

16th June 2016

Department of Social Services
Via: Submission Portal

Re. Designing the new integrated carer support service

Dear Department of Social Services,

Thank you for the opportunity to provide feedback on the *Designing the new integrated carer support service – discussion paper*.

Leading Age Services Australia (LASA), the voice of aged care, is the peak body for service providers of retirement living, home care, and residential aged care. LASA is committed to improved standards, equality and efficiency throughout the industry and in so doing, helping older Australians live well. We advocate for the health, community and accommodation needs of older Australians, working with government and other stakeholders to advance the interests of all age service providers, and through them, the interests of older Australians.

Awareness

To assist carers to identify potential supports early in their caring journey consideration should be given to whether there are common elements to what carers are accessing and/or using, especially in relation to the person or people they are caring for. Whilst there may only be a perception of limited benefit in receiving brochures at a specific point in time, people may come back to that information when they are ready to consider it. Opportunities to identify carers may also exist by providing information on the same platform as the care recipient and through condition specific information that carers may access to inform them of the condition or illness of the person that they are caring for. If the person that is being cared for is receiving Commonwealth subsidised services (e.g. an aged care Home Care Package or services via the National Disability Insurance Scheme) then the person they care for should also be receiving some form of correspondence from the Department of Human Services. This may provide an opportunity to increase awareness of carer supports that may be available.

Information Provision

LASA is of opinion that the information provided, whether this be through the Carer Gateway or another medium, must be consistent with and complementary of information provided to the person in need of personal care, support and/or assistance. For example, for aged care, the information provided by the Carer Gateway must be in line with the information provided by My Aged Care and vice versa. LASA agrees that the uptake of the information may be improved if the recipient considers it of relevance and benefit to them. Given the limited information provided in the discussion paper it is difficult to comment on a specific proposal but consideration must be given to what people identify with and whether there is an opportunity to produce tailored recommendations based on categories rather than individually assessing each person. Consideration should also be given to what information people are generally looking for and how to make information easily accessible, this would include how to identify the different means by which people digest information. For example, some people may want to read pages of text but others may prefer to view infographics or illustrations.

Intake

LASA suggests that it is not only important to identify what the importance for the individual may be to undertake an intake process but also to consider what information may already be available via other data collection processes, for example through the Department of Human Services. It is important that the request for information be kept to a minimum and not be repeated if at all avoidable. One way in which this could be minimised is to ensure that existing and future government systems are compatible with one another.

Registration of an emergency plan may be of benefit but if this is offered as a hook to engage carers in an intake process than the full implementation of this proposal must be considered. For example, how would the emergency plan be available, who would have access, how would people know that an individual has an emergency plan etc. To assist in developing this suggestion, it may be worth utilising the learnings and challenges identified via the advance care planning experience.

Introduction of a mandatory intake process should be very well considered prior to any proposal to introduce it, including the potential to introduce unnecessary barriers and potential disincentives to people in accessing needed services.

Education

Education development would benefit from identifying contemporary delivery options to try and improve the uptake. This may result in the development of: brief, highly specific, easily accessible and free education in a variety of mediums including webinars, written documents, infographics, interactive Applications, Augmented Reality clips etc. In conjunction with the development of relevant education material, consideration should also be given to the promotion/ awareness raising of the available materials and the various strategies that may be needed to do so.

Peer Support

Peer support services may require specific conditions or structure to be more effective, for example if the service is for a specific cohort of people or if the group has been convened for a defined period of time. However, services should also be openly available to try and encourage attendance and participation. Peer support services should be available in a diverse range of delivery structures to try and assist in engaging people that may be reluctant to do so or time poor, this may include through Apps, Facebook, online meeting options etc.

Need Identify and Planning

Consideration should be given to the benefit for an individual carer in introducing goal based planning, especially if there is no services or funding attached to the exercise. Consideration should also be given to how goal based planning would be undertaken and the required resources to achieve a meaningful outcome.

Multi-component Support

LASA suggest that the learnings from international and national examples of Consumer Directed Care (CDC) be reviewed to assist in the development of a trial of CDC for carers in Australia. This may also assist in identifying whether this type of support would be appropriate for this cohort, especially given the small amount of funds available and the potential administration required. Furthermore, available examples of CDC may also illustrate appropriate selection criteria, objectives of the

programme/s, as well as reporting requirements that an individual receiving CDC may be required to undertake. As highlighted by the recent Brotherhood of St Laurence's report on the introduction of CDC into aged care home care packages, there are likely to be benefits with CDC for capable adults but they must be provided with the means to make informed decisions and must include practical support (e.g. administrative and financial support). The report also demonstrates the importance of different types of literacy and life skills in being able to manage a home care package via CDC with competency and confidence.ⁱ

The potential for unintended consequences and/or the introduction of barriers if mandatory carer mentoring is introduced needs to be considered. If this type of service is offered, attention will also need to be given to the amount of time that is required, the ability for someone to commit that time and the perceived benefit to undertaking mentoring.

LASA recommends that the potential benefits and impacts of making changes to respite support be thoroughly reviewed prior to any significant changes being made to services that may limit the accessibility of respite for carers.

Counselling

LASA suggests that it may be beneficial to consult with carer services delivering counselling as well as other sectors (e.g. mental health) to identify the learnings that may be available through their experience of delivering counselling services to large numbers and/or through diverse medium.

LASA again would like to thank the Department of Social Services for the opportunity to comment on the *Designing the new integrated carer support services – discussion paper*. Should you have any questions regarding the LASA submission, please do not hesitate to contact Rebecca Storen on 02 6230 1676.

Regards,



Sean Rooney
Chief Executive Officer
Leading Age Services Australia

ⁱ Simons B, Kimberley H & McColl Jones N 2016, *Adjusting to Consumer Directed Care: the experience of Brotherhood of St Laurence community aged care service users*, Brotherhood of St Laurence, Fitzroy, Vic.