

# NEW IN-HOME AGED CARE PROGRAM RECIPIENT SURVEY

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Results Summary

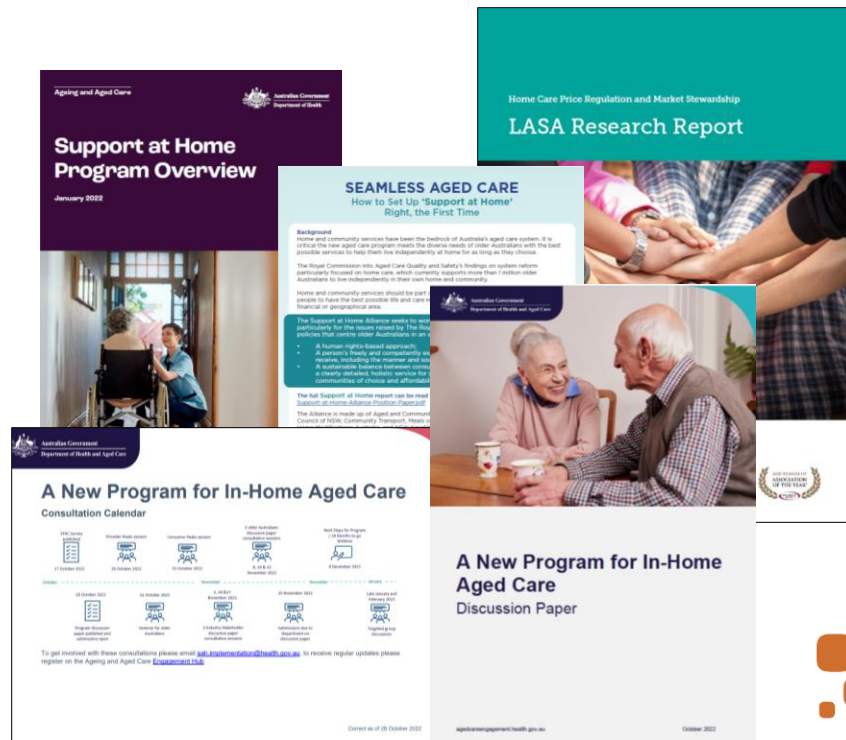
Troy Speirs, Senior Policy Advisor

30 May 2023

I respectfully acknowledge the Gadigal people of the Eora Nation, being the traditional custodians of the land on which we meet today. I pay my respect to the Elders and their families, past, present and emerging, and through them, to all Aboriginal and Torres Strait Islander peoples.

# New in-home aged care program

- Reform of significant magnitude
- Will involve one million older people receiving care from the current programs
- Advocacy to Government and the Department is ongoing
- ACCPA is keen to consider the **care recipient perspective** as well as work with our members on their insights
- Provide input to Government and advocate for improved program design and transition risk mitigation



# DEMOGRAPHICS

## CARE-RECIPIENT SURVEY DESIGN

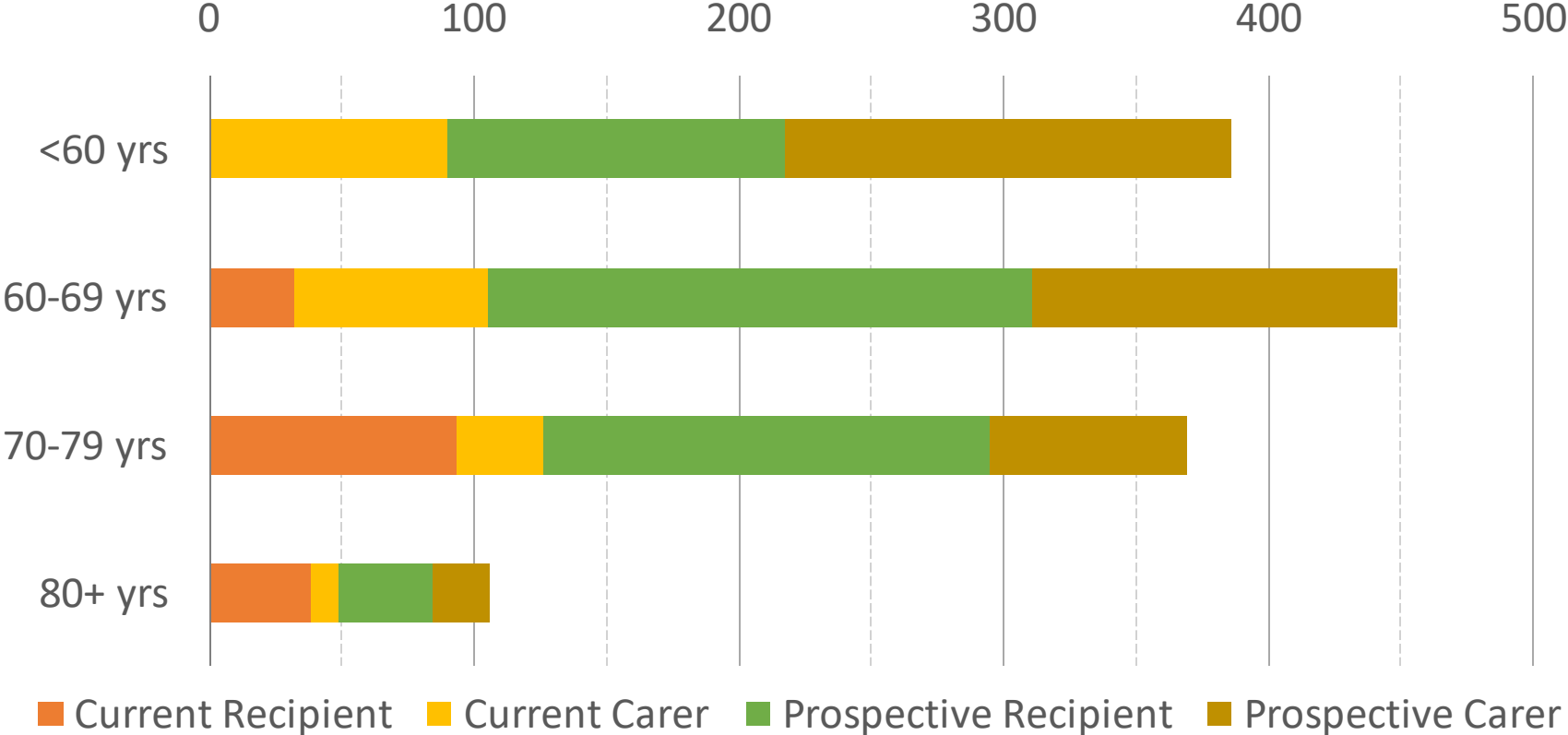
Capturing information about current and prospective in-home aged care recipient perceptions towards a future state in-home aged care program.

Collected late Nov 22 based on Oct 22 design specs

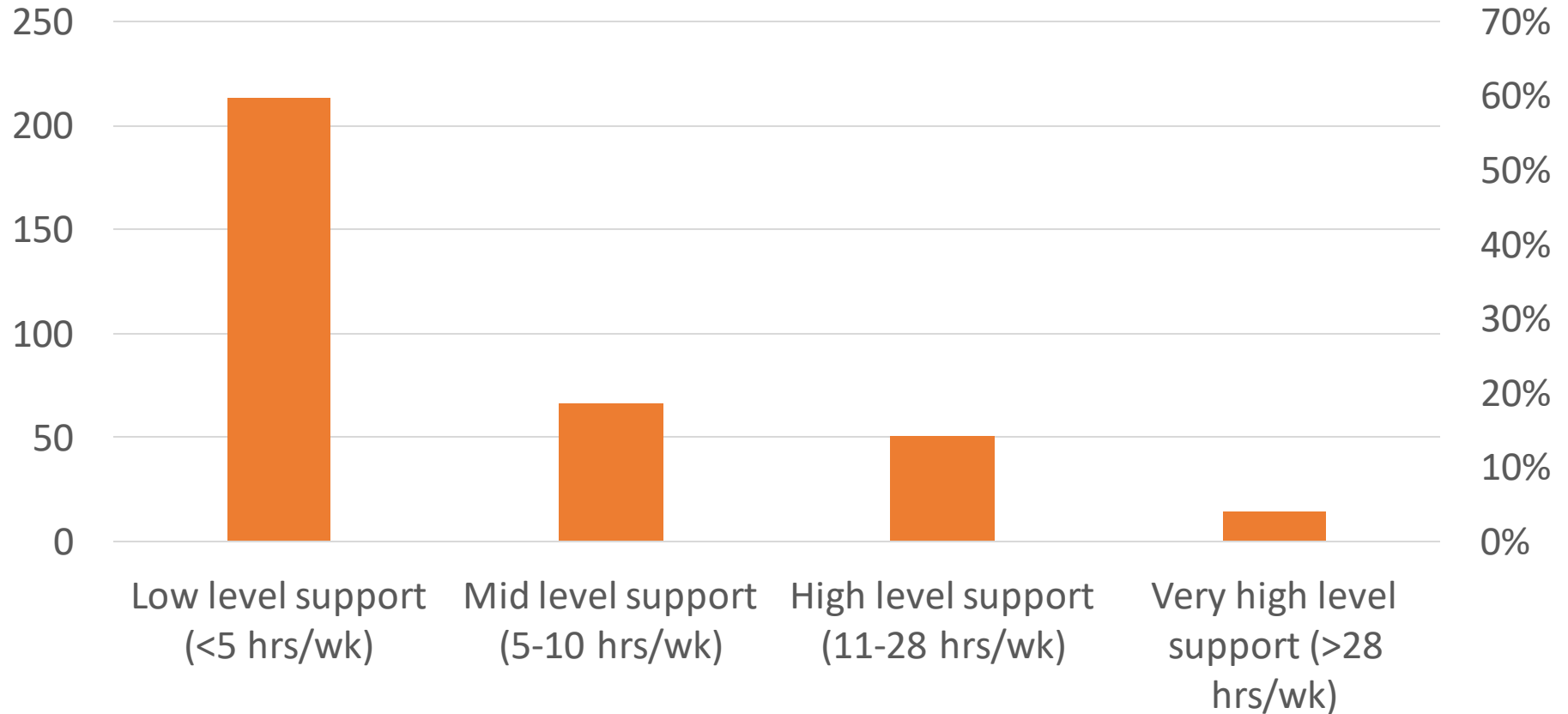
### **1,310 survey respondents**

- 163 (12%) current care recipients,
- 207 (16%) current informal carers,
- 537 (41%) prospective care recipients, and
- 403 (31%) prospective informal carers.

# Numbered distribution for respondent age bands by program participant type



## Numbered & percentage distribution - current respondent average weekly care hours



# ASSESSMENT DESIGN



# Percentage distribution of respondent preferences for assessment design elements

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Assessor approved supports

Support volume restrictions

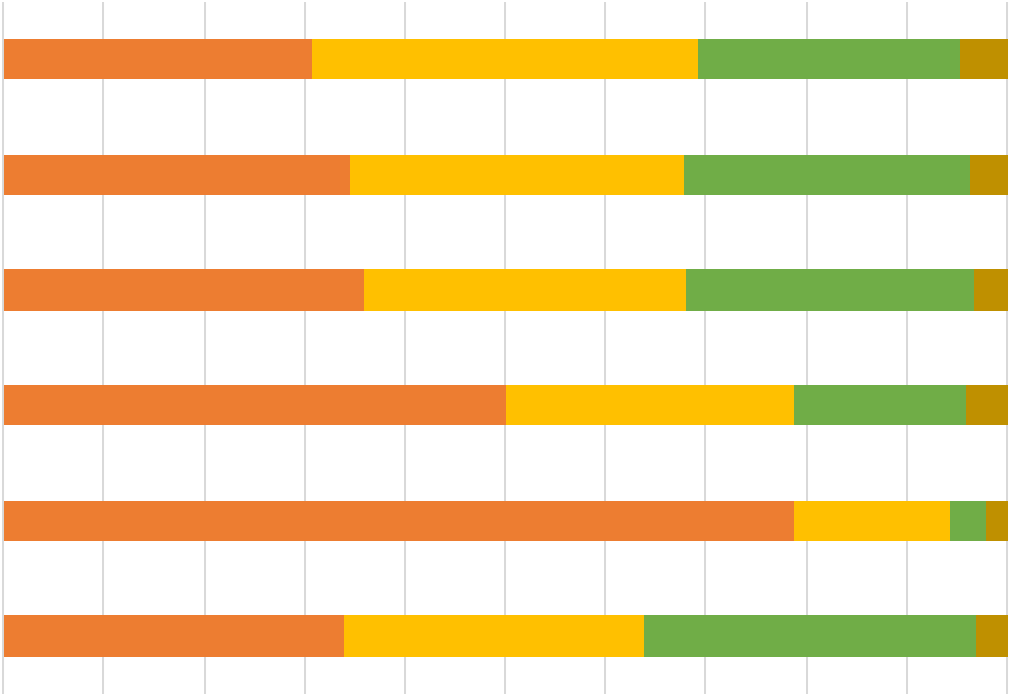
Support type restrictions

Means assessed contributions

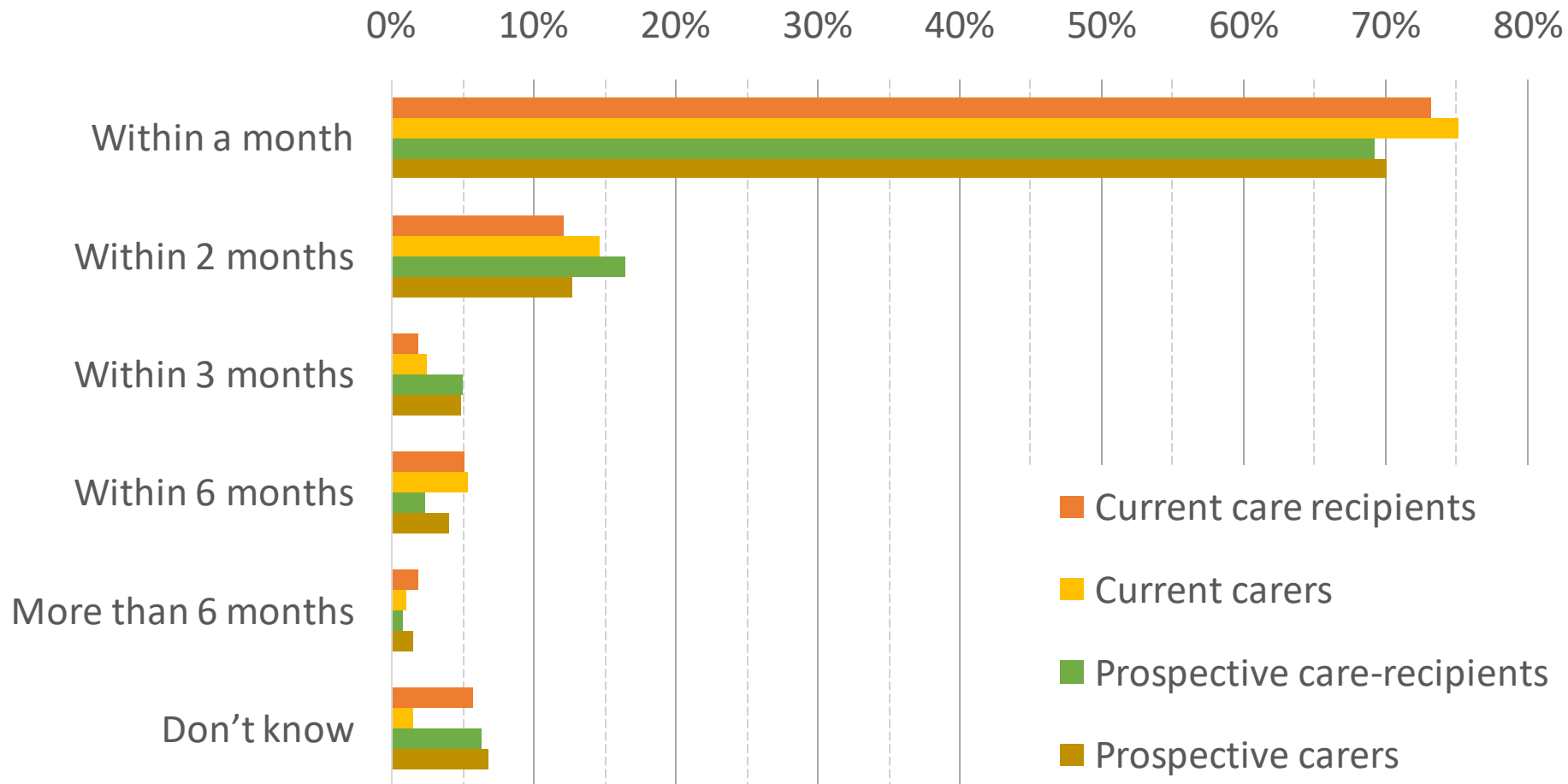
Short term support plan flexibility

Reassessment for support plan changes

Positive Neutral Negative DK



## Percentage distribution of respondent preferences for reassessment design



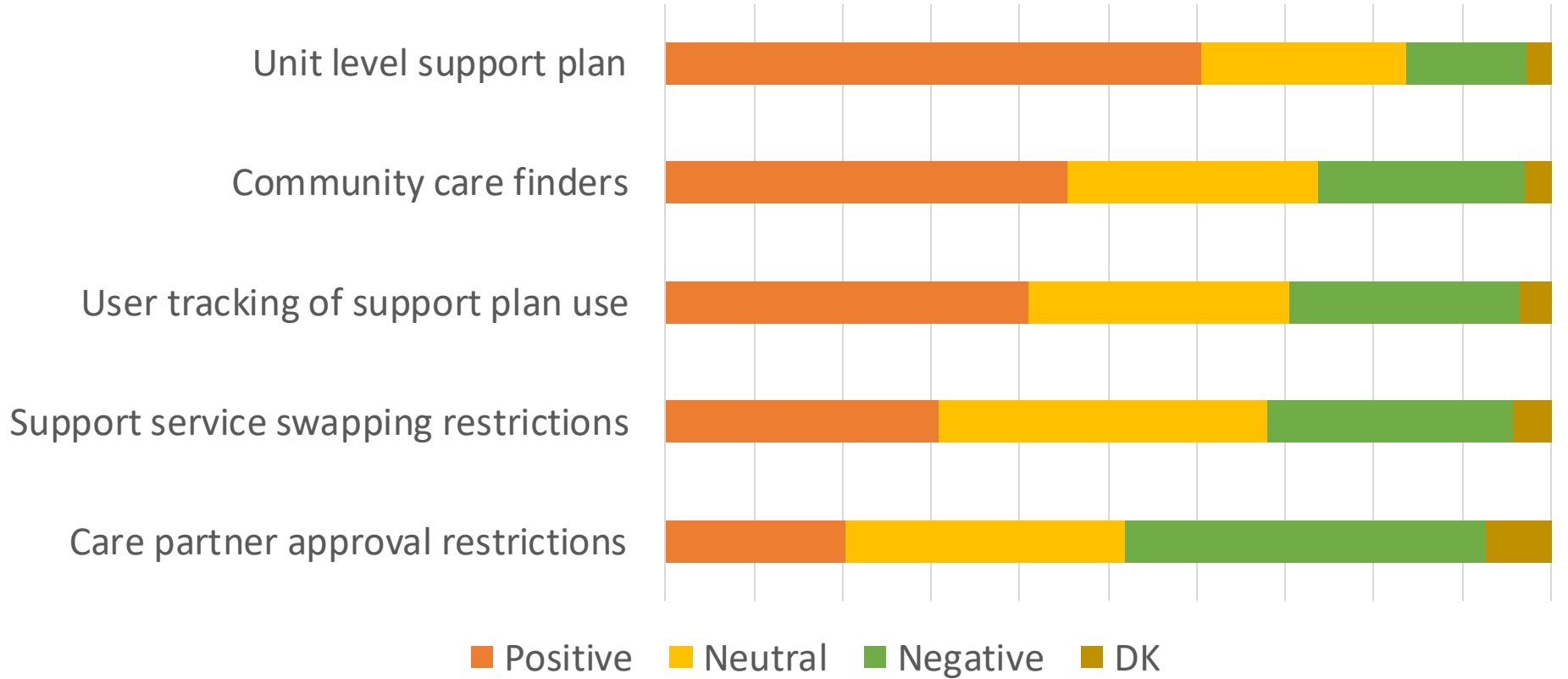
# ASSESSMENT DESIGN

- Strong support (80%) for short term plan flexibility without restriction in response to need, much like HCPs
- High preference (70%) for reassessment of approved supports to occur within a month of change in need
- Balancing assessment workforce/resourcing vs flexible service delivery
- Half of respondents support means assessed co-contributions to care
- Two thirds of respondents were either indifferent or negative on assessor approved services in determining quantum and types of services

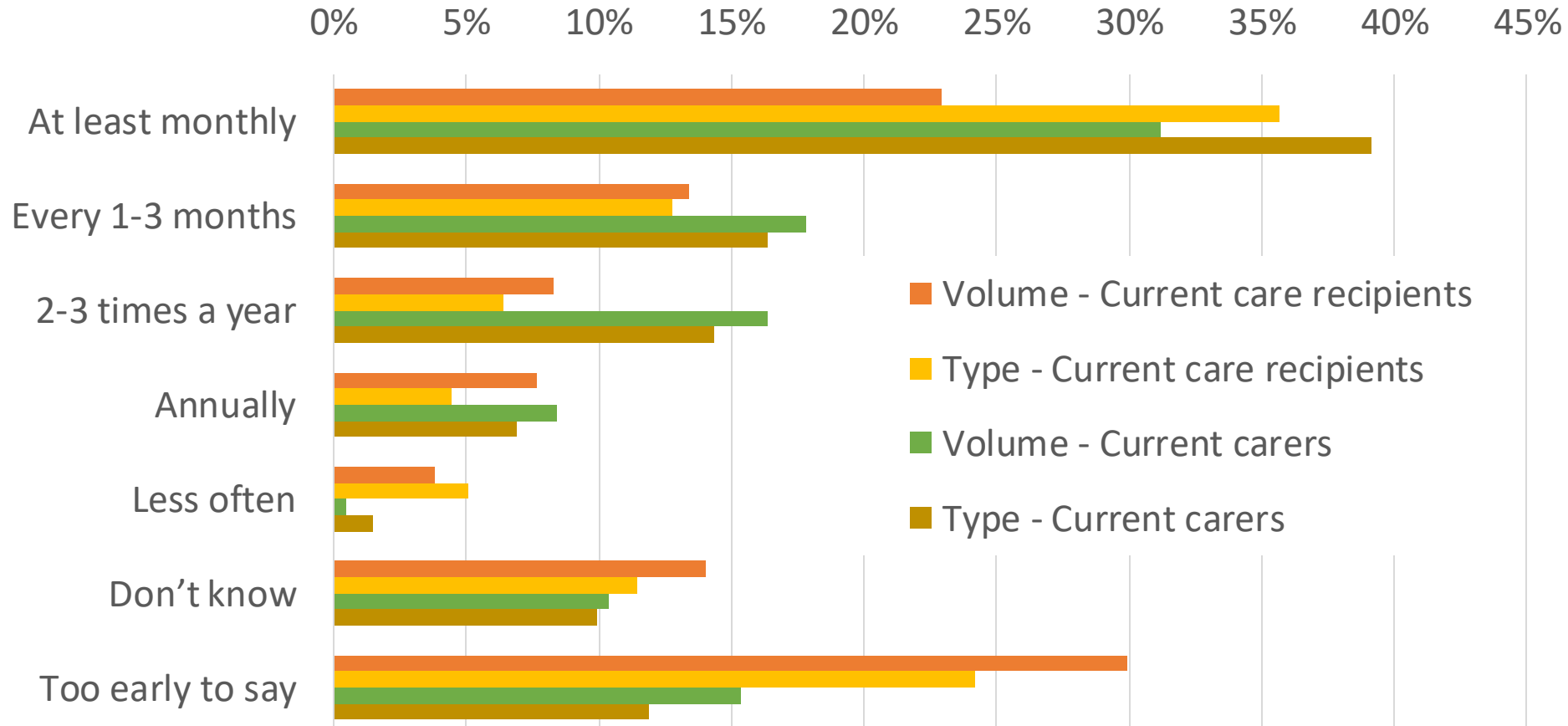
# **SUPPORT PLAN DESIGN**

# Percentage distribution of respondent preferences for support plan design elements

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



# Percentage distribution of *current* respondent expectations Support plan adjustment frequency by support **volume** & **type**



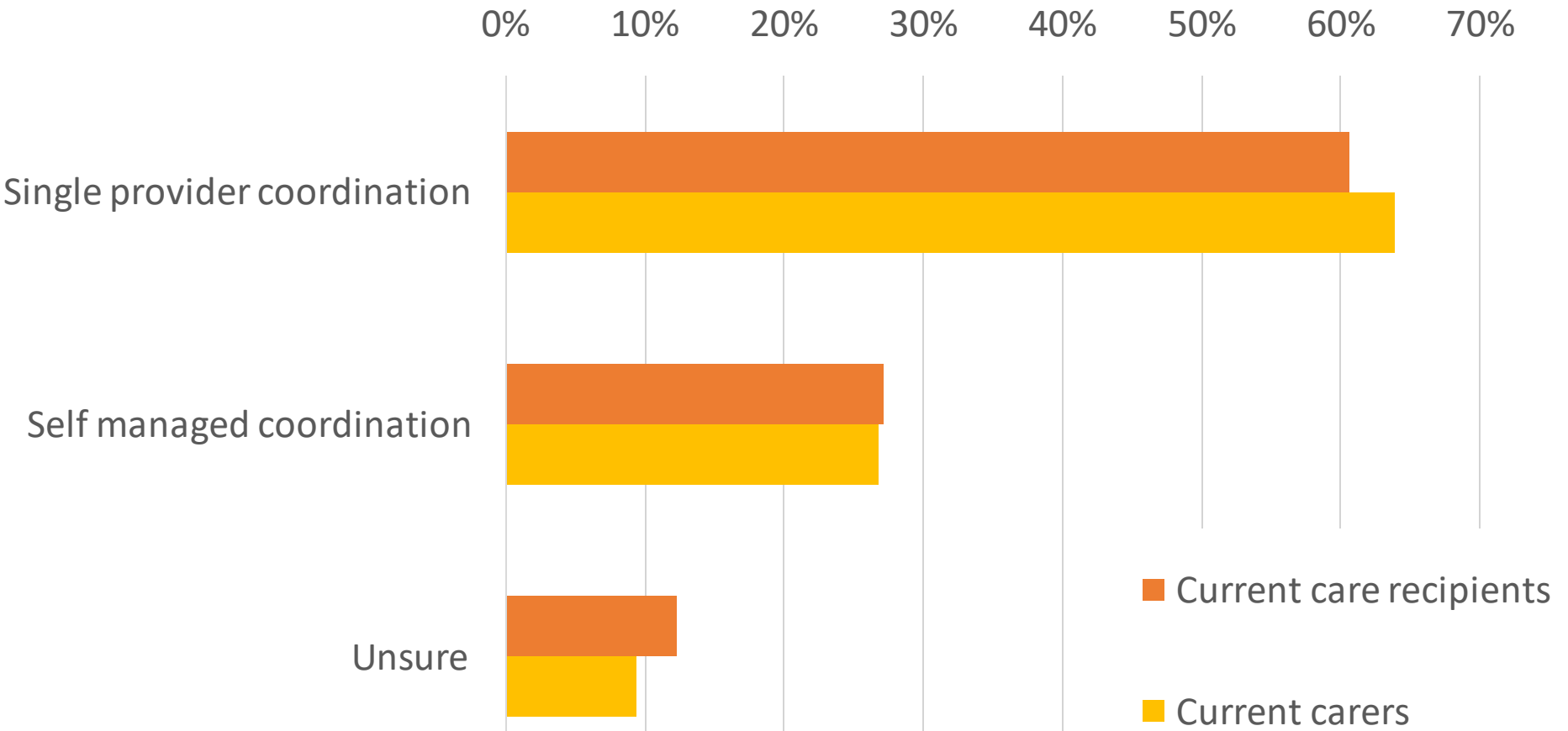
# SUPPORT PLAN DESIGN

- Care-recipients are generally supportive of unit level support plans (60%)
- Variable demand for adjusting support plans (monthly adjustments > 20%)
- Highlights the need for flexible application of unit level support plans that are responsive to need (administration & care management costs)
- Care-recipients are largely indifferent/negative (70%) on restricting their access to care partner/management services
- Some care-recipients are supportive of having access to care finders
- Some care-recipients want to track unit level service use

# CARE MANAGEMENT DESIGN

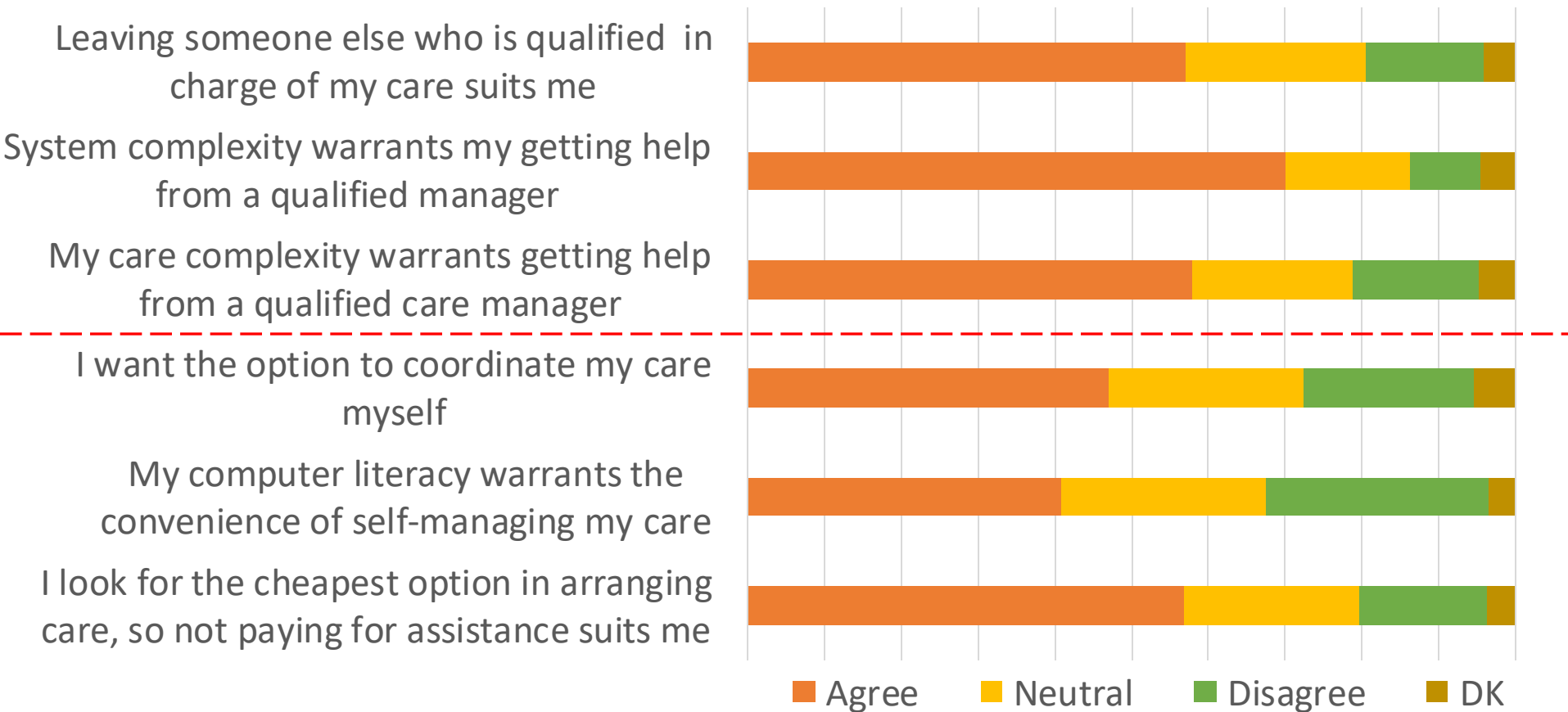


# Percentage distribution of *current* respondent expectations for support plan coordination



# Percentage distribution of total respondent reasons for care management preferences

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



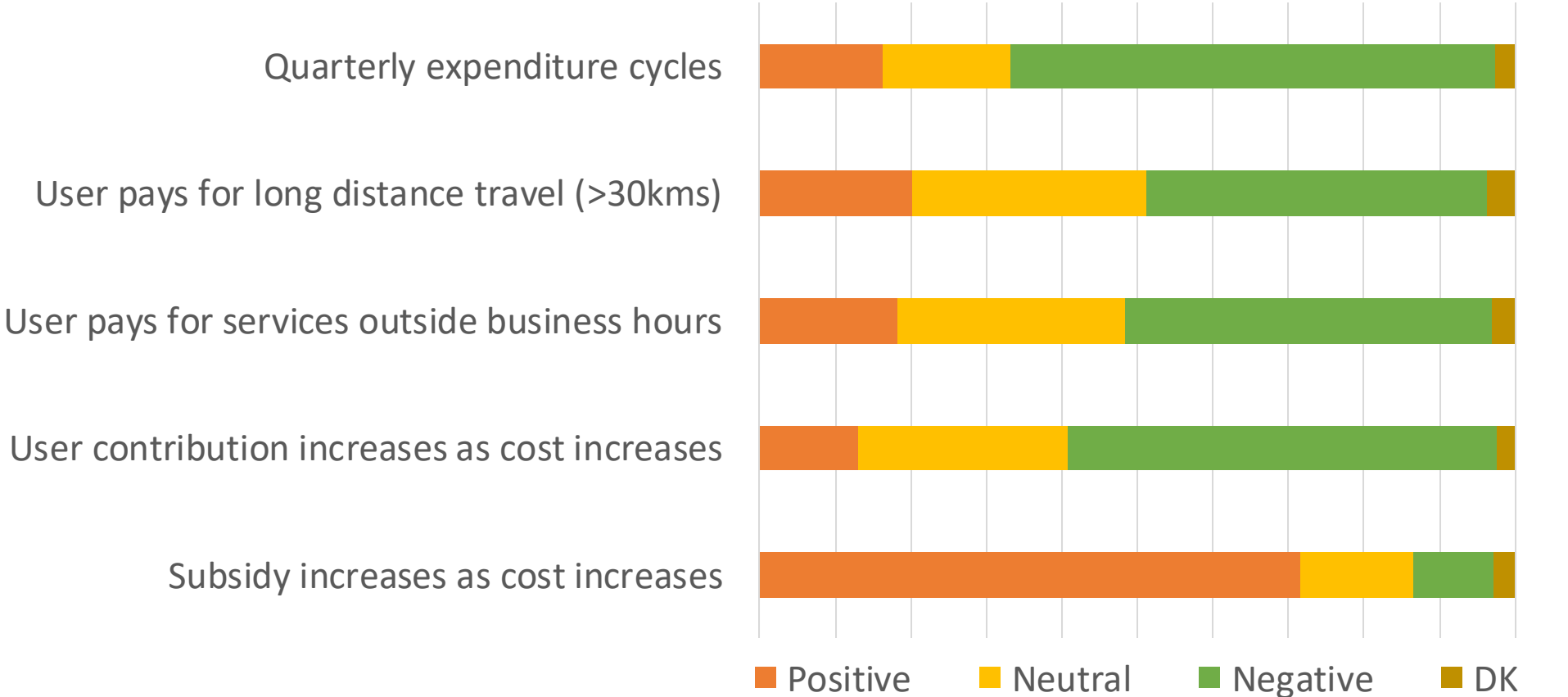
# CARE MANAGEMENT DESIGN

- The majority of care-recipients indicate a preference to have access to care partner/management supports (60%)
- Some care-recipients also indicate a preference to self-manage their care (25%)
- Variable perceptions on drivers of a preference to access care management supports (55-70%) and self-management of care (40-60%)
- Highlights the need for assessment to accurately identify care-recipient need for access to care management supports that are responsive to circumstance (care complexity vs system complexity)

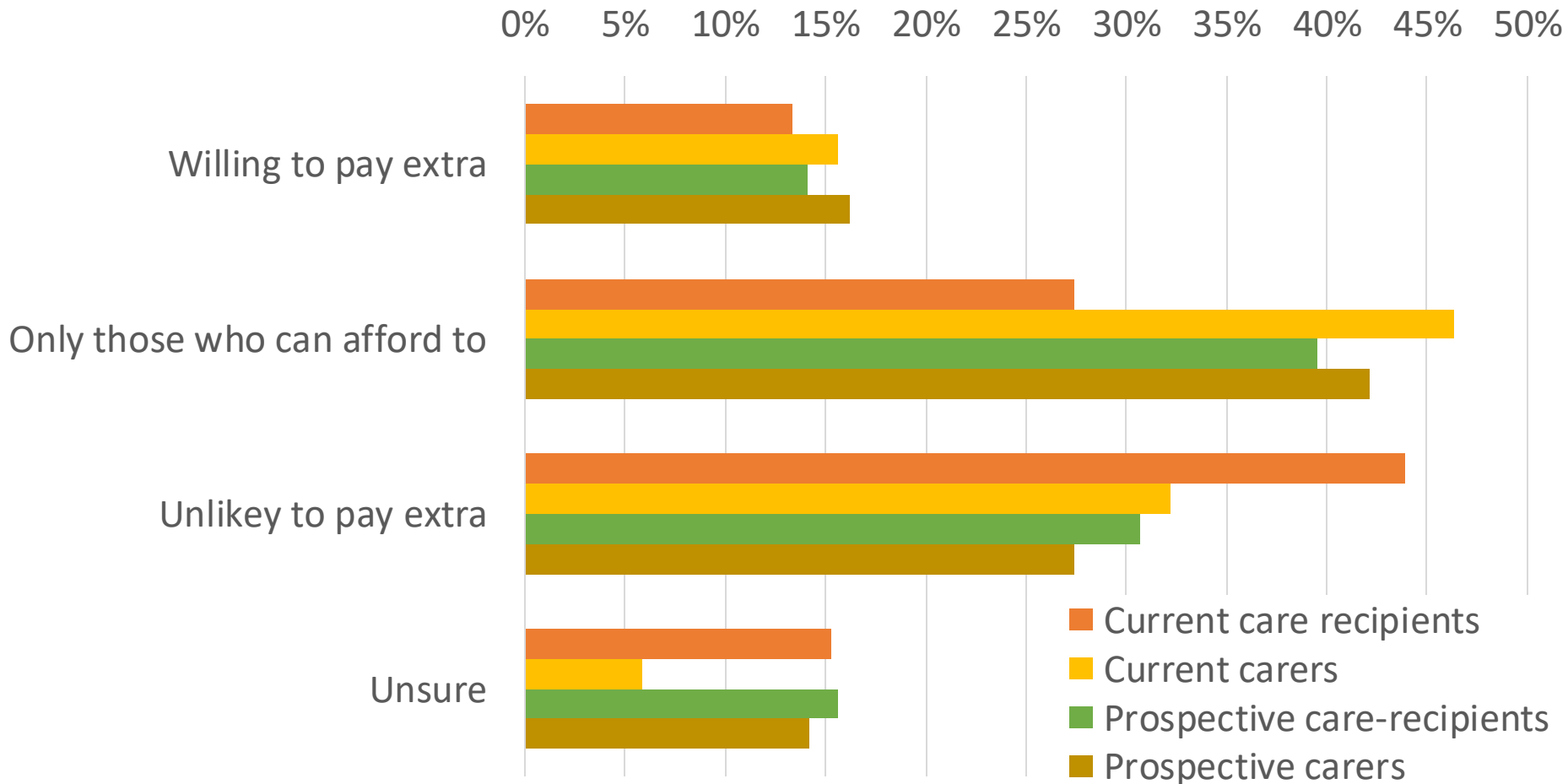
# FINANCING DESIGN

# Percentage distribution of respondent preferences for financing design elements

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



## Percentage distribution of respondent preferences on paying for additional services

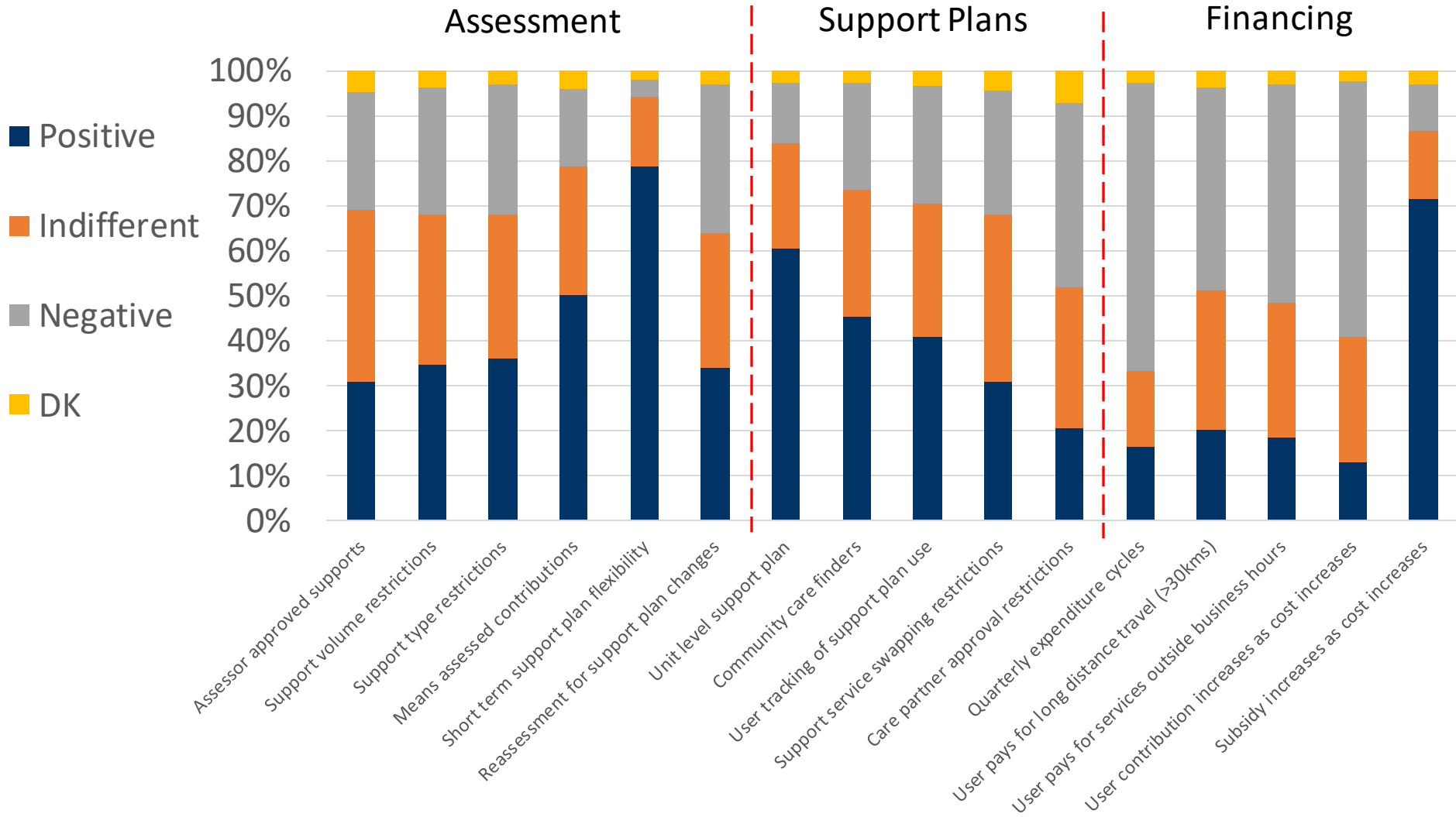


# FINANCING DESIGN

- The majority of care-recipients indicate a negative perception to :
  - Being limited to quarterly budget cycles (60%)
  - Paying extra for long distance travel (45%)
  - Paying extra for services outside business hours (55%)
- Implications for service list/price design - cost control vs consumer choice
- Varied opinions on paying for extra supports above subsidised care
  - 25 - 45% unlikely to pay extra
  - 10 -15% likely to pay extra

# SUMMARY





## CONSIDERATIONS

- ACCPA has provided advice to the Department of Health and Aged Care
  - As part of provider-identified home care reform ***scheduling risks and responses*** to inform the unfolding reform implementation schedule of the proposed new in-home aged care program design to commence from 1 July 2025
- Up to two thirds of current and prospective home care-recipients appear either negative or indifferent about the proposed new program
  - Confirm ***operational requirements*** matched to program design with sufficient ***lead time to transition***
  - Introduce a comprehensive and staged ***information campaign*** to improve public confidence in home care reform
- Staged implementation that includes a responsible transition plan for existing care recipients to minimise care disruption and ensure the retention of existing supports (***build public confidence in reform implementation***)

Thank you

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