

Commonwealth Home Support Programme

Department of Social Services

Via email: chsp@dss.gov.au

29 April 2015

Dear Sir/Madam

**Feedback on the interface between primary and acute care and the
Commonwealth Home Support Programme**

This letter briefly follows up on an issue identified during the consultations by the Department of Social Services on the draft Commonwealth Home Support Programme documents. UnitingCare Australia made a submission to the Department during those consultations (submitted to the Department on 15 April 2015), and contributed to the National Aged Care Alliance submission to the same process. We thank the Department for the opportunity to provide that input.

UnitingCare Australia has, in other contexts, raised its concerns around the possibility that some consumers may be responding to perceived high levels of fees or low value-for-money by refusing services or accessing services that are less appropriate than those that would most effectively meet their needs. We understand that the Department is anticipating this to be largely a transitional issue, and we will continue to monitor progress in relation to it.

This issue is an example of a broader concern around the interface between service systems. UnitingCare Australia believes that it will benefit from ongoing consideration, both during implementation of current reforms, and when designing any further improvements to aged care services.

Like other stakeholders, we recognise the importance of having effective articulation between different systems of care. This can mean, for example, regulation and practices that support transition of service users between systems (such as between hospital and residential aged care). It can also mean ensuring that service users access the most appropriate care they may need, and do not choose, or are not forced into choosing, a care option for reasons that are not relevant to that need.

Examples include consumers choosing to rely on healthcare services, such as community health and acute services, rather than accessing health care packages. Other examples include consumers ceasing access to the services they require, leading to avoidable admission to residential care or unnecessary and costly presentations at emergency departments.

The majority of aged care service users are also engaged with the health system, meaning that the interface between health services and My Aged Care (the Gateway) is crucial. It is important that health care information systems, including those of GPs, hospitals and community health services, can share data to ensure good transitions between health and aged care services.

UnitingCare Australia recognises that successful policy design that creates sound interfaces between different care systems in the ageing, health, disability and palliative care sectors is difficult. UnitingCare Australia encourages the government to make this a focus of its evaluation of existing reforms, and a focus in the future improvement of services. We believe this will help to ensure that people receive the best care, contribute appropriately where they are able, and ensure care is delivered in the most economically efficient manner. Our network stands ready to assist in this process when needed.

We thank the Department for its consideration of this feedback.

Yours sincerely,

Lin Hatfield Dodds
National Director
UnitingCare Australia