

SUBMISSION TO PRODUCTIVITY COMMISSION

HOMESHARING

Homeshare is an exciting and innovative program development in the Aged Care arena.

Its development and potential have national implications. Homeshare needs to be supported and guided at a national level, hence this submission to the Productivity Commission's Inquiry into Aged Care.

What is Homesharing?

Homesharing is an agency assisted intergenerational scheme for matching older householders, who are looking for and could benefit from help in the home and companionship, with people of integrity prepared to lend a hand in return for affordable accommodation. The householder provides a bedroom and shares facilities and in exchange the homesharer provides approximately 10 hours per week of practical assistance around the home such as cooking, cleaning, shopping, gardening, company and the security of someone sleeping in the home.

Homeshare in Victoria

The Homeshare Victoria pilot project was established in the inner south suburbs of Melbourne in March 2000 under the auspice of Mecwa Community Care with support from charitable trusts and foundations, the Department of Veteran's Affairs and the Victorian Department of Human Services. The program changed auspice in October 2003 to Wesley Mission Melbourne. (Now Wesley Mission Victoria)

Who is Submitting this information?

The Wesley Homeshare Advisory Committee (WHAC). We have been actively involved in promoting Homesharing for older people since the idea was first brought to Australia, and Victoria in 1998, by a professional in health field who is a member of the WHAC. We will not go into the history and struggle of the group to promote homesharing, suffice to say there is now a well established and recurrently funded homesharing program namely, Wesley Homeshare, which is funded by Department of Human Services Victoria to provide one program in the Southern Metropolitan Region of Melbourne.

But one program is just not enough when homesharing ticks all the boxes in the current aspirations for funding and delivering diverse, flexible, tailored services to meet the care needs, preferences, incomes and independent living arrangements so ardently sought by many older citizens.

Homeshare is an exciting and innovative program development in the Aged Care Sector.

This is not just our opinion. We have solid research to back up this claim as well as other support such as that from the Myer Foundation's 2020 A VISION FOR AGED CARE IN AUSTRALIA and in A FAIRER VICTORIA May 2010.

Research and Evaluation of Homeshare Victoria

Homeshare Victoria has commissioned two major evaluation projects.

1. Montague Meg, BA Hons, PhD, Grad Dip Public Policy, ***Increasing Housing and Support Options for Older People - An evaluation of Homeshare Victoria Pilot, Phase I: planning, implementation and the first year of matches.*** June 2001

"The experience of the Pilot Phase of Homeshare Victoria has demonstrated the feasibility of homesharing as a model in Australia. With few options available to older people wishing to stay in their own home but needing practical and psychosocial support in the home over a 24-hour period, the homeshare model clearly has potential." Montague 2001, page 54

2. Ben Carstein B.Comm/B.Ec(Hons) ***Economic Evaluation of Homeshare Victoria. Can an innovative community based aged care program give good value for money?*** (February 2003) A project of the Internship Program of the Ronald Henderson Research Foundation. (Full report available at www.ronaldhenderson.org or on the Homeshare International site at www.homeshare.org)

"Homeshare Victoria delivers significant benefits to the community. The program generates expected annual benefits worth \$832,317 to participants and net savings of \$50,222 to the health and aged care system. By removing barriers to exchange, the program offers older Australians a near substitute for the care provided by a live in carer. This is facilitated through barter rather than direct payment. When a match forms parties exchange private benefits and generate external social benefits in savings to the health and aged care system. Without this program, the health and aged care system could not receive these savings. Homeshare clients could not privately purchase live in carers. Initially they would remain in the community, at risk, and eventually enter residential care and the savings would be lost." Carstein 2003, page 46.

Social, clinical and institutional aspects of aged care:

Social connectedness is a social indicator of health. Homeshare brings together householders and homesharers who not only keep householders living in their communities longer but also introduce security and social company into their homes. In some cases a generational, and even multicultural bridge is formed, thus enriching the community as a whole.

Homeshare can fill the gap when family cannot or will not support their older person to continue living in their own home.

Homeshare fills a glaring and frequently mentioned gap in the community support services, that is, a comforting presence at night. This cannot be emphasised enough. The presence of someone else in an older person's home overnight is often the factor that prevents institutionalisation. The Homeshare program fulfils this otherwise very expensive component in enhancing an older person's chances to remain in the community at the end of his/her life.

Homeshare has definitely been found to delay older people's admission to residential care.

Regulatory and funding options:

Funding options and costs.

Homeshare is affordable for both the householder and homesharer. For the householder the costs involved cannot compare with the bonds, daily fees or ongoing charges such as those found in residential care. The scheme can accommodate householders at all levels of the socio-economic scale but experience has shown that people at the lower and middle ends of the scale are more frequent users. For the homesharer the benefits of a home environment, affordable living expenses and the opportunity to fulfil a useful role in the community are the attractions.

The main costs to the program involve the administrative costs associated with the employment of a professional 'matcher', and staff who can monitor the matches and engage in publicity and program development work. A full-time coordinator with full-time administration /support worker can manage about 30 matches, which represents 60 or so people being assisted directly. The numbers of people benefitting from the program is much larger as relatives, who are often interstate or further afield, are assisted in their efforts provide support for older people for whom they feel responsibility.

Funding for the program has been a hard nut to crack. In Victoria, Homeshare has finally been funded under the HACC program Social Support. Historically, it has been a difficult program to place in the pantheon of funded programs because it sits between welfare and housing. The rigid boundaries associated with funding have seriously delayed the expansion of this program in Australia, including the different priorities of State governments. In this regard, there is greater hope for the program to take off throughout Australia if the Australian government assumes full responsibility for funding aged care. It means that if the program is accepted in one State, it should set a precedence in other States without the hassle of having to convince another layer of government of its benefits etc.

Access

The program can be employed anywhere where there is a target population of older, at-risk people with accommodation to share and available younger people with accommodation needs,i.e. it could be used throughout Australia.

The program makes better use of a range of available housing which can range from ordinary residential dwelling places and could lead to better use of public housing as well.

The program can be used for different types of clientele. Although so far the majority of participants have English as their first language this has not been exclusively the case and there is no reason why trials could not be conducted to ascertain whether different culturally and linguistically diverse groups would 'take' to the scheme. Householders with dementia have also benefited from the scheme.

Homeshare can provide a financially favourable rental option for the homesharer. Some homesharers have been saving for their own home, many students seek a quiet and orderly household in which they can study, many want to practice their English speaking and learn our social customs and share their cultural heritage with their householder. Overseas parents of

students express relief that their child is living in a family home in Australia, mature aged people returning to study find it makes the whole venture affordable.

For funding purposes, the 'unbundling' of accommodation from support services (mooted in residential and community aged care) offers some hope in making Homeshare a more readily accepted option in future care. Assuming there will be greater consumer directed care (with or without a care manager) the householder could use his or her welfare dollars to purchase the costs of organising a homesharer and the monitoring that goes with it.

If a universal client assessment form, covering low to high need supports, is introduced, the type of support required in Homeshare would be at the lowest end of the scale. However, the completion of such a form could result in referral to the Homeshare scheme for the potential consumer to consider in the acquittal of his or her package of subsidies.

Planning

Homeshare does not need a universal auspice. Over a 10 year period, Homeshare has had two auspices in Victoria. There is currently a great deal of interest in the scheme from various organisations (all different) throughout Australia, particularly in Queensland, South Australia and Western Australia.

The scheme could be introduced incrementally in States, focusing initially on metropolitan planning regions where there are greater numbers of aged people living alone and who have housing which would be reasonably acceptable to a potential homesharer.

Workforce

To manage the risks inherent in such a service it is imperative to maintain high quality service with skilled and experienced personnel. Staff need social work, community of health tertiary qualifications plus experience in the field. To staff a program of 30 match caseload will cost approximately \$120,000 – 1 EFT co-ordinator and management/administration support, infrastructure costs and overheads.

Conclusion:

A lot of thorough professional work has been done over the last 12 years to bring Homeshare to the position where it has been recognised as a feasible, valuable and desired service.

Homesharing is a proven worthwhile service with wide appeal to older citizens and their families and younger people and their families.

Even if the stated goal of the Victorian Government to expand Homesharing in the Melbourne Metropolitan comes to fruition why should this marvellous aged care alternative be limited to Melbourne metropolitan area.

The same rigid boundaries associated with funding which have seriously delayed the expansion of this program across Melbourne, Victoria and Australia still exist and need to be addressed so that good services that "don't fit the current boxes" can be accommodated and funded.