



Ian Yates AM, Chief Executive, COTA Australia

Pat Sparrow, Director Aged Care Reform, COTA Australia (*)

THE ROAD TO REFORM

12th IFA Global Conference - Health, Security & Community

Hyderabad, India, 10-13 June 2014



- COTA Australia is the peak older persons organisation in Australia. Started as Council on the Ageing over 60 years ago.
- COTAs in each State/Territory with over 1,000 member organisations of seniors reaching over 500,000 people, plus 40,000 direct members.
- COTA covers a broad range of public policy – pensions, superannuation, health care, housing, consumer rights, discrimination, transport, financial services and many more, incl. aged care.



- In aged care COTA speaks for the consumer – the resident or home care client – and their nominated carer or family.
- This has been a major shift in the last decade, and five years in particular - consumer advocates speaking for consumer rights and interests.
 - Some providers and their peaks have found this very challenging and have kicked back against us.



- Over five years ago COTA began a journey that went on to involve many others.
- We had been participating for over a decade in efforts to radically reform aged care.
- We knew that the cacophony of voices from different interests in the sector had politically torpedoed previous efforts. “There are no votes in aged care reform” so why do it if there’s no consensus?
 - A united position was essential.



- The **National Aged Care Alliance (NACA)** Alliance brings together all the major peak consumer, provider, union and professional groups in aged care to inform, debate and seek common positions. Been going over 13 years. In 2009 had 28 member organisations.
- We argued in NACA for a **new shared vision** for aged care - embracing consumer, provider, union and professional interests.



- The NACA document “Leading the Way: Our Vision for Support and Care of Older Australians” was developed, debated in depth, agreed by all 28, and released in September 2009.

- The ‘NACA Vision’ is that:

“Every older Australian is able to live with dignity and independence in a place of their choosing, with a choice of appropriate and affordable support and care services, as and when they need them.”



NACA VISION – www.naca.asn.au

national
AGED CARE ALLIANCE

National Aged Care Alliance

Leading the Way

Our Vision for Support and Care of Older Australians

September 2009

- The NACA Vision argued for the funding for care and support services to be **linked to each recipient**, so that the recipient and their family can determine how and where they receive their care and support, including the option to control how their funding entitlement is used.
 - Funding to be provided to **individuals as an entitlement based on assessed needs**, rather than being subject to rationing by quotas.



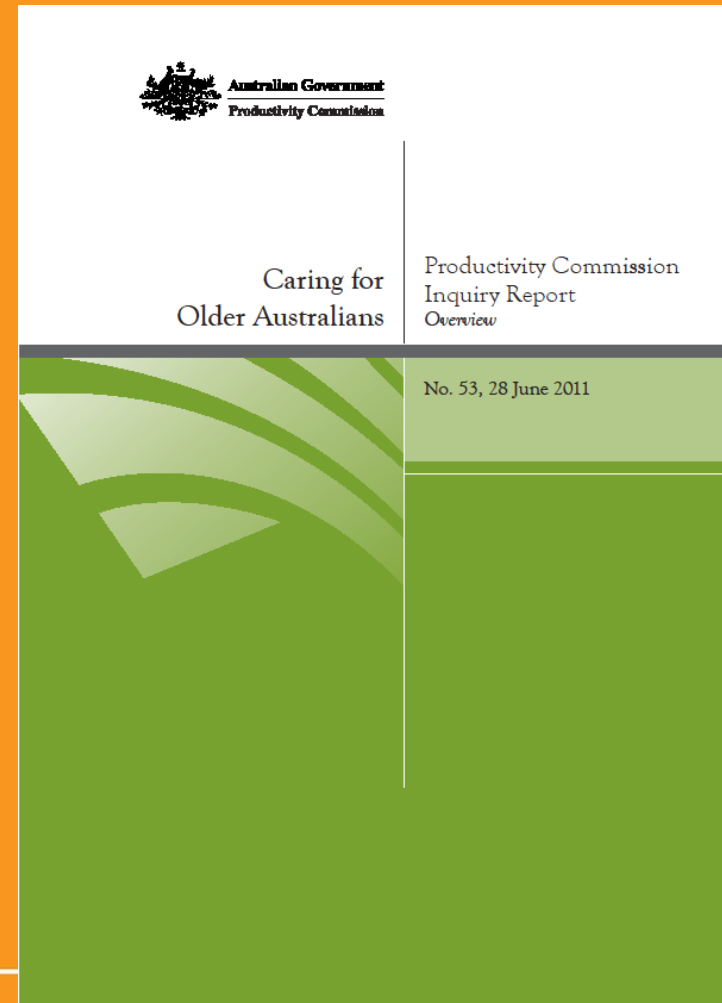
- The Vision contains a comprehensive and integrated set of proposals, many of which found their way into the PC Report and later into the government response
- We used the Vision to press the case for reform with the then Labor government which we convinced to hold a Productivity Commission (PC) Inquiry into reform of aged care, based on the Vision.



- The PC reported in June 2011 and presented an integrated package of recommendations for a system based on:
 - consumer entitlement and an end to rationing
 - **consumer fund holding**
 - greater consumer co-payments from those who can afford to pay
 - **greater transparency and choice**
 - new financial tools to access home equity
 - **a new way to access care and support**



Productivity Commission Report www.pc.gov.au



- NACA ran a concerted campaign for implementation of the PC proposals by government.
- We developed the 'Australians deserve to agewell' campaign with major media coverage and strong levels of consumer involvement both through the web, and face to face in Canberra



Ian Yates – THE ROAD TO REFORM – 12th IFA Conference, Hyderabad, June 2014



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- Minister used COTA to conduct “Conversations on Ageing” for consumers – 32 around Australia.
- “Conversations” engaged many thousands of older Australians - overwhelmingly reinforced the messages that they want :
 - much more support and care at home
 - more transparency, choice and control
 - and end to rationing of service places
 - better quality in aged care



- Minister also engaged NACA through range of subject working groups and Ageing Expert Reference Group.
- We developed the “NACA Blueprint”, a summarised form of the PC recommendations, endorsed by **all the NACA membership** - very powerful.



Ian Yates – AGEING IN PLACE – 12th IFA Conference, Hyderabad, June 2014

Members of the Alliance



- The political process was not easy as there were many competing initiatives in the mid-term Federal government Budget.
- Significant pressure was applied “behind the scenes” through using political credits accumulated over many years by COTA, as well as the public joint campaign.
- Building support across the political spectrum was a critical and essential part of the process.



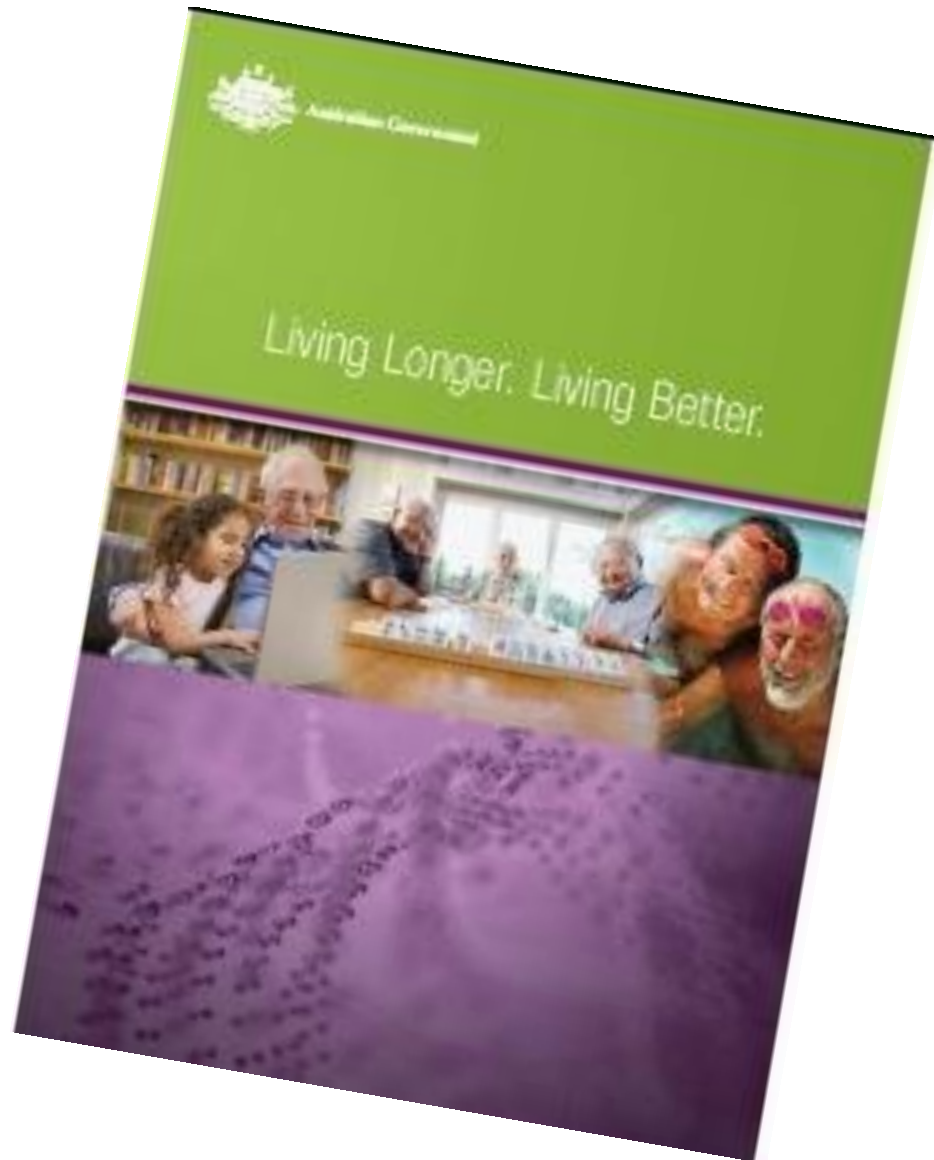
Presenting the NACA Blueprint at Parliamentary Breakfast



- We did not get the full NACA Vision, or all aspects of the later NACA Blueprint, out of government.
- However we did get major reform in an inhospitable political and financial environment. We would not have got it without consumer leadership, a sector-endorsed blueprint, and a good Minister.
- The “Living Longer Living Better” package was announced in April 2012



LLLB reform package - www.livinglongerlivingbetter.gov.au



LLLB contains a number of measures designed to create a more consumer friendly aged care system. These include:

- An Aged Care “Gateway” with website and National Call Centre” to streamline access to support and care
 - Nationally consistent, strength-based, timely assessment based in consumer direction
 - More than doubling of in-home support and care from 60,000 home care packages to 140,000
 - All home care packages based on “consumer directed care” by 1 July 2015 (all new ones from 1 July 2013)
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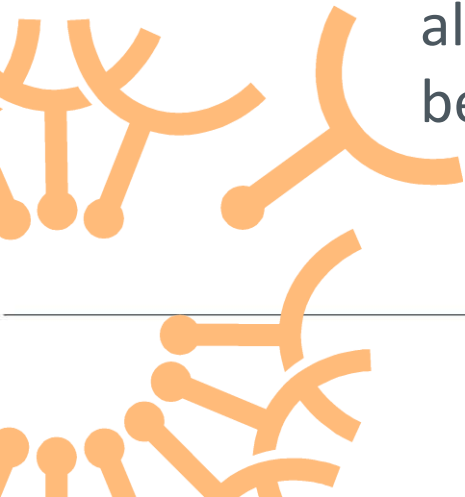


In addition ...

- Increased levels of funding for residential care and changes to pricing of accommodation
- Choice of payment method for residential accommodation
- Nationally consistent and (reasonably) equitable fees and charges, with safeguards and safety nets



- Regret to say between the announcement of LLLB and putting legislation to Parliament aged care provider representatives abandoned the consensus that got us that far.
- Tried to use minority government balancing act to force government to go further with the reforms, through playing politics with Opposition and media.
- Politically very naive and almost resulted in no reform at all – not because Opposition wouldn't pass it but because government almost dropped reform.



- COTA was forced to organise major media and political counter-offensive, using its connections to many leading providers to counter-act provider peak bodies
- Ultimately successful through working with all three main political parties. Legislation was passed at the last possible minute before a change of government.
- Regrettable fracturing of consensus could have caused much damage; and providers did themselves long term harm.



Of all the LLLB changes the mainstreaming of **Consumer Directed Care (CDC) Home Care packages** is the most significant.

- Its not perfect but its a dramatic shift
- **Not a new set of rules or a different template**
- Its a profound cultural shift – a new paradigm for aged support and care



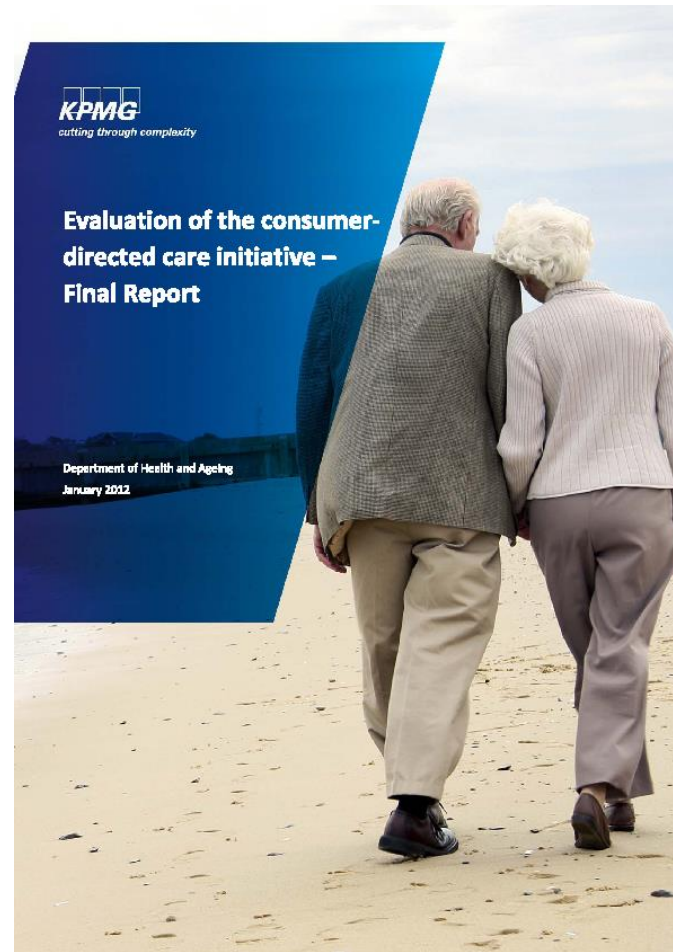
- To be clear we didn't actually ask for CDC !
- As I have said, we wanted what we called “entitlement” that had two parts:
 1. no more rationing – once assessed you get access
 2. the consumer gets the control of the resources (the home care package, the bed licence)



- We asked for it; the PC recommended it; NACA supported it;
- However the government thought providers and sector weren't ready for it
- So they went for something that they had already been trialling - CDC



CDC had just been trialled in home care – not that well



CDC based on six principles

- 1. Consumer choice and control**
- 2. Rights**
- 3. Respectful and balanced partnerships**
- 4. Participation**
- 5. Wellness and re-ablement**
- 6. Transparency**



- Our aged care system developed as a provider - anchored system - increasingly regulated.
- Providers get the beds, the packages, the dollars.
- Providers and government set the menu and the quality control measures.
- The consumer fits in as best they can in a supply constrained system.



- CDC does not turn that on its head, compared to an entitlement based system
- **But it takes a big step forward**
- Consumers get service and financial information, right to choice, greater control (within boundaries), the freedom to negotiate with legal backing ...



- CDC is about the fact that most people have managed their lives all their life and want to go on doing so, despite challenges they face
- And ... that actually most people can continue do that if the system allows and enables them.



What DO consumers want ???

- To have as much control as possible
- To make a contribution
- To exercise freedom and choice and experience dignity



CDC – where have we come from, where are we now, where are we going?

- Providers will need to find ways to talk with consumers separate from within the service relationship.
- Consumers need their own space; their own ground; their own language; their own hopes ...
 - THEN there can be the possibility of real dialogue - *“people who never complained start asking for things they and we never thought of before.”*



COTA has a project on “Controlling my own life – making the most of CDC” aimed at consumers. Its objectives are:

- Enable and support older people to maintain control of their own life by making the most of CDC;
- Develop and deliver information and support for older people, including self and peer strategies, materials and a train the trainer module;



- CDC is a first and significant step toward a vastly different aged care system.
- In which much of the genuine “red tape” regulatory regime of today would be swept away, while maintaining consumer protections.
- And so there are new opportunities for both consumers and providers.



- But CDC does contain its own contradiction – the package (later the bed licence) still goes to the provider, who is accountable for it to government.
- This will limit the degree to which consumers can exercise full rights and control over their support and care.
- We need to move beyond this to full fund holding by consumers as soon as possible.



- We have a new government that is promising much change and some providers thought it might turn back this clock or slow it down.
 - However we have worked closely with them in Opposition during the PC and LLLB reforms. Their policy is to “implement, monitor and build upon” the LLLB reforms.
 - They have a commitment to a new “statement of principles” with the sector intended to move us closer to the PC proposals.
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- The government has also moved Aged Care from the Health department where it has been for 30+ years, to a new Social Services department that includes income security and other transfers.
- This is consistent with a policy direction of entitlement and directing government support to the consumer.



- The new Minister responsible for aged care confirmed early that the current reforms will proceed and then move on.
- The Minister has described CDC as something that will inevitably gather substantial momentum of its own
- We are on a new road and it will inexorably escalate .







QUESTIONS AND DISCUSSION

