UnitingCare Australia

July 2026

Submission to the Senate Inquiry into the Support at Home Program

About UnitingCare Australia

UnitingCare Australia is the national body for the Uniting Church's community services network and an agency of the Assembly of the Uniting Church in Australia.

We give voice to the Uniting Church's commitment to social justice through advocacy and by strengthening community service provision.

We are the largest network of social service providers in Australia, with over 55,000 staff and 17,000 volunteers, delivering 5.8 million interactions annually across 1,600 service locations in urban, rural and remote communities.

We focus on articulating and meeting the needs of people at all stages of life, and particularly those most vulnerable.

Contact

UnitingCare Australia
Level 3, 42 Macquarie Street,
Barton ACT 2600
P: (02) 6249 6717
E: ucareadmin@nat.unitingcare.org.au unitingcare.org.au

Introduction

UnitingCare Australia welcomes the opportunity to make a submission to the Community Affairs Senate Inquiry into the Support at Home Program ('Support at Home'). The UnitingCare Network comprises thirteen aged care providers, and eleven of those currently deliver services under Support at Home. Our Network has coverage across all states and territories, including in urban, regional and remote settings, and we are well placed to speak to the issues and challenges that have arisen since Support at Home's commencement on 1 November 2025.

We note that the following four providers in our Network will be lodging submissions in response to this inquiry: Uniting NSW.ACT; Juniper; UnitingCare Queensland; and Uniting Communities. We encourage the Inquiry to consider the on-the-ground insights and detailed case studies that these providers will present as part of their evidence.

While eight new levels of care, and new schemes like the End-of-Life Pathway are welcome, delivering Support at Home has not been a smooth transition for providers in the UnitingCare Network. Overall, the current design and implementation of Support at Home have presented significant risks to both consumer outcomes and provider sustainability. Without targeted reforms to address funding adequacy, administrative processes, system integration, and communication, there is a risk that the program will fail to meet its objectives.

Notwithstanding the extensive wait times for assessments and packages, UnitingCare Australia notes the following key issues with Support at Home:

- the provision of Minimum Service Offerings;
- administrative complexities and inefficiencies;
- confusion around common prices and false media reports on price gouging;
- care management caps not enabling effective coordination of care;
- the Assistive Technology and Home Modifications scheme; and
- frontline workers experiencing psychosocial distress and burnout.

Addressing these issues is essential to ensure that older Australians receive timely, appropriate, and safe care in their homes, while maintaining a viable and sustainable sector.

Minimum Service Offerings

A key issue with Support at Home is the misalignment between allocated funding and actual care needs, and many consumers are entering the system with insufficient support to keep them ageing at home. This is particularly the case if the provider can only give a consumer a Minimum Service Offering (MSO), currently 60% of a full package, because that's what the Government has assigned to that individual.

MSOs present practical and operational challenges for providers, consumers, and the broader aged care system, and it is one of the more consistent issues that providers in our Network have raised. We advocate there to be a clear plan for their phasing out, and a return to consumers receiving a full package of services that reflects their needs. As more MSOs are delivered to consumers, they are becoming the new norm for the sector and forcibly dropping the standard of care. Providers in our Network want to deliver high-quality care to consumers, however this is proving difficult as they only have so much funding to work with. MSOs also present significant risks for the older person as their needs can change from week to week, and they can deteriorate quite quickly if they don't have appropriate care and support.

We anticipated that MSOs would be a temporary measure, however according to the Department of Health, Disability and Ageing they are part of 'program design'. While we acknowledge that MSOs are a way to reduce the waitlist and get services to people quickly, it is misleading when an older person expects a certain level of service and is given only 60% of that. It's also difficult for aged care workers to explain to a consumer that they have been allocated a certain package but will only receive part of it for the time being. When a consumer is receiving services which only address a portion of their assessed needs, psychosocial distress is felt by the workforce in trying to meet unmet care needs and manage expectations with the consumer and their support network.

Furthermore, it's reported in our Network that it's administratively difficult when a provider is forced to 'top-up' the MSO with CHSP services, so that the consumer can receive the appropriate level of care. As we articulated in our previous submission into the transition of CHSP to Support at Home, conflation between the two programs persists and the allocation of MSOs is a significant part of the problem.

Recommendations:

1. **Phase out Minimum Service Offerings and ensure older people receive funding and packages that reflect their assessed care needs.**
2. **Until Minimum Service Offerings are phased out, the Department should provide clear and transparent communication about why they are being used, and how long consumers can expect to receive a Minimum Service Offering, and other relevant information.**

Administrative systems

Support at Home is characterised by administrative complexity and inefficiency. Providers are experiencing increased workload due to new claiming processes, invoicing requirements, and system limitations, including a lack of integration across key digital platforms. This increased administrative workload not only places pressure on staff navigating the system but comes with minimal or no funding from the Government. This ultimately has a negative impact on the economic viability of providers.

The inconsistency of approvals received by our Network adds to the increased administrative burden for our providers. For example, one provider reported that a consumer was assigned a Level 8 Support at Home Package *without* nursing approvals, and allied health services are sometimes only being approved for consumers receiving CHSP, not Support at Home. These inconsistencies create delays for consumers and place incorrect responsibility on providers to manage bureaucratic inaccuracies.

Due to a perceived lack of coordination between Services Australia and My Aged Care, providers in our Network have experienced significant delays in the processing of hardship applications, creating uncertainty and risk for both the provider and consumer. Providers have been told they are not supposed to invoice whilst a consumer is applying for hardship, yet this process can take several weeks and is not always successful. UnitingCare Australia recommends there be a pre-approval process for hardship applications, so that providers can plan ahead and know whether they can continue to invoice for services. From the consumer's perspective, hardship applications rely on strong literacy and persistence, however without dedicated support from a social worker, the consumer can be put in a vulnerable position and give up on the process entirely.

Improving processes and interoperability between My Aged Care and Services Australia would also improve the accuracy and consistency of information provided across the sector. For example, it's been reported in our Network that My Aged Care will at times contain inaccurate and misleading information about accessing services under Support at Home, which can erode trust between consumers and providers. In addition, timely notifications from My Aged Care for short-term programs are needed so that providers can commence services proactively. Improved alignment and communication between government agencies is critical to ensuring that providers and consumers receive consistent and accurate advice.

Recommendations:

3. **Improve interoperability, coordination, and information-sharing between My Aged Care and Services Australia to reduce administrative burden.**
4. **Reform hardship application processes, including consideration of a pre-approval mechanism, to ensure consumers experiencing financial hardship are not disadvantaged by delays in decision-making or discouraged from accessing essential services.**

Common prices

While UnitingCare Australia supports a system where consumers have access to transparent pricing, we note that providers are navigating decisions around how to price services which are varied and complex. Publishing common prices on certain services is challenging, and providers are often forced to publish a price that doesn't always reflect the cost for all possible variations under a category of service. This has created confusion for consumers who may not fully comprehend what a common price means.

For example, it's nearly impossible to publish a common price for bathroom modifications as this can range from the installation of a single rail to a full bathroom remodel. It's also a challenge to publish a common price for meals, as the price is dependent on the number and types of meals delivered to a consumer in an average week. The meal preferences of consumers can also change from week to week, and in turn the price needs to change.

It's been reported in our Network that consumers become frustrated at providers when they are charged above the common price, which is not a good outcome nor pleasant experience for both provider and consumer. This uncertainty is compounded by an environment shaped by negative media narratives about price gouging. The amount of misinformation in the media about prices charged for home care services has been damaging to the relationships that providers are trying to form with consumers, and to the reputation of the aged care sector during what is already a challenging period of reform. When erosion of trust occurs, it is the frontline staff delivering aged care services who absorb the most amount of negativity around pricing, increasing psychosocial safety risks.

If we want to ensure that consumers have autonomy and choice in their services, providers need to have flexible conditions when it comes to publishing common prices, and there needs to be more comprehensive education for consumers and their families about what a common price framework means for them and their choices around services. The Government and media have a role to play in supporting the sector to charge the prices they need to deliver high-quality services, and UnitingCare Australia believes that more realistic narratives around pricing would go a long way to achieving this.

UnitingCare Australia emphasises that there isn't just a lack of education on prices, but on the Support at Home Program as a whole and the way the Program has been designed makes it difficult to convey a positive message to consumers. A common price list is just one component of the Program, however giving providers more flexible conditions in publishing prices would go a significant way to improving outcomes for the consumer and provider.

Recommendations:

5. **Allow providers greater flexibility in how they publish common prices**
6. **Implement a government-led consumer education campaign to improve understanding of service pricing variations under the Support at Home program.**

Care management

The current care management cap of 10% imposed on providers is not sufficient to support effective coordination of care, particularly for consumers with complex or evolving needs. Ensuring that a consumer receives the right services at the right time, from the right staff member or right associated provider, is genuine administrative work and needs to be recognised as such.

Reduced funding allocations for care management are limiting the ability of organisations to recover costs and maintain service viability. At the same time, operational expenses are increasing, including labour, travel (particularly in rural and regional areas), and administrative overheads. This means that providers are often undertaking additional care management for free. Spending time in the office organising the timing and allocation of services for hundreds of consumers costs money and this urgently needs to be recognised and understood by Government.

It's not only the circumstances of a consumer that raise the cost of care management, but external crises also complicate the operating environment for the provider. For example, recent petrol price hikes and natural disasters such as flooding have seen providers expending more time, effort and money into delivering services to their consumers. The fact that providers can still coordinate those services in trying circumstances does not mean they are funded to undertake that work, and workers are sometimes going above and beyond their usual roles to keep consumers safe and cared for.

The other issue our providers are facing is that consumers and their families don't see the value in care management and will take it upon themselves to track how much time an aged care worker is spending in their home, and on specific services. While the care management cap was introduced as a consumer protection, consumers are not going to be protected in the long term if their provider is not funded to comprehensively deliver high-quality care in a timely manner.

UnitingCare Australia strongly urges the Government to reconsider the 10% care management cap and employ an evidence-based approach to determining what the cap should be.

Recommendation:

7. **Review and increase the 10% care management cap using an evidence-based approach to ensure providers are adequately funded to coordinate care, meet rising operational costs, and maintain high-quality services for consumers with complex needs.**

Assistive Technology and Home Modifications Scheme

The purpose of the Assistive Technology and Home Modifications (AT-HM) Scheme is to support the safety and independence of consumers in their home, through the funding of essential equipment and minor house changes. Providers in our Network report that due to delays in assessment processes and approvals of allocated funding, the scheme does not fulfil its original intent, and consumers are not receiving the support they need.

Without faster processes, and better communication of approvals, consumers are at risk of being in a physically unsafe environment in their own homes. While providers have full intent of protecting their clients from falls through the provision of the necessary equipment and home modifications, this is proving difficult to achieve without fast approvals for AT-HM funding. For example, a provider in our Network reported that several of their consumers have had falls or have been hospitalised due to not receiving AT-HM funds in a timely manner. Other reports have included consumers waiting up to 8 weeks for approval of their funds, noting this is separate from the allocation of their package.

Another gap within the AT-HM scheme is the lack of flexibility to use unspent funds to cover the costs of equipment. This is prevalent in the low tier stream where funds are capped at $500 per year and with a monitoring fee of $380, there is little room for further equipment to be purchased. If there is ongoing funding or surplus from a consumer's Support at Home package, this could be spent on preventative measures such as falls pendants, servicing of equipment or updating home modifications. This would provide greater protection of the individual's safety, prevent the need for higher cost service options, and greatly assist with the demand for reviews and assessments for how AT-HM funds can be spent.

Recommendations:

8. **Streamline and expedite AT-HM assessment and approval processes to ensure timely access to essential equipment and home modifications**
9. **Allow greater flexibility to use unspent Support at Home funds for essential equipment, home modifications and other preventative supports that help older people remain safe and independent at home.**

Workforce

UnitingCare Australia emphasises that due to the issues described in this submission, among other factors, many frontline workers are experiencing significant burnout and fatigue and are even leaving the sector. With demand for home care only set to increase, we cannot afford to lose our highly skilled, dedicated and compassionate workers. The Government has a role to play in addressing these concerns with targeted communications to aged care consumers about how Support at Home has been designed, and greater support for providers in addressing misunderstandings.

Despite significant efforts by providers to communicate changes, many consumers understandably struggle to understand the Support at Home framework, leading to confusion, dissatisfaction, and erosion of trust. It's been reported in our Network that many consumers are expressing frustration towards their aged care workers, and in some cases becoming verbally aggressive. The disappointment is mostly with decisions of Government, and not decisions of the provider, and it's been difficult for workers to explain these decisions to consumers.

A provider in our Network reported that they've had to implement a model whereby if a consumer is aggressive towards frontline staff, service managers will issue that consumer with a warning. If the consumer doesn't change their behaviour, then providers will withdraw services, in the interest of protecting the health and psychosocial safety of their staff. The more negative encounters with consumers there are, the higher the psychosocial impact on frontline workers. In some cases, negative encounters can result in long-lasting, damaging effects on workers and fast track their exit out of the sector. To prevent this from occurring, one provider in our Network reported they are now sending two workers instead of one to the homes of some consumers, to facilitate safety in numbers.

UnitingCare Australia acknowledges the risks and expectations that come with entering someone's home to deliver them a community service. Linking back to our case around the need for a higher care management cap, many aged care workers undertake the role of a social worker, even though they are not funded to do this. With reduced care management revenue, aged care services are becoming increasingly transactional as the worker does not have the time nor funding to build a meaningful relationship with the consumer. If an aged care worker has the time and space, and funding to build trust and rapport with the consumer, then this will lead to better outcomes for all involved.

While providers hold responsibility for delivering services under a Government-funded program, they are not necessarily responsible for the frameworks and parameters that sit around that program. Clear, consistent, and accessible information must be provided to new entrants and the wider community regarding program design, pricing, compliance requirements, and service inclusions. Only then will aged care providers and frontline workers feel empowered in their roles to deliver high-quality care under the new Support at Home Program.

Recommendation:

10. **Ensure government communications and implementation activities are adequately resourced and promoted so consumers, families and providers have access to clear, accurate and consistent information about Support at Home.**

Conclusion

Overall, the experiences of providers and consumers with Support at Home highlight the need for more streamlined administrative processes, greater funding flexibility, and stronger coordination between Government systems to ensure consumers receive timely, high-quality care. Addressing these issues will reduce provider burden, improve service sustainability, and enhance outcomes for older Australians.

Providers in the UnitingCare Network want the Support at Home Program and its adjoining systems to operate effectively, so they can continue to deliver high-quality care to older Australians, now and into the future.