

Submission

As a regional Home care provider in Victoria we limited experienced using contactor and platform workers as yet. Given that we are experiencing shortages of staff it highly likely that care recipients would use contactors if they were available as they desperate for services.

We have accessed independent contractors in the past but found they were poorly trained and unreliable. They were unable to comply with the regulatory requirements with Police Checks and First aid. Most had not received any training and limited access to the care plan and client information that we had provide to the agency. This put both the staff and clients at risk

The federal government is focusing providing more choice to care recipient which I and my concern is that I am still unsure how contractors will meet that Aged Care Quality Standards,. There is potential for 'cowboys' in the system that may take advantage of older Australians. I work for a Council in Victoria, which understands regulation and accountability.

Council has robust systems in place to manage OHS. There is a reliance that the care recipient will be able to make choices about their care but we still have many client that struggle to navigate the and understanding the complex aged care system, I see there is plenty of opportunities in using platform and contract staff for client care to be comprised . Who will be providing the oversight?

Our staff are provided with regular meetings and supervision. We have peer support in place to ensure OHS issues are address and a robust reporting / feedback loop to ensure any client concerns are addressed. Who will do this with contractors and platform workers? How will they meet clinical governance requirements?

There is a vast difference to providing a service in the client home as opposed to a residential facility, where there is capacity to monitor staff but the home environment is very different. It is important to have regular feedback from clients and regular client reviews.

This will be unlikely with platform or contract staff which is currently unregulated.

Contract staff are also not afforded the same opportunities as direct workers in term of training . The staff are risk of insecure work. The majority of these people being women, those of CALD back ground. This work perpetuates the inequity divide and robs staff of their entitlements. Along with low wages, the insecure work leaves them with limited option to secure loans and make achieve financial security.

It is clear that service providers providing services to care recipients with higher needs will be need to be more highly trained to meet the Aged Care Quality Standards and key performance indicators. Registered nurses are not currently attracted into working in home care and for many years home care work even in roles of staff supervision and client coordination were not recognised as requiring nursing qualification . This will be a big shift and significant work needed to attract more nurses into aged care .

The staff wages should be reviewed to retain and ensure Aged care is considered a valuable profession. I am very passionate about changing the way staff are currently paid in the home care sector with staff only being paid for shift and travel time. Staff paid for a 7.6 hour day with lunch and tea break which would ensure they were fully availability of staff perform takes attend meeting and additional training. There would be no need for multiple jobs and take the pressure off rostering capacity. This would give more job security and improve retention of staff and provide staff the tie to improve skills . This would be impossible to accommodate with contract or platform staff .