



Attendant Care Industry Association

Attendant Care Industry Association of (ACiA)

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ACiA Submission

Senate Standing Committees for Community Affairs

Living Longer Living Better Aged Care Reforms

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1. About ACiA

The Attendant Care Industry Association (Australia) Ltd (ACiA) is the peak body representing government and non-government attendant care providers, including private, not-for-profit and charitable providers. Nationally ACiA represents approximately 110 organisations, who collectively employ more than 55,000 workers delivering services in the community.

ACiA's vision is that the Attendant Care industry is known and respected as a provider of quality services. To achieve this vision, ACiA provides education, resources and support to the industry, as well as developing and administering its own management systems standard (endorsed by JAS-ANZ), the Attendant Care Industry Management System Standard (ACIMSS), that has been adopted as marker of quality attendant care service by government departments and authorities across a number of States in Australia since its inception in 2008. The revised version of ACIMSS requires providers to demonstrate their ability to assist service users (recipients) to achieve personal outcomes, to direct their own services and support, and to participate in their community, will be available in early 2013.

The term "attendant care" refers to any paid care or support services delivered at a person's home or in their community to assist them to remain living in the community. It targets people of all ages, with ill health or a disability. Attendant Care aims to maintain or improve a person's independence, allow them to participate in their community and reduce their risk of admission to a facility or hospital. This is achieved by providing assistance based on each person's individual needs. It may include nursing care and assistance with all activities of daily living including personal assistance, domestic services, community access, vocational support, educational support, child care services, gardening/home maintenance, respite care, palliative care, social support, community integration and therapy program support.

Attendant Care therefore supports the Commonwealth and State policies of enabling people to actively participate in society, remain in their own homes and avoid unnecessary residential care. ACiA seeks to be involved in the future to contribute to the development of policy and service reform, by bringing to the discussion our experience and expertise, including:

- Membership of approximately 110 organisations nationally, representing around 55,000 workers delivering services in the community.
- Membership across the aged care, disability and home and community care sectors
- Specific expertise in the delivery of support to people living at home
- Specific experience in complex clinical care in the home
- Lengthy provider experience of delivering individualised support according to the wishes of participants

- Expertise and experience in the implementation of quality certification systems, through the development of our ACIMSS 2008 and its subsequent review in 2012
- Proven track record of engaging positively with reform processes, and contributing accordingly.

2. Context

ACiA is a member of the National Aged Care Alliance (NACA), participating at its quarterly meetings, contributing to its position papers and policies, and appointed to the Consumer Directed Care and Quality Indicators Advisory Groups.

ACiA has recently endorsed NACA's ***Home Care CDC Policy Elements & Guideline Development Advisory Paper***.

The Quality Indicators Advisory Group has only met once, and at this point it is too early to anticipate the position that NACA will take on how the management of quality, and continuous improvement, should be addressed under the reforms. ACiA will continue to work closely with NACA to bring the experience it has as an industry association whose members work exclusively in home and community care environments, and as the owner of a quality management system, the Attendant Care Industry Management System Standard.

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3. Overall Comment

ACiA is strongly supportive of the LLLB reforms, especially the focus on providing more opportunity for support to be delivered to people in their own homes, enabling them to age in place and to provide many more alternatives to residential aged care. ACiA also endorses the principles of consumer directed care, as our membership has witnessed the profound and positive effect this has had on Service Users (recipients) with disability, including the aged, in various funded programs who have exercised their choices to ensure the support they receive leads to tangible achievements in their community. The reforms as a whole, therefore, are supported by ACiA as we believe they constitute a positive and constructive move in the right direction, so people who are ageing can look forward to remaining in their own home connected to their family, friends and community, even as they may experience a decline in their health and functional abilities.

The response of ACiA to the legislation, therefore, is positive, as the five bills currently before Parliament go some way to addressing the barriers to reform in the *Aged Care Act 1997*, and establishing the foundations on which to build a reformed system that has the consumer at its heart. The strategy of including detailed provisions, such as assessments, in legislative instruments rather than in the legislation itself is a prudent way to avoid in the future what is currently having to be done to amend the previous legislation. *The Aged Care (Living Longer Living Better)*

Bill 2013 goes a long way to achieving a greater level of equity for aged care Service Users (recipients), by clearly demarcating between accommodation and care costs, and applying subsidies in such a way that Service Users (recipients), will be much more able to tailor support to their needs, and to facilitate the way to pay for this. The new means test, the caps on annual and lifetime fee payments and the ability for Service Users (recipients), to pay a fully-refundable accommodation bonds, or enter into a rental arrangement, or a combination of both, are welcome innovations.

ACiA is also supportive of the changes to administrative arrangements, with the creation of the Aged Care Pricing Commissioner to provide closer scrutiny over issues of costs and pricing; and the move to establish the new Quality Agency as a statutory authority, taking over from the previous Aged Care Standards and Accreditation Agency. The increased scope of this agency with the consolidation of the complaints function within this scope seems practical and again sets the foundation for a greater emphasis on quality, and the way it is verified and implemented systematically, than is currently the case.

Finally, ACiA is particularly supportive of the way Consumer Directed Care is supported in principle, and hope that the effect of the legislation and implementation of the changes in Home Care supports and residential aged care arrangements. With Service Users (recipients), at the heart of decision-making it will create a platform to shape and alter the practices of providers to deliver support and care in a way that is genuinely tailored to an individual's needs and wishes.

4. Commentary on Specific Bills

4.1. Bond Security Bills

ACiA acknowledges the changes contained within the *Aged Care (Bond Security) Amendment Bill 2013*, and the *Aged Care (Bond Security) Levy Amendment Bill 2013*, but has its focus primarily on changes which impact on the delivery of Home Care, and so offers no comment regarding Bond Security Bills.

4.2. Living Longer Living Better Bill

ACiA supports the provisions of the *Aged Care (Living Longer Living Better) Bill 2013*, and believes it will provide the framework for reforms resulting in delivering greater choice and flexibility to Service Users (recipients), and the option to remain in their homes for longer. The *Statement of Compatibility with Human Rights* is significant and welcome, in particular the acknowledgement that the United Nations Convention on the Rights of Persons with Disabilities, in particular Article 3(a), underpins the greater emphasis upon choice and participation which this bill seeks to address.

The changes that will take place as a result of the legislative and regulatory amendments will be significant, and it is prudent, therefore, to conduct regular evaluations on the effect of the proposed changes and what impact they are having.

ACiA supports the requirement, in Clause 4, to conduct an independent review of how effective the changes have been in their stated outcomes, particularly those in Subclause (2)(a) which will consider whether support and care options available to older people who wish to remain in their own homes have been expanded and improved. Reviews of this nature are important and may identify areas that have not been as successful as originally planned. It is encouraging that Subclause (6) requires the report to be tabled in Parliament, ensuring the results are publically available. As the sector has been very much involved in the development of the reforms it is right that it should also be very involved in their evaluation.

ACiA supports the amendments made to paragraph 56-2, with the insertion of a new paragraph 56-2(ca), making it a legislative requirement that care and support must be carried out in the manner agreed to by the Service Users (recipients), and the approved provider. This gives effect to the principles of Consumer Directed Care and is important that it is included in the legislation, rather than being dealt with by means of legislative instruments.

ACiA is supportive of the additional levels of Home Care packages available. The transition arrangements for providers, in particular the automatic approval of those previously approved for flexible care and now for Home Care in addition, detailed in Part 2, are welcome, to ensure there is continuity and certainty. ACiA will continue to observe whether or not the new arrangements provide opportunities without impediments to suitably credentialed providers to enter the aged care market for the first time, or to increase their market share, if indeed they are experienced and skilled in delivery flexible and quality support within the home environment.

Section 95A-1(2) of the *Aged Care Act 1997* has been amended to reflect the changes to the powers of the Aged Care Commissioner, and in part relates to the autonomy that the new Quality Agency will reportedly hold. ACiA supports the consolidation of the quality and complaints functions within the new agency, and therefore supports the amended powers of the Aged Care Commissioner to allow this. It will be important, however, for there to be a mechanism which clearly ties the reports of the two Commissioners (including the Aged Care Pricing Commissioner) and the CEO of the Quality Agency together, so that an overall picture of the performance of the system is provided. Section 95B-12 requires the new Aged Care Pricing Commissioner to provide an annual report, there should also be a requirement for an overarching report to be delivered annually that provides the overall picture.

4.3. Australian Quality Agency Bills

The effect of these bills is to facilitate the transition from the current Aged Care Standards and Accreditation Agency to the new Quality Agency, a move which ACiA supports.

ACiA welcomes further discussion regarding the operation of the Quality Agency that may be altered over time to accommodate practices in line with Consumer Directed Care and the possible influx of providers who currently deliver services in the disability sector and Home and Community Care (HACC) program. The issue for providers is not that there are different Standards regulating and governing practice, rather it is the different modes of monitoring and certifying providers against these Standards. Currently the processes of quality systems and certifications operate independently and **often require providers to establish and maintain multiple quality systems** to ensure the required quality is achieved for each funder. A national approach to quality management should be adopted. Whilst this may take until 2016 there are quality systems that meet the relevant criteria that currently exist, and should be mapped to reduce repetition.

ACiA will continue to work with NACA to look at way to ensure that existing quality management systems can be enhanced to accommodate the requirements of aged care, so that multiple systems do not have to be established, implemented and verified, at great cost to providers.

The Attendant Care Industry Management System Standard (ACIMSS) already incorporates services for the aged and disabled with an emphasis on Consumer Directed Care. ACiA member organisations would be reluctant to see the development of yet another quality system without due consideration to or inclusion of existing systems.

A positive example of this for those who have achieved ACiA endorsed ACIMSS who have then be required to complete the National Community Care Common Standards found they needed no preparation or changes to their existing quality systems. to meet these.

In conclusion ACiA is supportive of the legislative changes and looks forward to better outcomes for the Service Users (recipients), and we look forward to being further involved in the inquiry.

Please do not hesitate to contact me should you require further clarification
Danielle Bennett representing the Attendant Care Industry Association (ACiA)