

Anglicare Sydney Feedback on the ICSS: Regional Delivery Partners

May 2018



1. Overview of Anglicare Sydney

1.1 Anglicare Diocese of Sydney (Anglicare Sydney) is a not-for-profit organisation of the Anglican Church and one of the largest Christian community service organisations in Australia. Anglicare formed on 1 July 2016 by the merger of Anglicare Sydney and Anglican Retirement Villages. Anglicare exists to serve people in need in our community, enrich lives, and share the love of Jesus. We respect and value every person as made in the image of the living God. We seek to serve those who are ageing, vulnerable or marginalised by meeting their material, physical, emotional, social and spiritual needs. In partnership with parishes and others, we provide a range of services that promote dignity, safety, participation and wellbeing for people in their relationships, homes and communities.

1.2 We operate a wide range of community and aged care programs across the Sydney Metropolitan, the Blue Mountains, Illawarra and Shoalhaven regions of New South Wales with an annual revenue of \$343m and assets of \$1,734m. Our 3,900 staff and more than 3,000 volunteers operate across a diverse range of community services including: foster care and adoption services; early intervention family support; counselling and family support services; Family Relationship Centres; residential and community aged care services; retirement village living; services for migrants and refugees; carer support services; dementia respite services; mental health support; youth services; emergency relief for people in crisis; social and affordable housing; opportunity shops providing low-cost clothing; emergency management in times of natural disaster; and chaplains in hospitals, prisons, mental health facilities and juvenile justice institutions.

1.3 Anglicare has extensive experience in designing and delivering Carer services:

- Two Commonwealth Respite and Carelink Centres (CRCCs): SW Sydney/Nepean
- Flexible respite programs, Overnight cottage based respite
- 20 Centre-based respite
- Dementia Advisory and Carer Support Services: Nepean/Western Sydney
- 1,359- Home Care Packages; CHSP to 4,000 clients

2. General Reflections

2.1 Anglicare Sydney is very supportive of the proposed supports being offered to carers. Each year carers provide billions of dollars' worth of unpaid care and, for many, this has been a lifelong commitment spanning seven days a week, with few breaks and intermittent support. Many find themselves disconnected and isolated from both the wider community and within their own social and family networks.

2.2 Supports for carers are critical if they are to sustain their unpaid caring role into the future. Funding for social supports and emergency planning are essential to ensure sustainability of the caring role.

3. Feedback re the Proposed RDP tender

3.1 **Regional areas** – Anglicare Sydney notes the rationale in the discussion paper for Option B with the 11 regions in relation to economies of scale and the need for collaboration. However, from a provider perspective we consider that Option A – with slightly smaller regions to manage would lead to more effective service delivery in the local community context since we believe that:

- A smaller region would lead to greater consistency in service delivery
- The diverse needs of rural and regional communities are complex and could be more difficult to address within larger regions
- The smaller regions still provide economies of scale
- Smaller regions enable more opportunity to become embedded in the local communities
- For the provider, a smaller region reduces the risk profile improving compliance - it also means less time spent on addressing operational & administrative issues but more time on direct contact/service provision to carers.
- Although what is required is 'end-to-end business arrangements', the centrality of the program is the service user and Anglicare considers that their needs would be better met by smaller regions.

4. Supplemental questions

Anglicare has a number of questions in seeking clarification of the proposed new model:

1. For intake and assessment across the broader region does the central hub need to be located in that region or can it operate as a digital platform in a centralised hub in any geographic location?
2. Will there be special allowances provided for regional and remote areas given all RDP's will have these as part of their regions or is there an expectation that service provision in the urban areas will provide a means to cross subsidise this model in regions where transport and access will be an issue?
3. Working in the community and gaining community engagement and support will be a critical factor in the success of the new model. Will the funding model take into account the time taken to build these local relationships and engagement?

4. How is it envisaged that the mixture of block funding and individualised packaging will operate?
5. How will the RDP model integrate and support the delivery of other programs in both the aged care and disability sectors?
6. How will adequate emergency respite be delivered in rural and remote areas? There will be a need to rely on long established relationships with councils, hospitals, aged care facilities, primary health networks, other stakeholders, individuals and the community.
7. How will information sharing between providers be expedited to ensure carer needs are being met while at the same time ensuring confidentiality? Currently CRCC's cannot access client information from either MAC or the NDIS portal in order to support carer needs – particularly in times of an emergency.
8. What will be the nature of the linkages between MAC, the Carer gateway and the NDIS portal?
9. Will the Carer Gateway be upgraded as part of this process to ensure that adequate and updated information and carer supports will be provided? Currently whole information is provided and it does not link to carer supports.
10. Will current CHSP funding be moved across to the RDP's in order to ensure respite provision?
11. How will carer services be integrated across the spectrum of home care support services?
12. How will outcomes be measured? Will DEX be the platform for such measurement?
13. How will the Department determine a provider's ability to deliver in the proposed service areas?

5. Concluding Comments

Anglicare Sydney appreciates the opportunity to provide comment and feedback into this consultation process as we are strongly committed to the ongoing support of the valuable work of carers.

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