



This document has been prepared to accompany the Exposure Draft and provides a guide to the proposed amendments to the *User Rights Principles 2014*.

Home Care Packages Programme Consultation Paper

Introduction

Support at home is key to helping older people remain at home and in their community for longer.

The Government is committed to support older Australians to remain in their homes by increasing funding for the Home Care Packages from \$1.5 billion in 2015-16 to \$1.7 billion in 2016-17.

A home care package provides a co-ordinated package of services tailored to meet the specific care needs of consumers seeking support in the home. As part of the aged care changes, it was announced back in 2012 that from 1 July 2015, all home care packages would operate on a Consumer Directed Care (CDC) basis.

CDC brings with it a new way for providers to look at their business and the way they deliver their aged care services. Consumer-directed care is both a philosophy and an orientation to service delivery where consumers can choose in partnership with the provider the services they get, to the extent that they are capable and wish to do so.

CDC is not one model of care but a spectrum of options for how the provider delivers their services and how consumers direct their care.

The introduction of CDC will give older people or their representative greater control over their health and wellbeing by allowing them to make choices regarding their needs and goals, the types of care and services they receive, the location of where those services are delivered and by whom.

Currently, only some providers are required to deliver home care on a CDC basis. For these providers, the requirements relating to CDC are outlined in conditions of allocation that apply to new places allocated after 1 August 2013.

This consultation paper describes the extension of CDC to all home care providers and consumers, and also how the requirements of CDC will be made more transparent and streamlined, through changes to the Aged Care Principles that are made under the *Aged Care Act 1997*. Embedding the key elements of CDC within the Aged Care Principles creates greater visibility and certainty with respect to the rights and responsibilities of consumers and providers.

The Department wishes to thank the National Aged Care Alliance's Home Care Packages Advisory Group for its expert advice and assistance in developing this consultation paper and informing the key changes required to the legislation in order to ensure that, moving forward, CDC is a key element of the delivery of all home care packages.



Making a submission

The Department invites submissions on this consultation paper and accompanying exposure draft of the legislation from all interested parties. The final approach will be informed by stakeholder feedback, and the advice of the National Aged Care Alliance's Home Care Packages Advisory Group.

All submissions should be submitted online at <https://engage.dss.gov.au> by **8 May 2015**.

What is CDC?

CDC gives consumers greater control over their own health and wellbeing by allowing them to make choices about the types of care and services they access and the delivery of those services, including who will deliver the services and when.

CDC gives consumers greater flexibility in determining what level of involvement they would like to have in managing their own home care package. This could range from involvement in all aspects of the package, including co-ordination of care and services, to a less active role in decision-making. Alternatively consumers may seek the assistance of another person to represent them in their care.

Under CDC, consumers and providers work in partnership to identify the consumer's goals and needs. This may include, for example, a focus on wellness and re-ablement. These goals form the basis of a care plan which is co-designed between the provider and the consumer, based on ongoing conversations. While the care and services able to be provided by the provider will be limited by available resources, there will be scope for providers to sub-contract or broker services from other providers in order to deliver the comprehensive package of care and services that may be agreed between the provider and the consumer.

CDC also provides consumers with clear information about what funding is available for their care and services and how those funds are spent through an individualised budget and monthly income and expenditure statement. These tools ensure that providers and consumers have a shared understanding of available resources and how those resources are being expended in order to meet the care recipient's needs.

Extending CDC to all consumers and providers

There are currently around 72,000 home care places. Of these, approximately 13,500 are formally required to be delivered on a CDC basis. Many other providers have recognised the benefits of delivering care on a CDC basis and are voluntarily choosing to work with consumers to provide CDC.

From July 2015, all home care packages (including those in operation prior to 1 July 2013) will be required to be delivered on a CDC basis.

How will CDC be embedded into legislation?

It is proposed that the Aged Care Principles be amended to reflect the central elements of CDC. This approach is in accordance with the Government's Deregulation Agenda and a commitment



by Government to set the minimum regulatory expectations for CDC while leaving providers, in partnership with consumers, to determine how to meet those expectations.

The legislation will not, however, include all of the information that was previously included as part of the conditions of allocation and related supporting documentation. That is, the Principles are proposed to include the mandatory elements of CDC only, not the descriptions about how a provider might implement these requirements.

The key elements of CDC that are proposed to be reflected in the legislation include:

- the rights of the consumer with respect to CDC – these rights are proposed to be reflected in Schedule 2 of the *User Rights Principles 2014* which is the *Charter of care recipients rights and responsibilities – home care*; and
- the specific responsibilities of the approved provider with respect to CDC. These are proposed to be included in Part 3, Division 3 of the *User Rights Principles 2014*.

The *User Rights Principles 2014* (the Principles) set out the responsibilities of approved providers in delivering residential or home care services. The Principles specify service provider responsibilities in relation to security of tenure, advocacy, the details that are to be included in various agreements between the consumer and the provider and the information the provider must give the consumer in particular situations. Division 2 of Part 3 of the Principles describes the responsibilities of approved providers of home care generally and Division 3 of Part 3 describes the responsibilities of approved providers of home care specifically with respect to the provision of information. Each of these parts of the Principles are proposed to be amended to describe the core responsibilities of providers with respect to CDC (as described below).

Schedule 2 of the Principles sets out the *Charter of care recipients rights and responsibilities – home care* (the Charter) which acknowledges the rights and responsibilities of consumers when receiving care. Although the Charter currently includes some concepts similar to CDC, it does not expressly reference CDC and therefore it is proposed that the Charter be amended to reflect the key elements of CDC. However, consumer responsibilities reflected in the Charter, will continue to exist (and these provide protections for providers also). For example, consumers will continue to have the following responsibilities:

- to abide by the terms of the home care agreement;
- to accept responsibility for their own actions and choices even though some actions and choices may involve an element of risk;
- to give enough information to assist the approved provider to develop, deliver and review a care plan;
- to provide reasonable notice if they do not require home care to be provided on a particular day; and
- to pay any fees specified in the agreement (or to negotiate an alternative arrangement with the provider if any changes occur in their financial circumstances).



*Please note that throughout this paper (and in the description of the legislative changes below) reference is made to consumers. However, in some cases the legislation will actually refer to care recipients rather than consumers. This is because of the need for consistency with definitions used in the enabling *Aged Care Act 1997*.

What are the proposed changes to the Charter to describe the rights and responsibilities of consumers with respect to CDC?

Key elements	Proposed amendments to the Charter
<p>Consumer choice and flexibility – although the Charter includes similar concepts it does not expressly reference the consumer’s rights in relation to CDC. The proposed changes describe the consumers rights with respect to choice and flexibility.</p>	<p>Consumer directed care – Choice and flexibility Each consumer has the following rights:</p> <p>a) to be supported by the approved provider:</p> <ul style="list-style-type: none"> • to set goals in relation to the outcomes he or she seeks from home care; and • to determine the level of ongoing involvement and control that he or she wishes to have in the provision of the home care; and • to make decisions relating to his or her own care; and • to maintain his or her independence as far as possible. <p>b) to choose the care and services that best meet his or her goals and assessed needs within the limits of the services and resources available;</p> <p>c) to have choice and flexibility in the way the care and services are provided at home;</p> <p>d) to participate in making decisions that affect him or her;</p> <p>e) to have his or her representative participate in decisions relating to his or her care if he or she does not have capacity.</p>
<p>Consumer directed care - care and services – Changes are proposed to the Charter to better reflect that care and service must be aimed at achieving the consumer’s goals and addressing the consumer’s assessed care needs. The delivery of services should be co-designed with the consumer and reflect the consumer’s preferences.</p>	<p>Consumer directed care - care and services Each consumer has the following rights:</p> <p>a) to receive reliable, coordinated, safe, quality care and services which are appropriate to meeting his or her goals and assessed needs;</p> <p>b) to be given before, or within 14 days after, he or she commences receiving home care, a written plan of the care and services that he or she expects to receive;</p> <p>c) to receive care and services that take account of his or her other care arrangements and cultural, linguistic and religious preferences;</p> <p>d) to ongoing review of the care and services he or she receives (both periodic and in response to changes in his or her personal circumstances), and modification of the care and services as required.</p>



Key elements	Proposed amendments to the Charter
<p>Consumer rights to an individualised budget and monthly statements – the Charter does not currently reflect the rights of a consumer to be given an individualised budget and monthly statements. The proposed changes to the Charter embed these rights in the legislation.</p>	<p>Consumer directed care – Individualised budget and monthly statements Each consumer has the following rights: a) to be given before, or within 14 days after, he or she commences receiving home care, an individualised budget for the care and services to be provided; b) to have his or her individualised budget reviewed, and if necessary revised, if the care and services to be provided, or the costs of providing the care and services, change; c) to receive a monthly statement of income and expenditure in respect of the care and services provided during the month.</p>

What are the proposed changes to the legislation to reflect the responsibilities of providers with respect to CDC?

Providers will be required to provide home care in a way that is consistent with the rights of the consumer, as described in the Charter and detailed above.

It is also proposed that three additional requirements be included in the legislation to give greater transparency and clarity about what funding is available under each home care package and how those funds are spent. The new requirements relate to individualised budgets; monthly income and expenditure statements; and changes to home care agreements.

Individualised budget

It is proposed that a new section be included in the Principles to require that a provider must give a consumer an individualised budget. The individualised budget must be prepared taking into consideration the consumer’s goals and assessed need and the services and resources available and selected by the consumer.

The individualised budget must:

- have an itemised budget for the consumer’s home care services; and
- include information about the total funds for the home care services.

The purpose of the individualised budget is to identify the associated costs for each of the services that a consumer may expect to receive under their package. Some of the services may be recurring (i.e. daily assistance with showering and weekly assistance for domestic services) whilst other services may be one off. The budget is intended to be linked to the care plan.

It is not proposed that the Principles would stipulate a set period for the budget. Rather, it would be up to the provider and the consumer to determine an appropriate period based on, for example, the type of care to be provided and the consumer’s goals. Providers will be required to



review, and if necessary revise, individualised budgets if there are changes to the care or the costs of the care and services.

For example, a consumer and provider may agree that an intensive focus on re-ablement will be the goal for the first six months in which case they may wish to set a budget for six months only. Following a review of the consumer's care needs and goals, the consumer and provider could agree that care and services should now focus on a maintenance regime over the next 12 months. A new budget would be developed to reflect the change in goals and care needs for the 12 month period.

Monthly income and expenditure statements

It is proposed that a new section be included in the Principles requiring that, from 1 July 2015, providers must give consumers monthly statements of income and expenditure. The monthly statement must include:

- the total funds received (or receivable) by the provider during the calendar month for the provision of home care to the consumer. The total funds include subsidy and supplements received from Government and also fees paid by the consumer;
- the total itemised funds expended by the provider in the delivery of the home care services to the consumer during the calendar month; and
- any unexpended funds that have been carried over from prior periods.

It is expected that the consumer and provider would work together to co-design the format of the budget and monthly statement to ensure that it is meaningful and useful for the consumer. If the consumer and the provider agree to the provision of more regular statements, they may do so provided that there is at least a monthly statement that meets the minimum requirements described in the Principles.

Home care agreements

The Principles currently require that the home care agreement include a statement about whether the home care will be delivered on a CDC basis. As CDC will be a requirement of all home care from 1 July 2015, the requirement for this statement to be included in the home care agreement will be removed.

It is also proposed that the Principles be amended to require that, from 1 July 2015, all home care agreements must include statements specifying that the consumer will be provided an individualised budget and that the consumer will be provided with a monthly income and expenditure statement.

What does this mean for providers and consumers from 1 July 2015?

From 1 July 2015, it is proposed that existing conditions of allocation relating to CDC (that have been made specific to each individual provider who has received home care places from 1 August 2013) will no longer apply.



The conditions of allocation will be replaced by the new requirements proposed to be described in the Principles (as explained above).

From 1 July 2015, all home care providers will be expected to deliver CDC in accordance with the Principles.

For those providers who already deliver home care packages on a CDC basis, they will not be required to amend existing home care agreements. However, budgets and monthly income and expenditure statements provided to consumers from 1 July 2015 will be expected to comply with the proposed requirements in the Principles. From a consumer's perspective, it will not matter whether the consumer commenced receiving home care before or after 1 July 2015 – all consumers will have the rights and responsibilities relating to home care and CDC that will be reflected in the Charter.

Next steps

Following the consultation period, the Department will consider comments from all stakeholders and will work with the National Aged Care Alliance's Home Care Packages Advisory Group to finalise the proposed changes to the legislation.

It is intended that the changes to the legislation will be made to take effect from July 2015. This provides home care providers and consumers with notice of the changes.

To assist consumers and home care providers to transition to CDC, the Department is funding a range of capacity building projects that deal with issues such as business realignment, change management, consumer checklists, sensitivity and diversity resources, cultural change, reform readiness, professional development and training for the workforce. More information is available on the [Home Care Today website](#).

Additional information

For more information about the Home Care Packages Programme, please refer to the [My Aged Care website](#).