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1. Tell us about you

1.1 What is your full name?

1.2 What stakeholder category do you most identify with?
Other- CHSP Meals & Social Support Providers Forum

1.3 Are you providing a submission as an individual or on behalf of an organisation?
Organisation

1.4 Do you identify with any special needs groups?
Nil

1.5 What is your organisation’s name?
Riverina Murray Food Services Forum

1.6 Which category does your organisation most identify with?
Aged Care Provider

1.7 Do we have your permission to publish parts of your response that are not personally identifiable?
Yes, publish all parts of my response except my name and email address

This discussion paper represents the views of the members of the Riverina Murray Food Services Forum. Feedback is provided on the key matter 9 only. **The effectiveness of arrangements for facilitating access to aged care services**, as the review template mainly addresses Home Care Packages (HCP) and residential aged care.

The Riverina Murray Food Services Forum is held four times a year to share information and ideas, discuss issues, reforms, and government policy. It is attended by Meals on Wheels services, Meal providers, Sector Support & Development Officers and occasionally representatives from the Department of Health and NSW Ageing, Disability and Homecare.
2. Response to Criteria in the Legislation

2.1 Whether unmet demand for residential and home care places has been reduced

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| 2.1 Whether unmet demand for residential and home care places has been reduced | Refers to Section 4(2)(a) in the Act  
In this context, unmet demand means:  
• a person who needs aged care services is unable to access the service they are eligible for  
e.g. a person with an Aged Care Assessment Team / Service (ACAT or ACAS) approval for residential care is unable to find an available place; or  
• a person who needs home care services is able to access care, but not the level of care they need  
e.g. the person is eligible for a level 4 package but can only access a level 2 package.  
Response provided: Nil |

2.2 Whether the number and mix of places for residential care and home care should continue to be controlled

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| 2.2 Whether the number and mix of places for residential care and home care should continue to be controlled | Refers to Section 4(2)(b) in the Act  
In this context:  
• the number and mix of packages and places refers to the number and location of residential aged care places and the number and level of home care packages allocated by Government; and  
• controlled means the process by which the government sets the number of residential care places or home care packages available.  
Response provided: Nil |

2.3 Whether further steps could be taken to change key aged care services from a supply driven model to a consumer demand driven model

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| 2.3 Whether further steps could be taken to change key aged care services from a supply driven model to a consumer demand driven model | Refers to Section 4(2)(c) in the Act  
In this context:  
• a supply driven model refers to the current system where the government controls the number, funding level and location of residential aged care places and the number and level of home care packages;  
• a consumer demand driven model refers to a model where once a consumer is assessed as needing care, they will receive appropriate funding, and can choose services from a provider of their choice and also choose how, where and what services will be delivered.  
Response provided: Nil |
2.4 The effectiveness of means testing arrangements for aged care services, including an assessment of the alignment of charges across residential care and home care services

Refers to Section 4(2)(d) in the Act

In this context:

- means testing arrangements means the assessment process where:
  - the capacity of a person to contribute to their care or accommodation is assessed (their assessable income and assets are determined); and
  - the contribution that they should make to their care or accommodation is decided (their means or income tested care fee, and any accommodation payment or contribution is determined).

Response provided:

*Nil*

2.5 The effectiveness of arrangements for regulating prices for aged care accommodation

Refers to Section 4(2)(e) in the Act

In this context:

- regulating prices for aged care accommodation means the legislation that controls how a residential aged care provider advertises their accommodation prices.

Response provided:

*Nil*

2.6 The effectiveness of arrangements for protecting equity of access to aged care services for different population groups

Refers to Section 4(2)(f) in the Act

In this context equity of access means that regardless of cultural or linguistic background, sexuality, life circumstance or location, consumers can access the care and support they need.

In this context different population groups could include:

- people from Aboriginal and/or Torres Strait Islander communities;
- people from culturally and linguistically diverse (CALD) backgrounds;
- people who live in rural or remote areas;
- people who are financially or socially disadvantaged;
- people who are veterans of the Australian Defence Force or an allied defence force including the spouse, widow or widower of a veteran;
- people who are homeless, or at risk of becoming homeless;
- people who are care leavers (which includes Forgotten Australians, Former Child Migrants and Stolen Generations);
- parents separated from their children by forced adoption or removal; and/or
- people from lesbian, gay, bisexual, trans/transgender and intersex (LGBTI) communities.

Response provided:

*Nil*
2.7 The effectiveness of workforce strategies in aged care services, including strategies for the education, recruitment, retention and funding of aged care workers

Refers to Section 4(2)(g) in the Act

In this context *aged care workers* could include:

- paid direct-care workers including nurses personal care or community care workers, and allied health professionals such as physiotherapists and occupational therapists; and
- paid non-direct care workers including: managers who work in administration or ancillary workers who provide catering, cleaning, laundry, maintenance and gardening.

Response provided:

*Nil*

2.8 The effectiveness of arrangements for protecting refundable deposits and accommodation bonds

Refers to Section 4(2)(h) in the Act

In this context:

- arrangements for protecting refundable deposits and accommodation bonds means the operation of the Aged Care Accommodation Bond Guarantee Scheme.

Response provided:

*Nil*

2.9 The effectiveness of arrangements for facilitating access to aged care services

Refers to Section 4(2)(i) in the Act

In this context *access to aged care services* means:

- how aged care information is accessed; and
- how consumers access aged care services through the aged care assessment process.

Response provided:

Some of the issues regarding access to Meals on Wheels discussed are listed below. Since the advent of My Aged Care (MAC) and the Regional Assessment Service (RAS), many Meals on Wheels services are reporting a substantial decline in referrals, slow response rates and a general lack of understanding of the referral process amongst the broader community, including health professionals, older people, carers and families. A number of Meals on Wheels services have reported many potential clients declining the service once they have been contacted by MAC or a RAS assessor, because they are put off by the requirement of a comprehensive assessment. In one case, an elderly frail gentleman from Young was told he would need to travel to Wagga, a distance of 140km, to be assessed for Meals, and another was told if they refused a home assessment, they would have to pay higher fees. Coordinators and service staff are facilitating access to Meals and other services via MAC, as well as educating the RAS assessors, general public, community members and health professionals, with limited resources and time, taking them away from their intended roles, whilst still maintaining and developing care/support plans, care coordination and providing information and referrals. From one provider; “Time after time we have had feedback from clients confused about who is ringing them and why they are being phoned. I think it’s appalling that it has become our “job” on top of all the other changes and reforms, to educate the public, in particular the most vulnerable of our citizens.” There have been numerous reports that referrals from MAC for Social Support services, often complimentary to Meals services, have been non-existent for some services. There is general confusion regarding the interaction between HCP & CHSP providers; Fees charged and to who, reporting and referral responsibilities, and misunderstanding around the Consumer Directed Care philosophy. It is the view of the members of this forum that community support programs such as Meals on Wheels, Community Transport,
Home Maintenance and Social Support services, can be accessed without the requirement of a home comprehensive assessment via MAC and the RAS. We believe that MAC and the RAS is a disincentive to people accessing ‘entry level’ aged care. We recommend that older people have direct access to these services.
3. Other comments

Response provided:

Research conducted recently by University of Wollongong confirms the importance good nutrition plays in keeping aged people out of hospital, having less falls and improved recovery rates. Meals on Wheels should be easily accessible to all who require it. It is the very essence of the Wellness and Re-ablement philosophy, providing wellness checks, social contact and nourishment, for very little cost, compared to a paid worker providing meal preparation in the home as part of their care plan. Volunteers report any client concerns to the service coordinator, who can then provide the appropriate information and referral... a softer approach that provides older people with early intervention, often preventing premature institutionalisation or long term care. Organisations that utilise volunteers generally have a focus on social inclusion and building stronger communities, and Meals on Wheels services have the resources, skills and knowledge regarding food safety for vulnerable people and nutritional guidelines.