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Dear Committee Secretary

Re: Terms of Reference for the COVID-19 Royal Commission

Anglicare Australia welcomes the opportunity to make this submission on the terms of reference for a COVID-19 Royal Commission. A Royal Commission would provide a crucial opportunity to learn from the handling of the pandemic at every level of Government, and apply those findings to the ongoing management of COVID-19 and any future pandemics.

The COVID-19 pandemic has been a generation-defining event. As frontline service providers, Anglicare Australia's member agencies have seen first-hand the impact of the pandemic on Australian communities. Our input draws on our insights from working with those most vulnerable to the health and economic impacts of the pandemic, and our experience operating essential services such as aged care, childcare, disability services, and emergency relief. Our focus is on ensuring that a Royal Commission is equipped with terms of reference that enable governments to learn key lessons ahead of future crises, and plan for them more effectively.

Involvement of the community sector in early planning and responses

In the early stages of the pandemic response, the Government was rightly focused on acting quickly. However, Anglicare Australia notes that there was limited involvement from the community sector in many of the most important initial measures. For example, the JobKeeper Payment had initially been designed in a way that would have excluded many service agencies and made it difficult for them to retain staff in their most affected services areas. Although advocacy from Anglicare Australia and other charitable networks meant that the design issue was later resolved, early engagement with the sector could have prevented it from arising to begin with.

Other critical areas, such as aged care, would have benefited from early collaboration. There were several calls from the aged care sector, experts, and older people themselves for a national aged care plan for COVID-19. These calls were echoed by the Royal Commission into Aged Care Quality and Safety in September 2020 as part of a special report on the pandemic response.ⁱ In spite of these calls, a plan was not published until 30 November 2021.ⁱⁱ This delay meant that valuable time that could have been spent preparing was lost.

We ask that a Royal Commission explore the effectiveness of Government could have engaged more effectively with the sector in the early stages of its response, and how it could mobilise the sector quickly for any future crisis.

Clarity on the role of different levels of Government

Anglicare Australia notes that the Royal Commission into Aged Care Quality and Safety recommended establishing protocols between the Australian Government and states and territories.ⁱⁱⁱ It observed that a lack of clarity of roles created confusion for senior facility managers when disputes developed between federal and state government officials about the transfer to hospital of residents with COVID-19. Members of the Anglicare Australia Network have direct experience with these impasses, which made it difficult to offer clear answers to residents and their families about their care.

The aged care sector is just one example of this lack of clarity. There were many instances where the relationship between the Australian Government and the states and territories was unclear, mismanaged, or absent. This hindered effective planning and responsiveness and led to poorer outcomes for the community. It should be a priority for a Royal Commission to explore the impacts of this lack clarity, and find ways to avoid it in future.

The adequacy of Australia's social security system

The health and social impacts of COVID-19 were much more severe for on people on low incomes than those with greater resources. In the first year of the pandemic, people on low incomes were dying of COVID-19 at four times the rate of other groups.^{iv} Many Australians remain uniquely vulnerable and poorly equipped to deal with health and environmental crises, with one in eight adults across the country living in poverty.^v Worse still, one in six children lives in poverty, placing them at higher risk of long-term impacts that could affect them for life.^{vi} The biggest risk factor for living in poverty is living on income support.

Even with top-ups and extra payments, income support payments have been shown to trap people in hardship. A survey of 2,000 Anglicare Australia clients conducted shortly before the pandemic found that two out of three people who came to us for emergency help were out of work; one in two needed help to get basic essentials such as food or medicine; and one in three needed help to manage a low income.^{vii} The payments these Australians rely on are so low that many people are forced to turn to agencies like ours just to get by. The survey also showed that emergency relief isn't a long-term answer to poverty, with one in two clients coming to us for over a year.^{viii} What these people really need is an income to match the cost of living, which has surged since the onset of the pandemic.

Much was made of the doubling of the JobSeeker rate in 2020. In reality, the rate had simply caught up with living costs after a 26-year freeze. The long stagnation of payments made the increase look large, but in truth, Australia's unemployment payments had been so low for so long that the debate over rates lost all sense of proportion. This helps explain why the Coronavirus Supplement could double payments while still leaving people barely above poverty line.^{ix}



Anglicare Australia notes that asking rents have gone up by 48 percent since 2020.^x The asking rent for a unit in Sydney is now \$690 per week,^{xi} and \$521 in Melbourne.^{xii} The current rate of JobSeeker and other working age payments would force people to spend all of their income to afford the average rent in a major city, even with the help of Commonwealth Rent Assistance.

The Government correctly recognised in 2020 that income support rates were simply not enough to support people amidst a health crisis. Australians are now entering a period of more frequent and severe extreme weather events, high housing costs, and stubbornly high living costs. Raising the rate of income support payments is the best way to permanently protect people from any future crises they may face, pandemic or otherwise. We urge the Committee to ensure that a Royal Commission is given the scope to explore this issue and assess the risks of keeping working age payments so far below the poverty line.

Preparedness of the workforce

For years, Anglicare Australia has called for investment in job creation in the care sector. COVID-19 highlighted the fragility of the workforce without this investment. The aged care workforce was widely acknowledged to be in crisis throughout the pandemic, while other frontline service areas such as disability were on the precipice. Put simply, the current care workforce cannot withstand another crisis on the scale of the COVID-19 pandemic.

Many other essential industries are equally vulnerable. Outbreaks affecting workers in food manufacturing and supply, the logistics supply chain, and essential retail among others led to supply shortages across the country. Industry leaders have noted that most people are simply not equipped to fill these positions, which are often wrongly assumed to be unskilled.

We support the Senate Select Committee on COVID-19 recommendations for the development of a pandemic workforce strategy. A Royal Commission should explore how to better prepare Australia's workforce for future shocks and crises. This should include examining Australia's pre-employment skills and training system to understand how it could better connect with areas of known demand, such as the care sector, or offer people the support to gain competencies that were shown to be essential throughout the pandemic.

Accounting for the true costs of the pandemic

Over the course of COVID-19 outbreaks and shut down, community service organisations consistently served their clients and communities. They provided essential services and helped keep people safe under incredibly difficult conditions. Restrictions were lifted quickly and with little planning at the end of 2021, pushing many of these staff and services to the limit with the rampant spread of infections. Case numbers rose quickly and more staff began isolating, falling ill or experiencing anxiety and burnout. The costs of staff backfill, cleaning and rapid testing placed organisational sustainability at severe risk. Some Anglicare Australia Network members reported spending tens of thousands of dollars on tests for frontline workers to keep services open. The financial impacts of those months continue to be felt to this day.

When Anglicare Australia raised these issues with government and departmental representatives, we were told that services were free to enact temporary closures. Many of our member agencies felt that this was not an option. When community services cease to operate, it leaves people at deadly risk. It could mean leaving people without food, unable to escape an unsafe home environment, or without home care to help with health and personal tasks.

Part of the rationale for removing restrictions quickly, rather than planning for a more gradual easing while supplying free tests, was that the Australian Government could no longer bear the costs associated with restrictions. The Government may have reduced its own costs, but in doing so, it offloaded them on to service agencies, charities, and individuals themselves. Any true accounting for the costs of the pandemic must include those born by the community as well as Government, and factor in the costs they incurred because of the way in which Australia transitioned out of the pandemic phase of the COVID-19 crisis.

Anglicare Australia recommends that a Royal Commission into COVID-19 assess the economic cost of the Australian Governments response to the COVID-19 pandemic for business, community sector organisations and individuals.

Each of these areas is crucial to understanding the ways in which the Australian response to COVID-19 succeeded, how it could have been improved, and what needs to be done to prepare the nation for future shocks and crises. Our hope is that a Royal Commission into COVID-19 is supported by terms of reference that not only enable reflections on the past, but allow for tangible recommendations that can improve our responses in the future.

We would welcome the opportunity to expand on our comments, or further discuss the issues we've raised. Please do not hesitate to contact Anglicare Australia if you would like to discuss the issues raised in greater detail.

Yours sincerely

Maiy Azize
Acting Executive Director



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- i Royal Commission into Aged Care Quality and Safety (2020) [Aged care and COVID-19: A special report](#).
- ii Commonwealth of Australia (2022) [Select Committee on COVID-19: Final report](#).
- iii Op cit: Royal Commission into Aged Care Quality and Safety.
- iv Australian Institute of Health and Welfare (2021) [The first year of COVID-19 in Australia: Direct and indirect health effects](#).
- v Commonwealth of Australia (2023) [The extent of poverty in Australia](#).
- vi Ibid.
- vii Anglicare Australia (2019) [Anglicare Australia Emergency Relief and Financial Counselling Client Survey](#).
- viii Ibid.
- ix Anglicare Australia, UnitingCare Australia (2021) [Raising the Rate of JobSeeker for Good](#).
- x SQM Research (2024) [Weekly Rents: National](#).
- xi SQM Research (2024) [Weekly Rents: Sydney](#).
- xii SQM Research (2024) [Weekly Rents: Melbourne](#).