

Productivity Commission Submission in response to the Inquiry into Aged Care Employment

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Home aged care workforce and self-management

My submission relates to independent contractors employed by people living at home who self-manage their aged home care package. I have extensive expertise in the area of self-management in aged care and disability. My academic profile and publications can be seen at The University of Melbourne website¹. My evaluation of COTA Australia's trial of self-managed supports is particularly relevant to this Inquiry – see COTA Australia's Evaluation Report². Two peer reviewed journal articles have been published based on the findings of this trial^{3,4}. The 2021 article detailing the outcomes of the trial titled 'Self-Managed Aged Home Care in Australia –Insights from Older People, Family Carers and Service Providers' is Open Access and freely available.

Overview

I share concerns that home aged care workers are being exploited and the shortage of workers is leaving older people vulnerable and unsupported. My response to addressing these problems is that we need standards to protect older people, adequate pay rates for workers corresponding to the duties undertaken, and a service design that promotes innovation, flexibility, and community connections. The home aged care field is expansive and diverse. Some older people and some workers prefer to engage with aged care providers that directly employ support workers. However, this model does not suit older people who want to self-manage their aged care package and directly employ their own workers. Some workers also prefer the flexibility of structuring their own work schedule and building their client base. In the self-management trial, 100 older people or their representative managed their home aged care package. Participants were aged from 53 to 100 years, with a median age of 82 years. Approximately two thirds of participants had a family carer act with or on their behalf, and the carers were aged from 38 to 97 years. The funds were held by an approved service provider who had oversight responsibilities. While self-managing and directly employing support workers is not for everyone, it is welcomed by those who want control over their support services to create opportunities that meet their individual needs. Findings from the COTA Australia self-manage trial and other studies will be discussed under the headings noted by the Inquiry.

¹ Laragy academic profile <https://findanexpert.unimelb.edu.au/profile/11105-carmel-laragy>

² Millicer, Anna, Carmel Laragy, and Judy Gregurke. *Increasing Consumer Self-Management in Home Care: Evaluation Report*. COTA Australia (Melbourne: 30.9.2019 2019). <https://www.cota.org.au/wp-content/uploads/2021/08/Self-Management-in-Home-Care-Final-Project-Evaluation-Report.pdf>

³ Laragy, Carmel, and Sophie D Vasiliadis. "Consumer Expectations of Self-Managing Aged Home Care Packages in Australia." *Health and Social Care in the Community* 28, no. 6 (2020): 2362-73. <https://doi.org/10.1111/hsc.13057>. <https://onlinelibrary.wiley.com/doi/abs/10.1111/hsc.13057>.

⁴ Laragy, Carmel, and Sophie D Vasiliadis. "Self-Managed Aged Home Care in Australia –Insights from Older People, Family Carers and Service Providers." *Health & Social Care in the Community* Early Access (2021). <https://doi.org/10.1111/hsc.13695>.

Quality of care

The findings from the COTA Australia's self-management trial clearly show that older people who self-managed or had a family member manage their aged care package on their behalf, had a higher quality of care compared to previous experiences with aged care service providers. Most participants chose to self-manage after becoming frustrated with previous services. Previously, new workers arrived who did not understand their needs or know their preferences, and they were often unreliable. By self-managing and choosing their support workers they had better quality of care and longer continuity of care. Some family members reported that their mother or father remained living at home because of the personal and ongoing care provided by carefully selected support workers.

Vulnerable older adults can be exploited by workers, but that has never arisen in any of my studies. With my background as a social worker in probation and parole and child protection, I am very aware of abuse and exploitation. My experience suggests that maximising community connections and having careful oversight is a better way of minimising risks than having tight restrictions that stifle innovation and community interactions.

Consumer choice

A consistent theme throughout my studies is that many older people want to retain control over their lives. Aged care covers a wide range of ages and abilities. A competent 69 year old needing some domestic assistance does not need the same controls as a person with cognitive impairment. Many older people greatly resented being infantilised and told someone else must manage their support services when they were competent to do so. They wanted the 'dignity of risk' where they decided what risks they would take, and they greatly resented service providers and others restricting their choices. The challenge of service design is to maximise choice, safeguard older people who need protection, and ensure decent conditions for workers. To be an informed consumer, older people need clear information about aged care services. It is a near impossible task sifting through advertising from a myriad array of providers online. Having peer support groups and telephone access to a helpline would be an assistance. People who self-manage often hear through informal networks and word of mouth which service providers will support them to self-manage. They are often discouraged from self-managing by hospital social workers and service providers who argue that self-management is not a viable option for any older person. Despite this opposition, some found a service provider that supported self-management and engaged successfully.

Job creation and availability of workforce

The shortage of aged care workers is well documented. The pool of prospective workers is widened if older people can recruit workers from the community to meet their needs. There are many examples where older people recruited locally and employed workers who would never have registered with an aged care provider. They recruited support workers to take them shopping, to go to church services, or to social events within their culture. In the COTA Australia trial, an elderly man lived alone and was likely to be moved to a nursing home. His daughter employed one of his neighbours to call in and cook him an egg for lunch each day. His quality of life greatly improved, and he stayed living at home. Overseeing these

situations is the aged care provider that holds and administers the aged care package. The service provider is responsible for ensuring that all workers have a police check and any necessary qualifications appropriate to the situation. The neighbour who cooked an egg for the elderly man did not need an aged care certificate or nursing qualification.

Employment conditions for the workforce

Rates of pay for aged care workers are unacceptably low and need to be increased. All workers want and deserve decent pay and conditions. However, the suggestion that all support workers need to be employed by an approved aged care provider may benefit the providers more than the workers. I have interviewed many service users in aged and disability who had long standing arrangements with their support workers. People who self-manage sometimes pay higher than the basic rates to retain their workers or engage them at specific times, for example to attend a grandchild's wedding. While hearing of many positive relationships between service users and support workers, at times some can be fraught. I have seen one party make unreasonable demands on the other. There is no simple way of alleviating all these problems. While workers who are employed as contractors do not have support from an employing organisation, as independent contractors they can leave and find other clients.

Worker preferences

More studies are needed into worker preferences. While I have limited data on workers' preferences, I have interviewed workers who prefer to work as independent contractors. They liked selecting their clients and negotiating working hours that suited their individual circumstances. Many wanted part time work. In other areas of employment, independent contractors negotiate and manage their working conditions. Given that some aged care support workers want to continue as independent contractors, strategies need to be developed to support and protect them rather than force them to work for an aged care provider. Strategies could include courses on business management and self-care strategies, and an information helpline.

Flexible and innovative models of care

The diversity within the community in terms of personal preferences, culture, ethnicity, sexuality, location, etc., cannot be addressed by prescribed models of service provision. Self-managing home aged care packages provides opportunities for older people to purchase services to meet their individual needs. Examples have included paying for an Uber on a debit card to attend a medical appointment or a social gathering, buying incontinence pads from a supermarket at greatly reduced prices compared to buying through aged care services. In the COTA Australia self-management trial, the seven service providers each had slightly different administrative systems. Regardless of these differences, participants appreciated being able to use their aged care package in flexible and economical ways.

Accountability of aged care providers for care delivered on their behalf

In the COTA Australia trial, the service providers monitored payments and ensured that spending was within approved guidelines and according to the person's plan. Service providers have a critical role in providing oversight and ensuring the wellbeing of older people. They process all invoices and can ensure that workers are paid award rates. Responsible service providers are vigilant and detect if spending patterns change. A change in spending not in keeping with the service plan can indicate an issue that needs to be investigated. Better use of technology could possibly be used to monitor plans and spending more effectively.

Costs of providing care

There are numerous cost advantages in self-managed care. Service providers supporting self-managed care charge lower fees than traditional service providers. This is attractive to service users because they have more funds available to purchase services. Service users tend to use the funds as economically and efficiently as possible, as they do with their own money.

Conclusion

In conclusion, I encourage the Productive Commission to look for creative ways of addressing workforce issues and maximising safety in home aged care. Applying universal rigid regulations across this diverse field is not the way forward. Technology that monitors safety, spending, and working conditions possibly has much to offer. Service system design needs to be guided by principles of service user choice and control and services developed in consultation with older people and workers, including workers who want to be independent contractors.