unlikely that *My Aged Care* will reduce the number of enquiries, as council information directories cover a much broader range of information than aged care services alone.

In a region such as Tweed Shire there is a significant proportion of people aged over 65 years with in-migration from other parts of Australia increasing in coming years. Many seniors retiring to the area rely on Local Government to supply information in the absence of established networks and family connections. Social isolation is a common reason retirees seek information on activities that can build new social networks. Research shows that loneliness has very serious consequences for health and wellbeing.

For example, in Tweed, the Seniors Information Hub, facilitated by the Seniors Information Project Officer, is currently funded by DSS and is based on research undertaken by Southern Cross University reflecting the unique social and demographic conditions for older people in this region. The Hub provides a critically important point of contact for sector organisations to connect with each other and as a referral point for older people. Seniors
using the Hub to gain information on services and supports also find the opportunity to create new social networks. Programs such as the Seniors Information Hub are accessed by seniors of all ages only some of whom would need to register with MyAgedCare for additional support. A significant proportion of seniors in Tweed Shire are represented in the lower socio economic range and have limited public transport options available, so they rely on local community based services to meet their social and information needs.

The program outlined above provides a key role in sector support through the provision of information for a wide range of services supporting the ageing community in a unique demographic and regional context. The actual program of educational, social and leisure activities, made possible through its location in a community centre managed by council, supports wellbeing, independence and quality of life of local seniors.

Community Development
LGNSW is concerned that community development is not addressed in the CHSP paper. While the focus is on individual clients is applauded, community development plays a key role in health and wellbeing outcomes, empowering individuals and groups of people by providing them with the skills they need to effect change in their own communities. These skills are often created through the formation of social groups working for a common agenda and are supported by Ageing and Disability staff in Local Government.

Local Government in NSW has a long history in certain types of community service provision, predating or anticipating the present legal mandates, some elements of which can be traced back to the 19th century, some to the mid-20th Century and the balance to the 1970s. Community development in Local Government helps to build a strong and self-reliant community, and assists councils to be responsive to community needs. Councils engage in community development by co-ordinating and making links between the community and the three spheres of government in order to meet the needs of the community.

Local Government in NSW supports both ageing and disability sector organisations through dedicated positions in Community Services and Community Development. These roles have the capacity to facilitate networking, collaboration and the provision of information on the range of services and supports available without a vested interest. NSW councils build local capacity by providing infrastructure and resources for HACC interagency meetings and sector support and development, which are important for information sharing and encouraging a collaborative approach to service delivery.

Councils also make a significant investment in local facilities to support older people to remain independent. For example, Wollondilly council leases buildings to:
- Nepean Food Services which provides Meals on Wheels from Warragamba Cottage
- Warragamba and Silverdale Neighbourhood Centre, which provides the community with access to a variety of services and programs
- Wollondilly Support and Community Care Inc runs out of the School of the Arts Building in Picton and offers services including: Meals on Wheels, Neighbour Aid, Senior Friendship Groups
- Tahmoor Community Centre provides services to the whole community including seniors.
Ageing and Disability positions in NSW councils

The Commonwealth HACC Program and NSW Community Care Supports Program jointly fund "Non Output" Ageing and Disability positions in many NSW councils. Most councils also augment this funding. The role of these staff is to develop, promote and facilitate relevant strategies and activities at the local level focused on outcomes for the HACC target population. Local Government Ageing and Disability staff have a detailed knowledge of the HACC sector in the local context, and the ability to connect and assist people to access local services. These positions are contracted to 30 June 2015 and are funded in different proportions by DSS and ADHC depending on the demographic and service type mix of the LGA.

Local services and activity groups receive regular support and information from the Ageing and Disability staff in NSW councils. The support includes:

- providing information to members on the aged care system - assisting in the organising of specialist guest speakers as required
- supporting members to remain in the group as their care needs change through the provision of additional resources (one group is provided with transport to assist members attend when they are unable to drive themselves anymore) through to transition to the funded system as their needs change
- support with volunteer recruitment and training (unfunded service able to attend Food Handling, First Aid training, provision of support with evacuation training, enabling model)
- provision of resources
- support ‘new’ groups in obtaining suitable premises.

Engagement with older people is facilitated by these staff in the creation and support of Access committees and reference groups to ensure that needs of older people and people with a disability are understood. The Fairfield Seniors Network is a network of senior leaders of diverse backgrounds, who speak a number of community languages. Council support these leaders and provide them with information and capacity building in looking after elderly groups who often have a large membership who speak little or no English. These leaders provide a crucial and valuable service to their own community. This network also provides them with peer support and mentoring from local workers involved in supporting them. In turn they help local partnerships to organise community events, disseminate information and encourage their communities to participate and engage with the community.

The Ageing and Disability staff coordinate Seniors Week Activities and activities to promote International Day of People with Disabilities. These and many other activities run by councils promote active ageing, social participation and information provision. For example, Waverley Council hosts talks on Healthy Feet and Personal Safety, Hearing Tests and Men’s Health Workshops.

Ageing and Disability staff in councils also work with local facilities to ensure they are “age-friendly”. For example, Wollondilly Library offers events and workshops for Seniors including Tech Savvy Seniors Workshops, E-book and Audiobook Workshops, Mosaic Workshops, one on one help with technology session. The Library also offers a mobile library service, visiting sixteen villages in Wollondilly on a weekly basis and extends workshops to retirement
villages. They also work with other areas of council in planning age-friendly environments, assessing the accessibility compliance of new developments and ensuring council services recognise the needs of older people, such as in garbage collection and road safety. They also work with state government agencies to fill local gaps in service, such as for squalor and hoarding clean ups.

The Ageing and Disability positions in NSW councils represent an impressive ‘value add’ on the small investment by the Commonwealth and NSW governments, with most councils augmenting the positions by around 60%. Without these positions councils will be forced to reduce the extent of the support provided to older people and in some cases withdraw completely from service provision or from supporting other providers through subsidised office space and other facilities.

**Question 2:** How should restorative care be implemented in the new programme?

Restorative care, wellness and re-ablement should be included in the implementation of the new CHSP as a way of helping people improve their functions, independence and well-being and possibly enabling them to move out of the CHSP care system. There is also a need to continue to utilise existing local networks that provide healthy ageing programs and build on existing skills and experience in providing such programs. Many councils manage existing networks and partnerships that include council, community organisations, aged care providers, leisure centres and area health services.

**Question 3:** Are these proposed client eligibility criteria appropriate? Should the eligibility criteria specify the level of functional limitation?

**Question 4:** Are the circumstances for direct referral from screening to service provision appropriate?

**Question 5:** Are there particular service types that it would be appropriate to access without face to face assessment?

LGNSW considers that the streams of the CHSP which support the engagement and participation of older people in the community, such as Social Participation and Access to the Community do not require face to face assessment. These services are supplementary to the nursing and personal care type services which would need to be assessed on an individual basis.

**Question 6:** Are there any other specific triggers that would mean an older person would require a face to face assessment?
Question 7: Are there better ways to group outcomes?

LGNSW considers that Transport should be included with Social Participation. As the role of CHSP transport is to enhance social contact and access to cultural and religious events, local health appointments and shopping and banking, it is integral to the outcomes of the Social Participation stream, that is, supporting older people’s social connections. Transport as a stream on its own is meaningless without the connections it facilitates. LGNSW has some concerns that Transport is seen separately from supporting people during the activity to which they are being transported, such as shopping, which has traditionally been undertaken in the Social Support stream.

Aligned with transport is travel training which enables people to feel confident using public transport independently. Provision for travel training should be incorporated into the Social Participation/Transport stream.

In addition, LGNSW suggests that Other Food Services should be included with Meals to enable nutrition needs to be addressed by providing appropriate meals within a single program.

LGNSW recommends that Home modifications and equipment should run across both CHSP and Home Care Packages and sit outside of any funding cap. LGNSW has a number of concerns regarding Home Modifications and Maintenance. Firstly, it is not clear whether the proposed maximum home modifications subsidy of $10,000 is per job or for each person over a life time. Secondly, if it is proposed that post July 2015, Home Modifications focus on simple, lower cost modifications, LGNSW is concerned that smaller service providers will not be given the same opportunity as larger organisations to provide these services locally. A mixed funding approach with block funding to continue for home maintenance services may be more appropriate.

Question 8: Are there specific transition issues to consider?

There are a number of transition issues that LGNSW would like to raise, particularly in reference to their impact on the role of Local Government in supporting older people to live independently in their local community. They cover the specific issues facing rural communities, transport, meals and home maintenance.

Rural

The Client Eligibility Guidelines (p 27 of the CHSP discussion paper) fail to identify socially isolated older people living in rural areas who have greater needs than those “living in the community”, where services are in more easily accessed. The lack of recognition of the impact of distance on older people in rural and remote areas raises concern that the cost of travelling to provide services to isolated people has not been properly addressed in the CHSP. Councils in rural NSW are concerned that long travel times will negatively impact on the time available for service provision, unless travel time is separately costed.

In addition, LGNSW supports the proposal for a regional approach to assessment, however suggests that local assessment will provide the greatest access for clients and local service
delivery provides for relationships to support service provision. There are still questions regarding the transition – particularly in relation to roles of Local Government. Often councils are the first port of call for clients requiring services and information to help them make informed decisions; this is the role that Local Government plays and it needs to be acknowledged and resourced.

**Transport:**
In rural areas, clients may need to travel to other regions to access specialist health services. Distance and geography may necessitate coordination of transport services across a number of regions. LGNSW suggests that CHSP transport providers should be able to provide services across multiple regions in order to meet the needs of isolated rural residents. Fees for transport services will need to recognise the cost burden on isolated residents and that service providers may need to be compensated if these rates are below their current unit cost.

As acknowledged in the *Review of Community Transport under the Commonwealth HACC Program: Final Report by March 27th 2014*, Local Government is critical in supporting community transport and in many cases, purchasing and maintaining vehicles and in managing volunteers.

**Meals**
Similarly, the final report on *Review of Meal Services under the Home and Community Care (HACC) Program: Final report – Implications for Meal Services in the Commonwealth Home Support Program* recognised that the current output based funding model for meals failed to consider the social benefits of meals provision and that the funding model is sustainable only due to Local Government commitment and the heavy involvement of volunteers. The report states that “If either of these were withdrawn, the service would cease”.

**Home Maintenance**
In terms of Home Maintenance, councils are concerned that sufficient transition arrangements will be put in place for existing clients already receiving routine, on-going services, such as lawn mowing, to find alternative services. Local Government plays an important role in providing information on local services, as outlined in our response to Question 1.

In the transition to new service models, Local Government’s investment in equipment and volunteer staff needs to be preserved and supported to ensure that clients’ services are continuous. Transition issues need to include gearing up (or down) within the requirements of Local Government frameworks, legislation and industrial and procurement requirements. Any fees to be charged for CHSP services by council as a provider will need to be included in council’s advertised fees policy.

**Question 9:** How are supports for carers (other than respite services) best offered? For example, should these be separate to or part of the Commonwealth Home Support Programme
Question 10: What capacity building resources are needed to assist with the sector’s transition to the Commonwealth Home Support Programme?

Volunteer management is appropriate to be included as part of the Sector Support and Development stream. People want to volunteer in their local area, with people who live locally, making Volunteer Service management a natural fit with Local Government. LGNSW considers that councils who recruit, support and train volunteers in their areas for CHSP services should be provided with funding to support this important role. Councils are structured for governance, privacy, confidentiality, risk management, insurance, central intakes, police checks, and working with children checks.

Examples of Local Government’s role in volunteer management are outlined here. The Ryde Hunters Hill Volunteer Referral Service is managed by the City of Ryde and promotes, recruits and refers volunteers to HACC agencies in Ryde and Hunters Hill. Up to 7 HACC organisations were supported and the service received 300 volunteer enquiries per year. Up to 6 volunteer training sessions were organised per year to train new and current volunteers for HACC services. The service also convenes a quarterly Ryde Hunters Hill Volunteer Coordinator Forum for information sharing and networking.

Willoughby City Council currently auspices the lower North Shore HACC volunteer coordinator who promotes, recruits and refers potential volunteers to HACC services across four Local Government Areas. In addition support is provided to volunteer coordinators from local HACC programs, through organising promotional events such as volunteer training and an annual expo event to promote volunteering opportunities to the community. Willoughby City Council’s Meals on Wheels service currently has 150 volunteers who contributed 16,291 in delivery hours during 2013.

City of Sydney Council has 40 volunteer drivers and ‘runners’ delivering meals and a further 18 volunteers assisting with podiatry bookings, bus trips, and as volunteer tutors for classes and courses. Their volunteers include 4-8 young people with intellectual disability in a local transition to work program plus 2 support workers; otherwise volunteers are adults retired/semi-retired; shift workers; younger self-employed and students. Approximately 3,000 volunteer hours a year are provided and the council carries the costs of police checks, mobile and 2-way telephones, training, volunteer reimbursement of expenses (mileage & travel), recognition events, annual volunteer insurances (over $10,000 pa).

Other councils use volunteers for social support services, manage Volunteer Access and Social Justice Consultative groups and participate in events with other councils to thank volunteers. Fairfield City Council provides support, mentoring and governance to a number of volunteers programs, including the Fairfield Seniors Network and Seniors Services Interagency in addition to the SWS Ageing and Disability Forum (former HACC Forum).

Volunteer services will become even more important where clients may have access to fewer services in the future if they move to packaged care. LGNSW hopes that the introduction of “greater contestability” does not mean that those services that are smaller and local, and therefore attract local volunteers and staff with an understanding of local people’s needs, are not disadvantaged by the new service model. It has been shown greater
contestability often leads to funding being granted to the larger organisations with a head office based remotely from the clients.

**Question 11:** How should the current Assistance with Care and Housing for the Aged Program be positioned into the future?

**Question 12:** Are there any other issues that need to be considered in transitioning functions from the current HACC Service Group Two to My Aged Care?

For Multiservice Outlets the provision of Counselling/Support, Information and Advocacy funding (Service Group 2) has allowed a more in-depth assessment process for more complex clients who, with some initial attention, information and advocacy may not require a referral to packaged care.

In NSW, Local Government Aged and Disability staff have provided a large proportion of HACC service type 2. When older people experience a crises or sudden change in circumstances they often intuitively call their council. There will be a transition period for older people to use My Aged Care as the initial point of contact. Many councils subsidise the client care co-ordination, informal counselling and support. For example, Willoughby City Council augments the current funding for this service type above the funded 70 hours per week.

**Question 13:** Is there anything else you want to raise to help with the development of the Commonwealth Home Support Programme?

LGNSW wishes to raise some issues relating to contestability and sector support and planning. In particular, Local Government is concerned that the criteria for assessing the success of contested services need to include more than economic efficiency. A successful service should demonstrate benefits “on the ground”, including that services will cover a whole region not just big towns. Local relationships should be given weight to ensure that people are able to keep their existing providers and activities.

The regional nature of the Sector Support and Development roles as stated in the CHSP Discussion paper precludes Local Government from taking a role unless they form regional groups to bid for the Sector Support or regional assessment role. More detail is required on how resources for the Sector Support role will be allocated. How many Sector Support staff will be allocated to each region, and what formula will be used to determine this? Will factors relating to cultural and linguistic background, Aboriginality or the rate of population ageing be incorporated?

**Local Government’s role in service planning**

Local Government commits to pursuing the Australian vision of a fairer, more just and more equal society. Local Government recognises that strong support for social justice is crucial to the Australian vision of a fair, just and equal society.
For Local Government ‘social justice’ is based on the application of the following four principles:

- **Equity** - fairness in the distribution of resources, particularly for those in need
- **Rights** - equality of rights established and promoted for all people
- **Access** - fair access for all people to economic resources, services and rights essential to their quality of life
- **Participation** - opportunity for all people to genuinely participate in the community and be consulted on decisions which affect their lives.

LGNSW submits that Local Government social/community planning and community services play an important role in contributing to the physical, psychological and social health, welfare and wellbeing of older people. Local Government is the appropriate sphere of government to take a lead role in social/community planning and community services for its older citizens as:

- it is in the best position to identify and respond to the unique needs of the local area and diverse populations within the area
- it is easily identifiable and democratically accountable to the community for the nature and quality of services provided
- it has a capacity for flexibility and adaptation
- it actively develops strategies that encourage social cohesion or social capital, build stronger and more self-reliant communities and deliver positive economic outcomes.

LGNSW therefore seeks a commitment from the Commonwealth that Local Government will be acknowledged as an equal partner in the state and regional planning of services and supports, beyond only funded services, in the whole range of elements that enable older people to live full and independent lives. Local Government needs time to plan, and to consider how it will be able to implement its local Ageing Strategies and continue to support healthy ageing, if the Ageing and Disability role is no longer funded.