

Inquiry into Caring for Older Australians
Productivity Commission
GPO Box 1428 Canberra City ACT 2601

21st March 2011

Dear Sir/Madam

In reference to your call for responses to the draft report into Caring for Older Australians, please find the following submission. This has been compiled from feedback received from service providers who are funded under the Home and Community Care program in the Northern Sydney region.

The comments are provided in response to specific items within the Summary of Draft Proposals, as circulated by NSW Human Services, Ageing, Disability and Homecare. These are found in the highlighted column on the left. These comments have been provided from staff within the following organisations:

Manly Council
Warringah Council
Carelink Information Service
Christian Community Aid
Northern Sydney Multicultural Access Project Multicultural Health Service

Thank you for providing us with this opportunity to contribute to the decision making process for much needed reform.

Sincerely,

Rebecca Hogg
Northern Sydney HACC Development Officer

Summary of draft proposals

<i>Current problem</i>	<i>Proposed reform</i>	<i>Main benefits of change</i>	<i>NORTHERN SYDNEY COMMENTS</i>
<i>Funding</i> <i>Principles to guide the funding of aged care to meet the challenges of the future</i>			
The present funding regime is not delivering a sufficiently sustainable aged care system, and fails to adequately take into account consumers capacity to pay	Provide guiding funding principles to develop an aged care system that is financially sustainable, and better aligned to consumers needs and capacity to pay.	Move to a more equitable funding regime that supports the sustainable provision of the quantity and quality of aged care needed into the future.	<p><i>Response 1:</i></p> <p>It is essential that stringent checks (ie accreditation and ongoing quality controls and reporting) are imposed on private companies providing care - as many frail (possibly dementing) aged people will need to avail themselves of these services. We are also concerned that there is insufficient guidance given to older people who often struggle with the complexity of services and costs.</p> <p><i>Response 2:</i></p> <p>Providing there is a clear & simple pathway to ensure those unable to pay are not disadvantaged.</p>
<i>The major components of aged care need separate policy settings</i>			
Current arrangements for aged care subsidies and user contributions are 'ad hoc' and 'inconsistent' and are not well aligned across care settings.	Separate policy settings (including for subsidies and co-contributions) for the major cost components of aged care, namely care, everyday living expenses and accommodation.	Unbundling or separating out the costs of aged care will facilitate a more effective and equitable funding framework for the aged care system and provide more choice for older people.	<p><i>Response 1:</i></p> <p>We agree with this premise.</p>

<i>Current problem</i>	<i>Proposed reform</i>	<i>Main benefits of change</i>	<i>NORTHERN SYDNEY COMMENTS</i>
<i>Regulatory restrictions on community care packages and residential aged care bed licences</i>			
The supply of aged care services is not matched to the level of demand or the geographic incidence of that demand.	Remove restrictions on the number of community care packages and residential bed licences. Remove distinction between residential high care and low care places and discontinue the extra service category.	Providers would be able to better respond to the level of demand and the preferences of a wider range of care recipients. Consumer access to care will be substantially improved, regardless of their type of accommodation.	<i>Response 1:</i> This may mean that more resident funded nursing homes emerge in affluent areas. Experience to date indicates that the quality of care in some of these homes is inferior to the subsidized homes. It is not just a matter of 'bricks and mortar' but more the quality of care and compassion that exists in an elderly person's final stage.
<i>Regulatory restrictions on residential accommodation payments</i>			
Accommodation charges do not reflect the costs of providing residential accommodation, with accommodation bonds bearing little relation to real costs.	Allow accommodation bonds for all residential care, abolish retention charges and give residents the choice of a periodic charge, an accommodation bond or a combination of these. Limit accommodation bonds to the equivalent of periodic accommodation charges. But uncap such charges to reflect differing standards of	Improves the capacity of the industry to meet the demand for residential high care services. Improves the transparency of accommodation costs for residents and ensures that a bond reflects the actual cost of accommodation supplied.	<i>Response 1:</i> We agree with this.

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	accommodation.		<i>Response 2:</i> Bonds should not be mandatory. Clients should be able to pay monthly for their cost of care in a similar way to paying rent.
<i>Funding</i>			
<i>Co-contributions across community and residential care</i>			
Consumer contributions, if allowed, vary and are not always related to cost of supply nor are they related to people's capacity to pay.	Rate of co-contributions to be determined by the Australian Government, and based on affordability and capacity to pay. Where the care services provided are of a value above a set threshold (of around \$100 per week), a comprehensive means test for care recipients' co-contributions will apply.	Consumer contributions will better reflect people's capacity to pay based on their wealth not just income. Below the threshold, a simpler test based on the age pension would be used for determining co-contributions.	<i>Response 1:</i> Appears fair.
Excessive or catastrophic costs of care could totally consume older people's accumulated wealth.	A lifetime stop-loss limit comprising the care recipients' co-contributions towards the cost of government-subsidised care services.	The stop-loss limit ensures consumers and their families are not exposed to excessive costs of care.	<i>Response 1:</i> Also seems fair.
<i>Assisting older Australians to pay for care and support</i>			
Current arrangements provide an incentive for older people to sell their residence and 'over-invest' the	Establish an Australian Pensioners Bond scheme to allow age pensioners to contribute proceeds	Pensioners have more choice in how they use their housing wealth. They can retain their pension	<i>Response 1:</i> An innovative way of subsidising government. Seems fair and realistic (given the increasing



 *Better care in our community*

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Inadequate supply of residential aged care places for the financially disadvantaged.	Providers obliged to make available a proportion of their accommodation to supported residents, unless already exempted. Set on a regional basis, the obligation would be tradable between providers in the same region.	Ensures equitable access to residential care for those unable to pay for their own accommodation costs. This flexibility will allow providers to pursue more efficient and innovative residential business models.	<i>Response 1:</i> We totally agree with this premise. There also needs to be improved linkages between DOH (with many older people on their waiting list) and the voluntary organisations who provide subsidized accommodation. A wholistic approach should be taken to accommodation for older, financially disadvantaged people.
The Government subsidy for supported residents is inadequate.	The subsidy for approved basic standard of residential care accommodation for supported residents should increase to reflect the average cost of providing such accommodation.	The level of subsidy will sustain the commercially viable provision of supported accommodation (based on a twin room and shared bathroom).	<i>Response 1:</i> We agree.
<i>Scheduled prices, subsidies and co-contributions to reflect actual costs</i>			
Government set prices do not fully reflect the cost of delivering services. As a consequence, the quantity and to some degree quality of aged care services on offer has suffered.	Regular, transparent recommendations from the new independent regulatory commission on the scheduled set of prices and related indexation, lifetime stop-loss limit, and approved basic standard of residential care accommodation.	Realistic prices, subsidies and indexation will support a sustainable aged care industry. Greater industry confidence in the price setting process. Protects consumers from market power of providers and encourages the supply (and choice) of aged care services.	<i>Response 1:</i> There must be stringent quality control checks for all aged care. Too often the 'checks' are arbitrary, tokenistic and fail to see the <i>quality</i> aspects of care that make such a difference to a resident's life.



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Care and support			
<i>A single gateway into the aged care system</i>			
Consumers face a complex and confusing array of entry points into the aged care system.	<p>Establish an Australian Seniors Gateway Agency to provide information, assessment, care coordination and carer referral services, to be delivered via a regional network.</p> <p>The Gateway Agency will facilitate the assessment of need and capacity to pay co contributions.</p>	The Gateway Agency will make the aged care system easier to access and navigate for potential aged care recipients and will be more efficient because it will remove duplication of some services and provide greater care coordination.	<p><i>Response 1:</i></p> <p>1/ Information needs to be provided in user friendly language. e.g. terms such as service, carer, respite, support need to be explained in everyday language e.g. over 70% of callers accessing the NSCRCC information service are 'family' i.e. 'carers', family members, partners, guardians, 'care recipients.' Need to develop and use 'family friendly' language and terms.</p> <p>2/ A large percentage of new NSCRCC callers heard about the service through personal contact e.g. someone handed them a brochure, someone told them about the service.</p> <p>3/ Formal assessment can be a barrier to accessing services</p> <p>4/ Common complaints from callers (including service providers) having difficulty accessing the current centralised referral and assessment centres include</p> <p>-not getting through,</p>

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			<p>even after waiting 20-30 mins</p> <p>-not being able to navigate the leave a message/ phone system</p> <p><i>Response 2:</i></p> <p>As a local government representative, the term 'regional' needs to be clarified. What is defined as regional, what and how much area does each regional gateway access point cover? If regional areas are too large, accurate service information and knowledge is compromised. Important that the access points are located within the region to ensure local knowledge of services and their capacity. There is a need for gateway staff to understand the needs and gaps of each local government area within the defined area of a 'region'. Geographical considerations may need to be made when referring clients to particular services therefore an understanding of the area is necessary. The Regional Gateway staff will also need to have an understanding of the regions the</p>

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			<p>community profiles to ensure ease of access and equity in service provision for people from culturally diverse communities.</p> <p><i>Response 3:</i></p> <p>While this ideas sound good in theory - we are concerned about how well it will work 'on the ground'. It is imperative that these agencies have comprehensive 'local knowledge'. The agencies must have excellent links to key agencies and personnel who are very experienced at both guiding clients to the appropriate services, and reading the 'hidden agendas' that often present with clients.</p> <p><i>Response 4:</i></p> <p>Whilst it is great to have an access point that all people direct themselves to, it is important that the 'no wrong door' strength of the current system is not lost. It is important for services with the capacity to conduct assessment and review be supported to continue this function.</p> <p>Particularly for services where referral can easily be made internally or to another organisation. That will enhance efficiency and</p>

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<i>Care continuity and consumer choice</i>			flexibility when a client's needs change. It will also work better for CALD clients who generally prefer to negotiate with people they are familiar with rather than someone over the telephone.
At present, community care is provided in discrete care silos, and moving between these is problematic for consumers. Consumers have limited choice about the mix of services they receive and the provider of those services.	Replace current discrete care packages with a single system of integrated and flexible care provision. The Gateway Agency will approve a set of services to individuals on an entitlement basis. Individuals may choose an approved provider or providers. To support these arrangements, fund an expanded system of consumer advocacy services and provide care coordination and case management as needed.	Consumers will have better access to services appropriate to their needs as these needs change. Consumers will be able to exercise greater choice about who provides those services. Expanded consumer advocacy services and other supports will assist informed choice, particularly among vulnerable consumers.	<i>Response 1:</i> It is a positive step that consumers are able to choose which service provider they will use. Services will be required to start marketing themselves within the community. Service focus may tend to shift to a focus on client recruitment rather than focusing efforts on maintaining quality service provision. <i>Response 2:</i> We are very aware that the variety of packages has been fraught with difficulties - in terms of moving from one to another. However, unless quality case management is involved this will not be resolved.

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			<p>Interested to know who, and how advocacy services will assist? Will existing programs be given the additional role of advocacy?</p> <p><i>Response 3:</i></p> <p>Many older people from CALD backgrounds prefer workers from the same cultural/language backgrounds. The Gateway Agency needs to provide information on or make referral to services with the capacity to provide CALD workers where appropriate. The Gateway Agency can maintain a list of services that have CALD workers. Many services have expressed a need for such a list, which will save them a lot of time and resources when supporting CALD clients. However, services are currently unable to keep and maintain such a list.</p> <p>Care coordination (and advocacy) is a high priority for older people from CALD backgrounds who often need additional assistance to enter and transition to services. It is important that care coordination is</p>

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<i>End-of-life care</i>			delivered in a culturally sensitive way. It is recommended that specialist position be designated to support CALD communities. Numbers of positions within each region depends upon their local/ regional demographics. It can be built on the model developed by the different CALD Counselling/Support, Information and Advocacy Services in different regions.
Palliative and end-of-life care needs of older Australians are not being adequately met under the current arrangements.	Ensure that residential and community care providers receive appropriate case mix payments for delivering palliative and end-of-life care.	A greater role by residential and community care providers in delivering these services will provide more appropriate care and be less expensive than services delivered in a hospital.	<i>Response 1:</i> It is essential that end of life training and additional resources are made available to both residential and community personnel to achieve this aim. Extra staff would be required to coordinate the care of the resident/client plus the coordination of the practical and spiritual aspects. The liaison with the relatives and other health and pastoral workers is also essential.
<i>Block funding of care and support services</i>			
Many current programs that are block funding should receive funding through consumer entitlement commensurate with	Governments should only block fund programs where a detailed consideration of scale economies, generic service	Direct funding would target a limited number of programs to ensure sustainability or where entitlement	<i>Response 1:</i> It is essential that services such as transport, social support, carers support continue to



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usage. But some will need to be directly funded.	need and community involvement indicates there is a need to do so.	funding is not appropriate such as for wellness or social inclusion activities, some remote and Indigenous services.	receive block funding. Government must be mindful of the cost of attracting, training, supervising, retaining volunteers, which is a core business of many services for older people. <i>Response 2:</i> It is fantastic that the draft report recognised the importance of multicultural centred based day care and a range of individual and group social support program for older people from diverse cultural backgrounds. It is however, important that these services are recognised as basic support and included in the consideration for block funding.
<i>Improving the interface between aged care and health</i>			
Limited integration of services between health and aged care service providers leads to inappropriate hospital admissions and care. Current health services are not sufficiently responsive to aged care needs.	Promote the expanded use of in-reach services to residential aged care facilities and the development of regionally or locally-based visiting multidisciplinary health care teams.	Improve wellbeing of residents from not having to move between residential and hospital care, reduce cost burdens on the health system. Teams will develop expertise in aged care, deliver more responsive services and attract health workers to this sector	<i>Response 1:</i> This is a sensible development however 3 aspects must be considered. 1. The residential services must have trained, confident personnel on site to provide high level care to very sick residents. 2. There must be more expertise willing to come into aged residential care to give treatments ie xrays etc.

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3. There must be an education program levelled at the relatives and doctors of residents who will mainly insist that their patient requires hospitalisation.

Response 2:

This should also include the connection between hospital discharge or from health services to aged care services provided in the home. Better and timely referral to basic support services will reduce admission and re-admission of older people who live in their own home.

Catering for diversity

Caring for special needs groups

Older people from culturally and linguistically diverse backgrounds can have difficulty in communicating their care needs or having their preferences and cultural needs respected. These circumstances can negatively affect the wellbeing of the older person receiving care.

The proposed Australian Seniors Gateway Agency should cater for diversity by providing interpreter services and diagnostic tools that are culturally appropriate for the assessment of care needs.

Improved assessments of care needs and improved delivery of appropriate care for people from culturally diverse backgrounds will help enhance consumer wellbeing.

Newer diversity needs will be better recognised including gay and lesbian care recipients and refugees.

Response 1:

It will be essential that gateway staff are culturally sensitive and trained to ensure that people who are from a CALD or ATIS background have their needs appropriately met. The access point will need to be user friendly and efficient, ensuring that clients are responded to effectively and efficiently.

Response 2:

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			<p>It will be essential that CALD clients have advocates in regard to the most appropriate services for their clients. Guidance and training for all services (including private agencies) is imperative.</p> <p><i>Response 3:</i></p> <p>Considering the increasing number and growing proportion of older people from CALD backgrounds, it is important that the needs of older people from CALD backgrounds are taken into account in this reform. Numerous research and consultation feedback has shown that the majority of older people from CALD backgrounds prefer to use cultural specific or multicultural services. It is vitally important that the Gateway Agency has built in Multicultural Specialist Team or Position.</p> <p>How the team or positions operates needs to reflect local demographics and service usage pattern. These teams can also provide outreach service to better inform communities about the functions of the Gateway Agency.</p>

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Caring for special needs groups can involve added costs, which are not fully reflected in scheduled prices and subsidies.	The proposed Australian Aged Care Regulation Commission, in recommending care prices and subsidies, should take into account costs associated with catering for diversity.	Improved wellbeing of care recipients by facilitating access to services that are more appropriate to their particular needs.	This can build on the Multicultural Access Project model (NSW), with clear guidelines and performance indicators. <i>Response 1:</i> It is vitally important to ensure that additional cost of providing culturally appropriate service is not transferred to individual service users. The additional cost, if any, should be seen as a part of the overall cost of providing aged care, rather than providing a service to an individual.
There is limited capacity within Indigenous and remote communities to provide aged care services.	Ensure that remote and Indigenous aged care services be actively supported before remedial intervention is required with an emphasis on building local capacity and service sustainability.	Address current and prospective workforce shortages. Help to ensure sustainable, culturally appropriate services.	
Housing of older Australians			
<i>Improving the ability of older Australians to age in their homes and communities</i>			
There is no overarching policy framework for providing home maintenance and modification (HMM) services at the national level or in most states.	Governments should develop a coordinated and integrated national policy approach to providing home maintenance and modification services.	Improved effectiveness of HMM services in achieving health, community care and housing outcomes for older people.	<i>Response 1:</i> The Australian Government backed equity scheme will undoubtedly have an impact on the HMM. What safeguards will be put in place to ensure these services have adequate



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The absence of integrated information systems hampers planning and development of HMM services.	All governments should develop benchmarks for levels of services to be provided, eligibility and co-contributions, and professional and technical expertise.		resources to assess, implement and follow-up on services to clients? There is always a number of clients who do not pay for service or pay only a proportion - how will this situation be addressed - particularly in cases of clients with early dementia?
Access standards in building regulations have not been developed specifically for residential dwellings or been based on the characteristics of people 65 and older.	Develop building design standards for residential housing to meet the access needs of older people with functional limitations, for use when people wish to modify their house.	Improve the ability of older people to remain living in their homes and communities by using more appropriate standards, if they wish to modify their house.	<i>Response 1:</i> How will this be approached? Is it intended that a wholistic approach to housing ie adaptability - is taken? This would mean working with State and Local Government to ensure that this is complied with.
<i>Improving the supply of affordable housing for older Australians</i>			
Australia has a shortage of affordable rental housing, and rental markets are pressed to meet the demands of older renters. This shortage is expected to worsen.	COAG to develop a strategic policy framework for providing housing that would cost effectively meet the demands of an ageing population.	Identify what changes or additional policies (including assessing current initiatives) are required to ensure the housing needs of people as they age are being met.	<i>Response 1:</i> Highly recommend this proceed.
<i>Regulation of retirement specific living options</i>			
Retirement specific living options are attracting an increasing share of older Australians.	Regulation of retirement villages and other retirement specific living options should not be aligned with the	Not imposing additional and inappropriate costs on retirement village accommodation.	<i>Response 1:</i> The difficulty here is that e.g. if a Residents Committee in a retirement village - vote to sell the village bus and reduce



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	regulation of aged care.		<p>the weekly levy they must pay, this action will undoubtedly affect other residents who no longer drive etc.</p> <p>Thus some of the services that attracted seniors to buy in to a village initially - can be reversed by the residents committee. What safeguards will be in place to ensure that some village residents are not disadvantaged due to decision made the these committees?</p> <p><i>Response 1:</i></p> <p>This information must be made 'easy to read' and freely available to prospective residents. Seniors often struggle with the implications when a village changes hands (ie under new management) and how this will effect services and costs.</p>
<p>Potential residents face complex and confusing financial arrangements and contracts.</p> <p>Differing state and territory retirement village legislation impose costs which deters investment.</p>	<p>State and territory governments should pursue nationally consistent retirement village legislation under the aegis of COAG.</p>	<p>Greater transparency in financial arrangements and residents' contracts.</p> <p>Reduce a significant impediment to new investment in the industry.</p>	
Workforce issues			
<i>Improving support for informal carers</i>			

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<p>Many carers are financially and socially disadvantaged and may have poor health, partly as a result of their caring activities.</p> <p>Carer support is currently administered in an ad hoc way across a number of programs and jurisdictions.</p>	<p>The Gateway Agency, when assessing the care needs of older people, should also assess the capacity of informal carers to provide ongoing support.</p> <p>Carer Support Centres be developed from the existing National Carelink and Respite Centres to provide a broad range of carer support services.</p>	<p>Encourage a strong and sustainable community of informal carers.</p> <p>Ensure carers access the services they, and those they care for, need and are entitled to receive.</p> <p>Make respite and other services more easily accessible and responsive to the needs of informal carers.</p>	<p><i>Response 1:</i></p> <p>Once again we reiterate that local knowledge is essential. Carers support groups providing education are an essential to carers but must be in their local area, be adequately resourced and have expertise in the local services with linkages.</p> <p><i>Response 2:</i></p> <p>Carers from CALD backgrounds often face additional barriers and challenges. They often have limited access to education, training and support programs for carers due to cultural and language issues. They often do not access services because the older people they care for do not understand the service system. It is important that the staff in the Gateway Agency and Carer Support Centre are aware of, and competent to recognise, support, and address their needs.</p>
<p><i>Improving employment conditions for the formal care workforce</i></p>			

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Inadequate funding and indexation mechanisms diminish aged care providers' ability to pay competitive wages.	Scheduled prices for aged care should take into account the need to pay competitive wages to nursing and other care staff delivering aged care services.	The payment of competitive remuneration for aged care workers should reduce the lack of parity and enhance the attractiveness of the aged care sector to employees.	<p><i>Response 1:</i> Absolutely essential that there are campaigns to attract workers to this industry. There continue to be negative stories that reinforce the negative stereotype of this care.</p> <p>Government must fund positive advertising and stories to attract a better paid, more motivated and experienced workforce.</p> <p><i>Response 2:</i> Workforce planning should take into account the increasing needs of older people from particular cultural backgrounds. Strategies should be developed to attract workers from these backgrounds to meet the increasing needs in their communities.</p> <p>It is also important to recognise the potential but underutilised workforce in CALD communities, and develop specific program to assist people from CALD backgrounds to enter the industry.</p>
A lack of vocational training packages for the aged care sector and poor quality of	Promote skill development through an expansion of	Develop and promote career paths for aged care workers and	<p><i>Response 1:</i> Implement national standards and core skills for community</p>



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training provided by some registered training organisations.	courses to provide aged care workers at all levels with the skills they need.	improve the quality of care that those workers are able to deliver.	care workers such as minimum Cert IV in Community Services. We receive a large number of complaints about the quality of services provided, and about unskilled community workers e.g. putting vulnerable clients at risk <i>Response 2:</i> This is essential.
A limited number of specialist 'teaching aged care facilities'.	Fund the expansion of 'teaching aged care services' to promote the sector among medical, nursing and allied health students.	Increase the willingness of health professionals to enter the aged care sector.	<i>Response 1:</i> A positive step to ensure that potential graduates have an understanding and on the job training within the aged care sector.
<i>Improving conditions for volunteers</i>			
Organisations face significant costs associated with organising, training and managing volunteers. Activities can impose substantial costs on volunteers.	Scheduled prices for aged care should take into account the costs associated with: volunteer administration and regulation; appropriate training and support for volunteers; and reimbursement of volunteers' out-of-pocket expenses.	Reduce barriers to individuals volunteering and improve organisations' ability to harness volunteers.	<i>Response 1:</i> Volunteers play a crucial role amongst the majority of currently HACC funded organisations. Volunteers ensure organisations viability and offer an effective low cost solution to delivering social support services. It is important that volunteers are recognised and supported in their role to ensure volunteer retention. It is also necessary to include funding for volunteer recruitment. <i>Response 2:</i> It is essential that

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			adequate resources be made available to services using volunteer and their capacity to reimburse their volunteers. Information must be available to the client as to what % of the cost of the service goes to the volunteer.
Regulatory institutions <i>New regulatory arrangements are needed</i> <p>Governance arrangements in aged care do not clearly separate policy, regulation and appeals, which create inherent conflicts of interest within DOHA.</p> <p>A number of regulatory functions are undertaken by multiple jurisdictions, agencies and departments. This duplication creates confusion for providers and adds to regulatory costs incurred by the industry.</p> <p>Complaint handling within DoHA creates conflicts of interest.</p> <p>A complex management and accountability structure exists within the Complaints</p>			
	<p>Establish a new regulatory agency — the Australian Aged Care Regulation Commission (AACRC) — with statutory offices and Commissioners for Aged Care Standards and Accreditation and for Complaints and Reviews.</p> <p>Also to have responsibility for recommending scheduled prices, subsidies and rate of indexation, and administering prudential regulation.</p> <p>The Australian Aged Care Regulation Commission (AACRC) should handle complaints by consumers and providers in the first instance.</p>	<p>Removes potential conflicts of interests, ensures greater independence of regulatory roles and, thus, establishes a more effective regulatory governance structure.</p> <p>Create an independent complaints handling process which is separate from the funding and policy department.</p> <p>Provide a separate</p>	



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Investigation Scheme and the Office of Aged Care Quality and Compliance.	<p>Appeals in respect of its decisions and those of the Australian Seniors Gateway Agency should be heard by the Administrative Appeals Tribunal (AAT).</p> <p>Abolish the Office of the Aged Care Commissioner and give consideration to the establishment of an Aged Care Division within the AAT.</p>	mechanism to determine appeals at arm's length to both the proposed independent regulator and the proposed Gateway Agency.	
<i>Publicising information about assessments of the quality care provided</i>			
No certainty that the results of quality assessments using the Community Care Common Standards be made publicly available.	COAG should agree to publish the results of quality assessments using the Community Care Common Standards, consistent with the current publication of quality of care assessment of residential aged care.	Assist providers and consumers in making informed decisions about the aged care services they supply or receive.	
<i>Encouraging and enforcing compliance</i>			
The range of enforcement options is limited, which in practice restricts their usefulness.	Provide a range of enforcement tools to the Australian Aged Care Regulation Commission to ensure that penalties are proportional to the severity of non-compliance.	Better targeting and more effective penalties and interventions allow the regulator to more effectively manage risks of non-compliance.	
<i>Putting streamlined reporting requirements into place</i>			

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Reporting requirements are overly burdensome and duplicative, consuming management and staff time which could be better directed towards providing care services.	Introduce a streamlined reporting mechanism for all service providers (across both community and residential aged care) based on the model used to develop Standard Business Reporting (SBR).	Reduce unnecessary costs to providers while delivering timely reporting information to the regulator.	<i>Response 1:</i> Certainly concur with this!
<i>Reducing the extent of some mandatory reporting requirements</i>			
Mandatory disclosure requirements to consumers impose unnecessary costs on providers.	Amend the residential aged care prudential standards to allow providers to disclose information (to care recipients or prospective care recipients) on request, rather than automatically.	Reduce the significant disclosure burden associated with servicing incumbent and prospective care recipients.	
Reporting requirements impose a significant compliance cost and regulatory burden, and take resources away from the priority of finding the missing resident.	Amend the mandatory reporting requirements for missing residents.	Reduce costs to providers and free up resources to find missing residents.	
<i>Clarifying and simplifying jurisdictional responsibilities and harmonising some regulations</i>			
Duplicate and inconsistent regulations impose unnecessary costs and impede achieving the objectives of those regulations.	COAG should identify and remove, as far as possible, onerous duplicate and inconsistent regulations.	Improve the efficiency and effectiveness of regulations.	



<i>Current problem</i>	<i>Proposed reform</i>	<i>Main benefits of change</i>	<i>NORTHERN SYDNEY COMMENTS</i>
Policy research and evaluation <i>Improving data collection and access</i> There is a significant lack of publicly available data and policy relevant evidence in the area of aged care.			
The Australian Aged Care Regulation Commission should perform the role of a national 'clearinghouse' for aged care data. Introduce measures to improve the usefulness, collection and public reporting of aged care data.		Provide a better evidence base for government policy and for decision making by providers, care recipients and their families. Improve transparency within the sector.	
Implementing the proposed package of reforms <i>The path to a new aged care system</i> The implementation of reforms will require significant changes for all stakeholders and could have unintended costs to government and industry if not introduced carefully.			<i>Response 1:</i> Must have plenty of prior notice of changes, impacts etc and training in regard to reforms and implications etc.
The Government should announce a timetable for reforms and how they are expected to affect the sector, and establish a high level implementation taskforce.		Provide a clear transition to new arrangements which allow the sector time to adjust and moderate disruption to consumers, providers and governments.	

Additional Comments:

1. It is a great report. The only comment is there is not much focus on family carers and how they can be supported.