OPAN Submission to the Productivity Commission Inquiry into Indirect Employment in Aged Care

1. About OPAN

Formed in March 2017, the Older Persons Advocacy Network (OPAN) is a national network comprised of nine state and territory organisations that have been successfully delivering advocacy, information and education services to older people across Australia for over 25 years. Our members are also known as State Delivery Organisations (SDOs). The OPAN SDOs are:

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<tr>
<th>ACT</th>
<th>ACT Disability, Aged and Carer Advocacy Services</th>
<th>SA</th>
<th>Aged Rights Advocacy Service (ARAS)</th>
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<tr>
<td>NSW</td>
<td>Seniors Rights Service (SRS)</td>
<td>TAS</td>
<td>Advocacy Tasmania</td>
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<td>NT</td>
<td>Darwin Community Legal Service</td>
<td>VIC</td>
<td>Elder Rights Advocacy (ERA)</td>
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<td>NT</td>
<td>CatholicCareNT (Central Australia)</td>
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<td>Qld</td>
<td>(ADA Australia)</td>
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OPAN’s free services support older people and their representatives to address issues related to Commonwealth funded aged care services. OPAN is funded by the Australian Government to deliver the National Aged Care Advocacy Program (NACAP). OPAN aims to provide a national voice for aged care advocacy and promote excellence and national consistency in the delivery of advocacy services under the NACAP.

OPAN is always on the side of the older person we are supporting. It is an independent body with no membership beyond the nine SDOs. This independence is a key strength both for individual advocacy and for our systemic advocacy.

2. Introduction

This short submission recognises OPAN’s role is primarily to provide a voice to older people and the views from their perspective on their experiences of aged care. Therefore, we flag that we are not workforce model experts.

Workforce is a constant issue that arises in our advocacy work at the local and national level. Older people tell us that workforce shortages are one of the biggest issues they face when receiving Commonwealth Home Support Program (CHSP) and Home Care Package services. Our 2020-2021 Presenting Issues Report notes that “The key themes that have emerged in this report have reinforced the findings and recommendations made by..."
In some areas workforce shortages are having a significant impact on the availability of CHSP and Home Care Services. This includes a lack of consistency in support staff and frequent changes in care managers. Workforce issues are also resulting in providers being unable to fulfil care plans. It “appears that there are a number of providers who do not have enough support staff or contracted services on their books to meet the assessed needs of older people requiring care. Some home care package providers are declining to accept new clients due to the lack of support staff available to provide the service”.

A more flexible workforce model is needed that includes both direct and indirect workers, with relevant legislated protections built around both.

3. What Older People have told OPAN

A consistent theme, over the years of advocacy casework provided by OPAN State Delivery in the community setting is the desire to have consistent workers coming into the home to provide support. This consistency means that the worker gets to understand the needs of the older person over the time spent with them and the older person doesn’t waste part of their allocated care and support time informing the worker of their unique needs and orientating the worker on where everything is in their home. This is a common concern raised across residential care as well, where there is a feeling of having to constantly re-educate/re-inform people about their needs due to constantly changing staff. Consistent workers can also influence a person’s sense of dignity and privacy. For example, no one receiving home or residential care wants 5 different people showering them each week.

The need for consistency is particularly important for people living with dementia. Consistent support workers allow them to build rapport and trust with the worker. It also supports the worker to understand the unique behaviours and needs of the client. In addition, this rapport enables the worker to notice if there are changes in the older person that require a change in support, which cannot be picked up by constantly changing staff who do not get the long-term benefit of truly getting to know the person.

A positive of an indirect workforce is that older people may also be able to access a more diverse workforce that matches their needs. For example, someone with the same language, same gender or from the same diversity group. This is particularly important for lesbian, gay, bisexual, trans and gender diverse and intersex people who feel safer with, and more trusting of, people from within their own communities.

OPAN also notes that we hear in our advocacy case work, and in discussions with our National Older Persons Reference Group (NOPRG), discontent with brokerage fees applied by some providers when subcontracting services. This eats into an individual’s budget and leaves less funds for direct care and support.

Members of OPAN’s National Older Persons Reference Group who are currently self-managing Home Care Packages have expressed a desire to have more control over the

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process of recruiting the support workers entering their homes. They want to have the option to

- see the profile of workers, including information on their training and qualifications and work clearances (i.e., police checks)
- be involved in the recruitment process and interview the workers to ensure they will be a good fit.
- select a support worker form a suite of options. Not just take the worker allocated to them.
- Check the support worker has gone through an accreditation process.
- Provide the selected support worker with training on delivering care that meets their needs and preferences.

The one concern that OPAN does hear about the indirect workforce, especially those employed through platforms, is where the responsibility for insurance and liability lies. Older people want clear guidelines on who is responsible for work health and safety, insurances etc when they are using workers from platforms or sub-contracting arrangements are in place.

In the context of this Inquiry, OPAN doesn’t think it matters whether the staff are direct or indirect as long as the older person has choice and access to a well-trained and consistent worker or workers.

4. Regulation

OPAN believes that the proposed Aged Care Worker Regulation Scheme is one way to ensure that older people receive safe and high-quality care regardless of the workforce being direct or indirect. OPAN supports that the Scheme includes “those who are employed, hired, retained or contracted by an approved provider.” This would mean workers contracted through an agency or labour hire agreement would come within the scope of the scheme, if they provide direct care and support services and/or have ongoing contact with the older person.

OPAN acknowledges that the Scheme will not prevent every form of abuse, but it will make it more difficult for someone to commit abuse and will add a layer of accountability. The Scheme will mean that a person who abuses cannot just leave one employer or platform and transfer to another. OPAN also acknowledges that the Scheme will only be as effective as the information that it collects and that a criminal history check is only effective if the person has been caught and convicted.

5. Rural/Remote

In many rural and remote locations across Australia, there are simply no aged care services available to provide older Australians with the care and supports they need. In areas where aged care services don’t exist, older Australians requiring care face the prospect of having to relocate either from a rural property into the nearest large town that has aged care services available or, in the case of those needing full-time care, relocation to a town that has available residential care.
While equal access and service levels to the metropolitan and large regional centres may not be possible, equitable access should be the aim with flexible models of aged care needing to be extended to all rural and remote locations.

In the experience of OPAN’s advocates, faced with these choices, older Australians often:

1. attempt to live independently without any supports or services, preferring this to the social dislocation that would otherwise occur. Those choosing to remain living at home without support can experience additional issues such as not having access to external oversight regarding medication management, which can compromise the person’s health management.

2. rely heavily on the support of family and informal networks if available, as a substitute for professional care. While this may sustain the older person for a time, where the older person has clinical needs, these may go undiagnosed and unattended to, resulting in a worsening of a condition.

3. carer burnout is a factor where family and other informal supports are the only supports with increasing frailty and/or functional decline. Subsequently, there is an increased need for unplanned emergency respite when these informal networks reach breaking point, or breakdown.

4. as a last resort, reluctantly leave their community of choice to access necessary aged care services in more urbanised environments. This leaves the person isolated from social and family networks, and their community of choice.

The Productivity Commission’s Public Enquiry - Caring for Older Australians (2011) outlined several issues that impact the capacity of aged care services in rural and regional Australia. These issues remain pertinent today. Specifically, the Productivity Commission concluded that in the absence of a planned and well-resourced response, aged care providers who operate away from large urban environments are likely to struggle to meet the higher service delivery expectations mandated by the Australian Government.

Issues noted the Productivity Commission’s report included:

1. Providers often reporting an inability to attract, retain and develop a professional and suitably qualified workforce.

2. With fewer people to support, providers may not have enough hours to offer workers anything other than limited casual work. Those seeking full-time work are likely to move on as the opportunity of more hours presents.

3. Higher staff remuneration and other costs associated with temporary workers adds to service viability concerns.

4. Higher travel and staff back-fill costs associated with employees undertaking the required level of professional development impact rural and remote services disproportionately.

5. Staff face difficulties finding suitable and/or affordable accommodation

Rural and remote aged care services may have difficulty attracting and retaining quality managers, particularly if there are limited opportunities for professional development and career progression.

Therefore, the greater the flexibility of employment models that are needed.
6. Conclusion

Workforce shortages will not be overcome by simply enforcing that everyone must be directly employed over indirectly employed. The reality of the increasing use of indirect workers, who can set their availability and work to the hours that suit them, reflects the reality that people do not want to work directly in aged care for low wages and difficult working conditions. Indirect work allows a greater deal of flexibility for both workers and older people.

As noted above older people who self-manage their packages want to be able to choose who enters their home and provides services to them. They want to build a relationship directly with the worker and have a greater say in the services provided by the worker.

In direct employment rostering and timing of services means that older people often have to comply to the “providers” hours rather than receiving services at the times that suit them. For example, waiting to have a shower at 9am as that is when staff are rostered on rather than being able to maintain their 7am shower.

OPAN acknowledges that there will need to be regulatory controls and recognition of proportionate risk, when it comes to delivering services. Mabel, and other such models should be required to be independently checked to enhance oversight and protection of older people receiving services. For example, the OPAN Home Care Check Project connects with the most vulnerable members of the community and could report poor services. In addition, requiring indirect workers to still be covered by a Code of Conduct and other proposed regulatory changes, such as a register, would enhance the safety and quality of services older people receive.

OPAN supports employment models that provide high quality staff that are well paid but we also recognise that there needs to be options for all models. Consumer choice and control is paramount.