Private Submission to the Senate Standing Committees on Community Affairs Re: Inquiry Into Home Care Package Delays

INTRODUCTION

As an older Australian, self-funded retiree, and aged care advocate for an organisation that will remain nameless, I am deeply invested in the future of aged care, not only as someone who may one day rely on its services, but as a strong proponent of innovation that enhances wellbeing and independence.

I am particularly passionate about the role that robotics and artificial intelligence (AI) can play in transforming aged care delivery. These technologies are already being trialled in Australia and internationally to support mobility, medication management, companionship, and monitoring.

However, their integration into aged care raises critical questions around privacy, ethics, safety, and workforce impact.

COMMENT

This submission builds on my earlier private submission to the Senate regarding legislation supporting the new Aged Care Act.

That submission focused on the ethical and operational risks posed by AI and robotics in aged care, and recommended safeguards to ensure that innovation serves humanity.

Australia has the opportunity to lead in visionary aged care reform. By embracing AI with foresight and responsibility, we can ensure that every older person receives timely, dignified, and personalised support.

In this current submission, I turn attention to the persistent delays in the allocation and activation of Home Care Packages (HCPs). These delays have significant consequences for older Australians, many of whom are left without essential support for extended periods.

Delays in Home Care Package delivery are symptomatic of a system that is struggling to keep pace with demand and complexity. Artificial Intelligence offers a powerful tool to modernise allocation and coordination, but only if deployed ethically, inclusively, and transparently.

The current system's inefficiencies demand bold reform, and I believe Artificial Intelligence can play a transformative role in addressing these challenges.

The nameless organisation of self-funded retirees (SFRs) that I am a member of, submitted two recommendations to this Inquiry that reference AI:

Dynamic Needs-Based Allocation System
Digital Care Coordination Reforms.

While these recommendations reflect a growing recognition of AI's potential, they were submitted without elaboration due to mixed views among members.

This submission seeks to expand on those ideas and offer a vision for how AI can be responsibly and effectively harnessed to reduce delays and improve outcomes in Home Care Package delivery.

1. On Dynamic Needs-Based Allocation System

AI can be used to develop a real-time, adaptive allocation system that prioritises individuals based on urgency, complexity, and evolving care needs.

Unlike static waitlists, an AI-driven model can:

- o Continuously assess client data to identify changes in health status or risk factors
- o Predict deterioration or hospitalisation risk, enabling proactive intervention
- o Allocate packages based on dynamic scoring rather than chronological order alone

Such systems have already shown promise in other sectors, using reinforcement learning and predictive analytics to optimise resource distribution. For example, AI models used in hospital triage and emergency response have demonstrated improved outcomes and reduced wait times (*Topol, 2019; IBM Watson Health, 2021*).

2. On Digital Care Coordination Reforms

Delays are often compounded by fragmented communication between providers, clients, and government systems. AI-powered digital platforms can:

- o Automate scheduling, documentation, and follow-ups
- o Integrate data across health and aged care systems for seamless coordination
- o Provide real-time dashboards for clients and carers to track progress and flag issues.

Platforms such as Aidoc and CarePredict have shown how AI can streamline workflows, reduce coordinator burnout, and improve patient outcomes through intelligent automation and predictive insights (CarePredict, 2022; Aidoc, 2023).

As outlined in my earlier submission, the deployment of AI must be accompanied by robust safeguards based on the following principles which align with international best practices, including those outlined by the World Health Organization's guidance on AI ethics in health care (WHO, 2021):

П	Ethical and Safety Standards: National guidelines must govern AI use in aged care, ensuring
_	privacy, dignity, and human oversight
	are essential
	Transparency and Accountability: Systems must include audit trails, adverse event reporting,
	and redress mechanisms
	Inclusive Design: Technologies must be accessible to older adults with diverse cognitive and
	physical needs

RECOMMENDATIONS:

I urge the Committee to consider these expanded recommendations and to embed AI not as a speculative future, but as a strategic solution to the Home Care Package delays.

Below is a reiteration of recommendations in my earlier submission.

These recommendations have been informed by research conducted with the assistance of artificial intelligence (AI) and reflect a commitment to ethical innovation and inclusive design.

- 1. **Embed Future-Proofing Mechanisms** Introduce provisions for periodic review and amendment of the Aged Care Act to respond to emerging technologies. This ensures the legislation remains relevant and adaptive.
- 2. **Establish Ethical and Safety Standards for AI and Robotics** Mandate the development of national standards governing the use of AI and robotics in aged care. These standards should safeguard privacy, autonomy, and human dignity, ensuring that technology complements—not replaces—human care.

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- 3. **Address Workforce Impacts** Recognise the potential for automation to reshape the aged care workforce. Include provisions for workforce transition, training, and protections against displacement, ensuring that technology enhances rather than undermines care roles.
- 4. **Ensure Transparency and Accountability** Introduce mechanisms for oversight, including mandatory reporting of adverse events involving AI or robotic systems, and clear pathways for redress in cases of harm or malfunction.
- 5. **Promote Inclusive and Accessible Design** Require that any technology deployed in aged care be designed with the cognitive, physical, and emotional needs of older adults in mind. Legislation should mandate user testing and accessibility standards to prevent exclusion or harm.

Respectfully submitted by:

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References:

Aidoc. (2023). AI-powered clinical workflow solutions. Retrieved from https://www.aidoc.com
CarePredict. (2022). AI-driven elder care platform. Retrieved from https://www.carepredict.com
IBM Watson Health. (2021). AI in healthcare: Improving outcomes and efficiency.
Topol, E. (2019). Deep Medicine: How Artificial Intelligence Can Make Healthcare Human Again
Basic Books.
World Health Organization. (2021). Ethics and governance of artificial intelligence for health.
Retrieved from https://www.who.int/publications/i/item/9789240029200