

Senate Community Affairs References Committee Aged Care Service Delivery Inquiry

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Your Side Australia Ltd
ABN: 87 309 151 625 | ACN: 614 403 039
Level 10, 10 Help Street Chatswood NSW 2067
T: 1300 134 332 | E: info@yourside.org.au

YOUR SIDE AUSTRALIA SUBMISSION

Your Side Australia welcomes the chance to contribute to the inquiry into the delayed rollout of Support at Home and the withholding of new Home Care Packages.

While we understand the Government aims to implement reforms responsibly, we are concerned about the immediate negative effects these delays have on older Australians, their families, health systems, and aged care providers in Greater Sydney.

Executive Summary

The delay in implementing the Support at Home program until 1 November 2025 will extend hardship for older Australians, increase pressure on carers, and strain aged and health care providers, hospitals, and the workforce. While we acknowledge the need for reform readiness, the sector requires urgent interim measures to protect older people's safety, wellbeing, and independence during the transition.

We call on the Government to:

- Address immediate unmet need: Expand CHSP flexibility and funding to support those on CHSP & HCP waitlists.
- Boost sector capacity: Provide one-off capacity-building grants, especially in areas such as technology and automation freeing up labour to deliver care where it's needed in place of increasing administration and regulation.
- Reduce hospital strain: Fund or boost targeted hospital-to-home transition programs ensuring that older people are able to receive care upon transition through quality case management services in addition to care services.
- Strengthen governance: Establish an independent digital assurance panel to oversee IT readiness of My Aged Care, Services Australia and publish progress reports.
- Stabilise providers: Confirm interim funding and service arrangements in advance to enable business and workforce planning.
- Stay on track for 2027 waitlist reduction targets: Implement staged roll-outs, and continual process improvements by consulting with wide ranging provider representatives to cut wait times.
- Enhance the assessment system: Expand the assessment workforce in the short term to reduce access blocks.

- Ensure equity and communication: Co-design a clear public communication strategy and address specific needs of Aboriginal and Torres Strait Islander Elders, culturally diverse communities, and those in rural and remote areas.
- Further Grant options to assist providers with the escalating transition costs, especially costs associated with digital transformation to be ready from 1 November 2025.

Without these measures, the delay risks worsening unmet care needs, reducing quality of life for older people, and undermining public confidence in aged care reform and trust in providers. With decisive action, however, the sector can protect vulnerable Australians while laying the groundwork for a timely, safe, and person-centred transition to Support at Home.

Introduction

Your Side Australia is an approved aged care provider of aged care services across Greater Sydney, including the Commonwealth Home Support Programme (CHSP) and Home Care Packages (HCP). We work closely with older Australians, carers, and health partners, and see first-hand the impacts of policy change and delay. In our sector support capacity, we also have unique insights into reform readiness of other providers, and general confidence of Support at Home, and the transition from older people from Home Care Packages.

While we recognise the complexity of implementing the Support at Home program, the announced delay of releasing 83,000 packages to 1 November 2025 risks prolonging avoidable hardship for older Australians and creating unintended strain on carers, community and health systems. Our submission addresses the scope of the Term of Reference and offers practical recommendations to minimise harm and keep the goals of the Aged Care Royal Commission and subsequent aged care reform goals on track.

Our response includes the experience of older people that we support who are waiting for a package to be assigned and those with a package that is inadequate their care needs.

Response to the Terms of Reference

(a) Impact of the delay on older Australians

There are an estimated 87,500 older people waiting for some level of funding to receive support to remain living at home. This number is projected to climb to over 100,000 by the end of the calendar year. To note, there are additional older people waiting to access CHSP services but are locked out due to funding ceilings. These numbers are not available to comment on, but our own experience in responding to queries from older people is that unmet care needs are significant.

Older people on waitlists miss essential daily supports like personal care, social assistance, transport to appointments, and home modifications. In the meantime, they depend heavily on GPs and family carers, mainly women, who cut work hours and face financial strain. Without early intervention, health declines faster, leading to earlier entry into costly residential care compared to in-home support.

Prolonged waits reduce trust in care systems, increase fall risk, harm independence, and lead to social isolation. Older adults experience unnecessary frustration due to poor communication from My Aged Care and must repeatedly seek clarification on package allocation wait times, often receiving vague indicators such as 3-9 months wait, which are commonly still not met. Your Side offers free aged care navigation for waitlisted people to minimise the emotional turmoil of the current system, but this service cannot be sustained long-term. This gives us a unique perspective in observing physical and psychological decline of older people while waiting for an assigned package.

Delays extend periods of unpaid, intensive support, increasing carer burnout and financial strain. Given that carers are disproportionately women, this has long term implications on financial independence due to reduced paid work, increased costs associated with mental and physical wellbeing. Carer Gateway was established to support carers, however carers continue to report time limited supports delivered only in periods of crisis that only just sustains them in their carer role.

Client Story:

CHSP client Denise* was assessed for a Home Care Package Level 4 on 19/02/2025 and is currently subject to a 9-12 month waiting period as of 15/08/2025. Despite experiencing significant health challenges and a decline in independence, she has been assigned a medium priority status on My Aged Care (MAC). The client is a 68-year-old woman with a recent diagnosis of Motor Neuron Disease, which is progressing rapidly and contributing to considerable functional decline. She utilizes a motorized wheelchair and experiences substantial mobility limitations. At present, she receives Domestic Assistance through Your Side.

The client's daughter has formally requested additional service hours due to concerns regarding home safety and hygiene, noting that the client is unable to manage dropped items or address household spills. For instance, a recent incident involving spilt milk remained unattended on the kitchen floor for two weeks, resulting in both odour and a potential slip hazard.

Efforts have been made by both CHSP and the Care Finder program to escalate the client's needs to MAC to expedite access to her Home Care Package, with the aim of preventing further deterioration that may necessitate transition to permanent residential or hospital care.

Client Story:

George* was assigned a Level 2 HCP but approved Level 3 funding.

While waiting for his Level 3 HCP, he had increased falls and his health deteriorated, leading to wounds and infections which required additional medical attention and resulted in hospitalisation.

Due to lack of funding, he still prioritised his care resulting in financial hardship paying out of pocket for extra essential services to continue.

Upon his last hospital visit he chose to self-discharge against medical advice and due to lack of funding, no additional services could be put in place. George was found deceased by natural causes 10 days post discharge.

Client Story:

Brian*, aged 85, lives at home with his spouse, Lynne*, who serves as his primary carer. Brian has Parkinson's disease and dementia and requires assistance with personal care due to severely reduced mobility, low vision, and dual incontinence. He uses a wheeled walking frame indoors and a wheelchair in the community.

Despite Brian's significant care needs, delays in the allocation of appropriate Home Care Packages have placed considerable strain on his household. After approval for a Level 4 Home Care Package, Barry was informed that only interim Level 3 funding would be available, with an expected wait time of up to six months for the full package assignment. During this period, care arrangements were complicated by the suspension of CHSP services when Lynne admitted Brian to respite care, necessitated by his increasingly disruptive overnight behaviour.

Throughout this process, Your Side maintained ongoing support for the family, including advising their daughter, Melanie*, on Income Tested Care Fee assessments and explaining HCP provider fees. The complexity of navigating the system and the prolonged wait for suitable care funding left the family feeling overwhelmed and under-supported.

As of mid-August 2025, nearly nine months after initial approval, Brian's higher-level care package remains unassigned. The family continues to manage his complex needs amidst uncertainty and insufficient funded support.

Client Story:

Sunny,* a 71-year-old woman from China, struggles with mobility due to a knee condition and relies on her spouse Jeremy,* who manages their care and communicates with aged care services. With limited English, Sunny depends on Jeremy for navigating the system, but delays and communication issues led to the cancellation of her initial assessment. Your Side Aged Care Support and Navigation service assisted in updating records and resubmitting the application, resulting in approval for a Level 2 Home Care Package, along with a three to six month wait.

Jeremy's own poor health complicated matters, and technical difficulties with government portals further delayed progress. Despite ongoing help from Your Side, including assistance with service counters and technical support, eight months after renewing their application, Sunny still has no assigned funding. Even once approved, the Level 2 package will not fully meet her needs, which include home modifications, mobility aids, and allied health services.

Recommendation 1: Release additional packages to those eligible for higher level packages but are receiving lower packages, so that the recommendations of the Royal Commission can start to be realised.

Recommendation 2: If the government is unable to release additional packages due to administrative inconvenience with Support at Home transition, urgently expand CHSP to experienced, high performance CHSP providers, for low level care to meet interim needs for those on HCP waitlists.

(b) Capacity of CHSP to meet increased demand before 1 November 2025

CHSP operates at or near capacity under its current funding model but remains a cost-effective aged care solution, with support costing less than \$70 per consumer per week compared to \$387 for Home Care Packages and over \$1,000 for residential care. It enables older Australians to stay in their homes by providing essential, tailored support, fostering social connections which are crucial to an individual's physical and psychological wellbeing and delaying need for more intensive clinical care or residential care. CHSP is for entry level supports, however due to delays in assigning packages often supports older people with higher clinical needs. This can present clinical risks without proper clinical governance systems in place.

Your Side can scale CHSP delivery across Greater Sydney through its integrated network of 100 regularly assessed providers. We have a waitlist of older people waiting for supports and a ready workforce acquired through detailed demand driven workforce planning to meet demand.

Client Story:

Mary and Jim* are an elderly couple grappling with complex health challenges. Mary was diagnosed with terminal pancreatic cancer in December 2024, just as she was caring for Jim, who has advanced dementia. Jim was approved for a Level 4 HCP, however was moved to respite care while Mary underwent cancer treatment. Jim was later transferred to residential care, never returning home, as both waited for their packages to be assigned. Jim never used his HCP 4, when it was eventually assigned.

Despite Mary's prognosis being 1-2 years, she was approved for a Level 2 HCP with a 6-9 month wait. With advocacy, Mary applied for and was assigned a Level 4 HCP, and she is currently accessing transport, physiotherapy, cleaning, and personal care.

Mary struggled with the loss of her caring role for Jim and insufficient funding for his needs, as well as the pain and grief of her own diagnosis.

Client story:

Helen* is an 85-year-old part-pensioner living alone in a retirement community. Helen, who has diabetes and dementia, relies on her three adult children to coordinate her care. Her daughter, Jill,* initially believed Helen was receiving services through a Level 2 Home Care Package. However, after seeking clarification from Your Side's Aged Care Support and Navigation service, it was discovered Helen was only accessing Domestic Assistance and Personal Care via the Commonwealth Home Support Programme (CHSP), despite the approval for a Level 3 Home Care Package due to cognitive decline.

Jill requested a reassessment for a higher care package, citing Helen's deteriorating condition and dissatisfaction with her CHSP provider. The family's attempt to change providers was unsuccessful due to CHSP funding caps, and they remained concerned about the 9-12 month wait for the Level 3 package to be assigned.

Your Side maintained regular contact with the family, advising them on interim measures, including private services and options available through the retirement community, and guided them through the Income Tested Care Fee assessment. They also recommended pursuing a clinical review and applying for a dementia supplement once the package was assigned.

As Helen's condition continued to decline, Jill and her siblings made repeated requests to have the care package assigned earlier, and received confirmation that Helen was coded for nursing, social support, residential care, and respite. During this period, the family faced significant care gaps, including the lack of qualified nursing staff to manage Helen's diabetes medication, following the departure of the facility's nurse.

Transport provided by the retirement community was not suitable for Helen's needs, further complicating her access to essential services. Despite ongoing advocacy from Your Side, delays persisted; the aged care assessment team indicated a further 3-6 month wait for reassessment and upgrading of the care package.

While the family organised a community nurse to assist with medication and considered flexible respite services through CHSP, satisfaction with available care options remained low.

As of mid-August 2025, nearly nine months after reassessment, Helen's higher-level care package remains unassigned. The family continues to manage her complex needs with insufficient funded support.

Recommendation 3: Provide additional funding across CHSP providers to provide early intervention low level of services which is evidenced to be lower cost when compared to Home Care Packages and Residential Care.

(c) Impacts on aged care service providers and workforce

Business planning for Home Care providers has become increasingly difficult due to persistent uncertainty. The new Aged Care Act, now scheduled for implementation on 1 November 2025, has faced several delays:

- i. Originally planned for 1 July 2023
- ii. Postponed to 1 July 2024
- iii. Further delayed to 1 November 2025

Unclear client assessment models, fluctuating approach to pricing, evolving compliance requirements, and unclear IT specifications have all complicated reform planning throughout the last four years. Additionally, providers must contend with retaining skilled staff in the absence of clearly defined roles and iterative service modelling under the new system, while continual reform delays restrict investment in innovation.

Home Care Packages are designed to be consumer directed, allowing individuals to select their provider and transfer packages as needed. This increased competition is intended to enhance care quality and service access. However, the home care sector operates in a government-regulated, non-traditional market where restrictions on volumes, locations, and distribution create commercial risks for providers. These risks discourage investment and innovation, especially with ongoing delays in releasing additional packages, ultimately resulting in negative outcomes for older people, such as reduced access to improved care options.

Recommendation 4: Confirm interim funding and service arrangements for providers ahead of program changes to support workforce stability and investment.

(d) Impacts on hospitals and health systems

Prolonged delays in accessing appropriate home care services impose significant financial and systemic pressures on hospitals. Hospital admissions for individuals who could otherwise be supported at home tend to incur higher costs, as acute inpatient care necessitates intensive staffing, specialised equipment, and continuous allocation of resources. In addition to these economic implications, extended hospitalisation can adversely impact patients' psychological well-being, often leading to increased anxiety, depression, and isolation particularly among older adults separated from their familiar environments, communities, and support networks. The associated loss of autonomy and disruption of established routines may further hinder recovery and overall health outcomes.

These challenges extend beyond individual patients and have broader repercussions for the healthcare system. Hospitals operate with finite capacity and resources; each avoidable admission or delayed discharge occupies bed space and diverts staff attention from other patients in need. As a result, individuals requiring urgent medical intervention, such as those presenting to emergency departments may experience prolonged wait times, treatment delays, and, in some instances, adverse health outcomes. This bottleneck places additional strain on healthcare professionals and diminishes the efficiency and effectiveness of the entire health system, underscoring the critical importance of timely and accessible home care solutions to alleviate pressure across all levels of care.

While insufficient funding is not the sole factor, hospital capacity is substantially affected by older patients who are unable to return home or access aged care services. For example, in New South Wales (NSW), as of July 2025, more than 1,600 aged care and NDIS patients remained in public hospitals, with 1,131 exceeding their estimated discharge dates and accounting for 58,154 blocked bed days. Elderly patients in NSW were, on average, hospitalised five weeks longer than anticipated due to delays in securing aged care or home supports. These figures illustrate the considerable bottleneck that arises when suitable aged care or home care options are unavailable.

Client Story:

Rona* was assigned Level 1 HCP support but approved for Level 3. She has chronic illnesses, a diagnosed mental health condition, cancer, and no informal support. With only 2 hours of cleaning and medical assistance per fortnight, limited support led to six hospitalisations in two months. Continued health decline was persistently reported by the hospital and Your Side, eventually resulting in a Level 3 package assigned.

Recommendation 5: Establish targeted hospital-to-home transition programs to bridge the gap for patients awaiting home care services.

(e) Feasibility of achieving the 3-month wait time target by 1 July 2027

The delay compresses the time available to implement, review and adjust reforms, risking an even greater rush in the lead-up to 2027. Achieving the target will require:

- Accelerated recruitment and training of assessors and care workforce.
- Parallel testing and refinement of digital and operational systems before go-live.
- Interim process improvements to reduce current waitlists.

Equally, it is expected that CHSP will start to transition from July 2027 to Support at Home. That means that providers will have a dual responsibility; to advise and support CHSP clients to Support at Home, where there will be increased client co-contributions as well as ensure it has a workforce supply to meet demand of additional older people needing home care. Inventive business models will be critical to meet those two priorities, which should not be hampered by increasing regulation.

Care management services are crucial because care managers have the expertise to help clients navigate not just aged care, but also related systems like health, housing, income support, and preventative services, enabling earlier intervention and reducing demand on aged care, yet this service is under threat under Support at Home.

Client Story:

Rosemary* has been assigned a Level 2 Home Care Package (HCP), and her request for reassessment to a higher level was declined as her current services were not considered essential.

Her care requirements increased significantly when her husband, who had previously provided assistance and support, experienced a notable decline in health and transitioned into permanent care, leaving Rosemary without informal support.

Furthermore, with her husband entering permanent care, Rosemary faced the risk of homelessness because their shared apartment was being sold. Your Side, collaborating with Senior Rights, advocated for an upgraded care package to address her changed circumstances and increased care needs. Currently, she is unable to contribute financially to her care due to the expenses associated with relocating. The decision regarding her application remains pending with My Aged Care.

Rosemary has been connected with legal professionals to assist her in securing accommodation, financial support, and other legal matters. As a result, she has successfully found a new residence and is scheduled to move in on Wednesday.

Your Side and Senior Rights continue to monitor and follow up on her need for additional support services.

Recommendation 6: Implement a staged roll-out from mid-2025 to test systems regionally before national launch, allowing refinement without full program disruption.

Recommendation 7: Utilise efficient care management models to support older people waiting for funding, to access adjacent and supporting services available outside of the aged care system.

(f) Adequacy of governance, assurance, and accountability for digital transformation

Sector confidence in the IT build is limited due to a lack of transparent progress reporting and minimal user testing opportunities. Risks include:

- Further delays if milestones are missed.
- Data migration errors impacting client safety, provide efficiency and understanding by older people and their families.

Recommendation 8: Appoint an independent digital assurance panel with authority to publish quarterly progress updates and risk reports.

(g) Implementation of the single assessment system

The vision for a single, streamlined assessment system is widely supported; however, significant concerns persist regarding the consequences of a rushed and disruptive rollout combined with insufficient communication and inadequate workforce training. Rapid implementation without careful staging risks overwhelming both assessors and providers, potentially leading to confusion, errors in assessment, and inconsistent application of eligibility criteria. Such disruption may cause a sharp increase in wait times for assessments, leaving older people and their families in limbo, unable to access timely support or plan ahead with confidence.

Poor communication from government about the new assessment model has left home care providers uncertain about expectations and processes. This lack of clarity undermines provider preparedness, reduces sector confidence, and can result in misinterpretation of new requirements, providing inaccurate advice to older people, inadvertently compromising client safety and quality of care. Additionally, uneven workforce training coupled with high assessor turnover means that assessors may lack the necessary skills or up-to-date information to deliver accurate and equitable assessments.

If IT platforms for assessments are not refined and properly communicated to users in advance, technical issues can further compound these problems, resulting in data entry errors or system outages that disrupt service continuity. In the absence of adequate surge capacity and robust support mechanisms, the system risks becoming backlogged and dysfunctional, disproportionately affecting vulnerable groups and heightening inequities across the sector.

Recommendation 9: Increase funding for interim assessment workforce expansion and ensure full system user-testing with providers and assessors.

(h) Other related matters

Equity concerns: Aboriginal and Torres Strait Islander Elders, culturally and linguistically diverse seniors, and those in remote areas face disproportionate impacts from delays.

Communication inconsistencies about reform have caused confusion for clients and carers. Older people ask providers for clarification, but both rely on the same limited information, resulting in varied interpretations and sometimes inaccurate advice. Detailed operational questions raised during webinars go unanswered, and government communication continues to be vague.

The Transition Taskforce mainly reflects the perspectives of large providers, giving them an advantage in readiness and advocacy, but does not represent smaller NFPs or private businesses. Communication to the taskforce often goes unanswered, and its meetings rarely include those with frontline or direct experience with older people.

Recommendation 10: Establish a dedicated communication strategy co-designed from a diverse representation of older people, carers, workers and providers to ensure clarity and build trust. This must include older people and workers from Aboriginal and Torres Strait Islander communities and people with English as a second language.

3. Conclusion

The delay in Support at Home implementation creates real risks for older Australians, carers, and the systems that support them. However, with targeted interim measures, robust governance, and transparent progress monitoring, the sector can maintain momentum and protect vulnerable clients while preparing for the long-term benefits of reform.

Your Side stands ready to work with Government, the Department of Health, Disability and Aged Care, and sector partners to achieve a system that is timely, human rights centred, and sustainable.

Contact:

Danielle Ballantine

E: customercare@yourside.org.au

P: 1300 134 332

W: www.yourside.org.au