



The Myer Foundation 2020: A Vision for Aged Care in Australia Outcomes Review

Prepared for The Myer Foundation
on behalf of the Brotherhood of St Laurence by

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Brotherhood
of St Laurence

Working for an Australia free of poverty

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Foreword

It is now ten years since The Myer Foundation launched its benchmark study, 2020: A Vision for Aged Care in Australia, led by Professor Len Gray. We both were honoured to be asked to be patrons for the project.

During the past decade, the aged care issue has largely dropped off the radar screen for governments and philanthropic bodies, including The Myer Foundation, and been replaced by issues considered more pressing such as education, the environment, climate change and the arts, amongst others.

The 2020 Vision Report outlined and reviewed all the important issues in the aged care area and made recommendations which were and remain relevant. In this sense, it was a successful project and certainly the Report continues to be a very useful document. In terms of implementation, it has been much less successful. There has been some progress, but in many important areas there has been no action.

Gary Banks' comment quoted on page 8 seems to summarise why: 'policy decisions will typically be influenced by much more than objective evidence, or rational analysis. Values, interest, personalities, timing, circumstances and happenstance – in short, democracy – determine what actually happens'.

The launch of the Brotherhood of St Laurence's 2020 Vision Outcomes Review could not be more timely. Australia's population will reach 35 million in 40 years, 7 million more than had been anticipated. Following a rising birth rate and rapid migration almost doubling the rate of population growth, the larger population will be younger, on average, than was expected on forecasts only two years ago. However, the percentage of people aged 65 and over will jump from today's 13% to 22% by 2050.

Governments are always faced with many more demands for action in a large number of areas than they can actually accomplish. What gets done, and in what areas, depends largely on where the pressure to act is greatest.

The research and review and the economic analysis that led to the recommendations of the 2020 Vision Report were done by first-class professionals. The task of having the recommendations implemented needs to be tackled by equally able professionals in the different areas influencing public opinion and marketing. There has to be a clear plan of action implemented persistently over a lengthy period. The focus has to be on getting things done. This needs single-minded management. We question whether philanthropic organisations could agree on such a plan of action and accept the leadership of one of them to carry it out. It may be more appropriate for such follow-up to be done under the auspices of lobby groups such as the National Seniors Australia, the Council on the Ageing or the Brotherhood of St Laurence with philanthropic organisations helping to provide resources and participating in specific parts of the follow-up activity that appeal to them.

Congratulations to Brotherhood of St Laurence for the Review and to the Directors of The Myer Foundation for initiating it.

Baillieu Myer AC

Sir Arvi Parbo AC

Acknowledgments

We would like to thank all the people who agreed to be interviewed for the project and gave generously of their ideas and time. Their contributions have been central to understanding the impact of The Myer Foundation 2020: A Vision for Aged Care in Australia and the challenges associated with striving to influence complex policy issues. They have also made important contributions to gaining insights into the potential opportunities for future philanthropic engagement in the ageing area.

Acronyms

ACSA	Aged & Community Services Australia
AHMAC	Australian Health Ministers Advisory Committee
AHURI	Australian Housing and Urban Research Institute
ARC	Australian Research Council
COAG	Council of Australian Governments
COTA	Council on the Ageing
HACC	Home and Community Care
NHMRC	National Health and Medical Research Council

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The Vision

Reform of Australia's aged care system is the key to meeting the care needs of a growing population of older Australians in 2020. By then, we want older Australians to be confident they can access the care and support they need, when they need it.

Aged care services will reflect the fundamental changes in the nature of the Australian population, in which one in four older Australians will be from culturally diverse backgrounds.

From 2020, we hope older Australians will find it easy to access care. Effectively coordinated services by all levels of government will make it simpler for older people to know what services are available and how to access them.

More Australians will be living in their own homes as they age, supported by dramatically improved community care services and more 'age friendly' housing.

There will be more housing options for older people. Modifications to building design and advances in new technology will ensure that the physical environment accommodates people with disabilities. Cluster housing arrangement, often close to amenities, will enable people to have safe, manageable environments within the general community.

The coordination of care will be fundamentally reformed, with clear responsibilities for each tier of government within a national framework. Resources will be distributed equitably across regions, with local flexibility to adjust the mix of community, hospitals and residential services. This will be made possible by unprecedented co-operations between governments and among providers across the private (for profit), charitable and public aged care sectors.

Extensive reforms will have been achieved in community care. This well resourced and vibrant sector will be a cornerstone of Australia's aged care services and will provide a viable, flexible and robust network of care that enables older people to live independently in their own homes as they age. The value and importance of voluntary care for older Australians will be acknowledged and built into the way services are developed.

An integrated network of services that meets the changing needs of individuals will have replaced the existing funding decisions and classifications that separate residential from community care, and high from low-care. Accessible respite care will be a key feature of aged care services and will complement an expanded community care network. This will prolong the ability of older Australians to care for themselves in their own homes and delay permanent entry to high-level residential care wherever possible. Acute hospitals and community-based services will work closely together and a range of post-discharge services will ensure safe transition from hospital to home.

Funding for aged care services will be reformed, with additional revenue streams for financing a robust and integrated range of aged care services. Financial reform within a framework of social equity will provide clear provisions for quality services for older Australians without adequate financial resources. Access to care will be determined by assessed need and level of dependency, not ability to pay or service availability.

People working in the aged care sector will not be financially disadvantaged and will enjoy wage parity with Australia's broader health and welfare workforce. There will be more investment in aged care education, which will be seen as an attractive field in which to work as part of a committed, enthusiastic and well-trained workforce. Many older people, who in previous decades might have retired, will participate in care giving in both voluntary and paid roles, often part time.

The 2020 Vision for Aged Care will be achieved through targeted research, policy coordination, political goodwill and sector development that will ensure the viability, effectiveness and continuous improvement of Australia's aged care system beyond 2020.

(The Myer Foundation 2020: A Vision for Aged Care in Australia, pp.5–6)

I Introduction

1.1 The Myer Foundation 2020 Vision project

In 2001, The Myer Foundation made a decision to allocate \$1 million from the Sidney Myer Fund for a special program – the development of a vision for the future of aged care in Australia. The project commenced in November 2001, concluding some three years later, with most project activities occurring in 2002 leading up to the release of the project report *2020: A Vision for Aged Care in Australia* (hereafter referred to as the 2020 Vision report). The project involved many perspectives in aged care and sought to inform the vision with sound research, debate and reflection involving key experts and stakeholders. The project had two high profile patrons – Mr Baillieu Myer AC and Sir Arvi Parbo AC.

Through the 2020 Vision project, The Myer Foundation set out to imagine what aged care services would best support the journey that Australians took into older age across the next two decades. It was the hope of The Myer Foundation that the unique independence and connections it enjoyed as a philanthropic foundation would enable fearless exploration of new ground and bring all sectors to the discussion table.

The development of the Vision 2020 report was informed by discussion and debate at a major two-day think tank forum held at Cranlana, Victoria, in July 2002 involving senior key industry leaders. To stimulate and inform this forum and support development of the project report, ten background and research papers by eminent experts and researchers were commissioned.

In addition, following the release of the report, The Myer Foundation Vision 2020 project funded a number of other initiatives in order to promote the issues raised in the report and continue to contribute to the debate. These initiatives included:

- Funding a National Community Care Summit held in Canberra in July 2003, jointly hosted with Aged & Community Services Australia (ACSA)
- Funding a conference on housing and ageing in November 2003 in association with the Australian Housing and Urban Research Institute (AHURI)
- Funding research demonstration projects (Municipal Association of Victoria, Australian College of Health Service Executives)
- Funding research into the availability of carers by Carers Australia and jointly supported by the Brotherhood of St Laurence (Percival R and Kelly S, 2004)
- Implementation of a community care awareness project in 2004 with ACSA and a national 16 member community care coalition
- Forming an alliance of philanthropic bodies resulting in the establishment of an Aged Care Affinity Group under the Philanthropy Australia umbrella.

In the foreword to the 2020 Vision report, Lady Southey, the President of The Myer Foundation, writes of a journey

inspired by a Vision that the best possible care should be provided for ageing Australians who need it ... instead of prescribing a single path forward, we identify a range of options that we hope will trigger an informed and constructive discussion about the future of aged care in Australia ...

The foreword concludes with the hope that the project ‘leads to timely decisions on how to meet the future needs of aged care in Australia’.

As summarised in The Myer Foundation media release for the launch of the *2020: A Vision for Aged Care in Australia* report, the key reforms identified in the report's Five Point Plan are:

- Substantially reforming and expanding community based care, so older Australians can live in their own homes as long as possible as they age
- Strengthening the financial base and identifying new funding streams to finance a more robust system by 2020. This includes:
 - Separating funding for the accommodation, hotel (or living) and care components of aged care services
 - Increasing public resources to fund high-quality care services and
 - Identifying new short and long-term sources of funding for aged care services
- Streamlining the administration of care, so that government responsibilities for health and aged care programs are aligned to increase accountability, optimise planning and ensure efficient care delivery
- Innovative, accessible housing arrangements and community infrastructure need to be developed to minimise the impact of illness and disability on people's living arrangements and to promote the delivery of community services to support people at home
- Developing an aged care industry plan to underpin a strong provider network to deliver quality care.

The 2020 Vision appears on page iv of this report and details of its Five Point Plan are shown in Section 4.

1.2 The Outcomes Review Project

The Myer Foundation has funded the Brotherhood of St Laurence to undertake a review of the outcomes of the Vision 2020 project in order to identify lessons from the project for future philanthropic projects and for influencing policy change. The key priorities for the Outcomes Review project are as follows:

1. Review the processes undertaken as part of The Myer Foundation Vision 2020 project and the impacts of the report since its release.
2. Identify the learnings from the project in regard to process and policy outcome issues to inform The Myer Foundation and the broader philanthropic sector.
3. Identify the impact of the project on thinking in the philanthropic sector in regard to ageing and aged care.
4. Propose an agenda to progress the outstanding issues of The Myer Foundation Vision 2020 report, taking into account the lessons learnt from this project and changes to the policy context.

1.3 The Brotherhood of St Laurence's interest in ageing issues

The Brotherhood has a long history of involvement in heightening awareness about the circumstances and needs of older people. This is an integral part of working towards its vision and in working with others to create:

- an inclusive society in which everyone is treated with dignity and respect
- a compassionate and just society which challenges inequity
- a society in which all create and share prosperity, and share responsibility for each other
- a sustainable society for our generation and future generations.

Through its Research and Policy Centre, the Brotherhood of St Laurence works to improve and promote understanding of retirement and ageing issues. It is engaged with the national agenda on issues such as reform of the retirement income system, the adequacy of the aged care pension,

increased choice and control for older people requiring community care, and social inclusion of older people. Work on these diverse areas associated with population ageing provides the Brotherhood with the background to undertake The Myer Foundation 2020 Outcomes Review Project.

1.4 Methodology

The review has involved interviewing 25 people who are experts in their field and have diverse insights into the influence of The Myer Foundation 2020 Vision project, the developments and issues in ageing and aged care, and processes for influencing policy. A range of documentation has also been examined to identify indications of progress towards the achievement of the Vision set out in The Myer Foundation 2020 Vision report.

1.5 Structure of report

Following the introductory section which provides background information to the project, Section 2 of the report outlines a context for assessing the impact and learning of the 2020 Vision project. It examines the key elements of the 2020 Vision project and the developments occurring in aged care and comments on some of the challenges of assessing impacts on policy development.

Section 3 summarises the evidence used to assess the degree of progress towards achievement of the Vision set out in the 2020 Vision project and outlines the conclusions reached about the degree of progress that has been made. Section 4 provides a more detailed analysis of progress on each of the areas of the Five Point Plan.

Section 5 outlines the conclusions of the review of the impact and learning from the 2020 Vision project. It draws on the findings of an earlier review and outlines the conclusions reached about the influence of the 2020 Vision project looking back across six years. A number of broad insights and conclusions are also outlined.

Section 6, the final section of the report, outlines a proposed agenda to progress outstanding issues. It outlines a number of ways in which philanthropic organisations can continue to play a key role in influencing and improving future responses to ageing issues. A range of more specific project ideas for funding are also outlined.

2 A context for assessing the impact and learning

Any judgement about the impact of the Vision 2020 project and assessment of what has been learnt must be made with a clear understanding of the various elements of the project as well as the context in which the project was being undertaken. This section of the report sets out key information about these aspects.

2.1 Key elements of the 2020 Vision project

The key elements of the 2020 Vision project can be grouped as follows.

Documenting the issues, ideas and evidence

The project assembled a range of discussion papers addressing the major issues likely to influence aged care and to a lesser degree the broad issues of community ageing over the next 20 years. Specific research was also commissioned to provide more detailed understanding of a number of areas. These discussion papers and research reports had credibility as they were prepared by leaders in the field and provided diverse perspectives and insights into the issues of ageing and aged care.

Facilitating more neutral and broadly based forums for discussion and debate

Engaging all key stakeholders in discussions and thinking about the issues confronting Australia around aged care and ageing was an important aspect of the project. The project created a forum where the experts met with opinion leaders from government, industry, providers and consumers to consider the principles, policy and program directions that would best address the issues raised. With The Myer Foundation facilitating this process, the participants were more equal and the forum for discussion more neutral than often occurs when either government or peak interest bodies convene forums or discussions. Forums convened by The Myer Foundation were seen as events not to be missed and the seniority and calibre of people attending the July 2002 Cranlana workshop in particular is testament to this view.

Documenting a vision

The 2020 Vision report brought together a number of aspects of the background and research papers. It spelt out a future vision for a new experience of support for older people and how the system would need to be operating to enable this vision to be achieved. At the time this was a different way of presenting the issues. The Five Point Plan outlined the types of actions considered necessary to achieve the Vision and set some benchmarks/indicators for assessing progress.

New and widely respected champions entering into the debate

The project had two high-profile patrons as well as the sound reputation of The Myer Foundation underpinning it. This opened new doors of influence and captured attention as it was not just the standard voices making comment or seeking to influence politicians' thinking on the issues. It added 'status' and profile to the issues of aged care and ageing.

Maintaining a presence in and influence on the debate

After the release of the 2020 Vision report, The Myer Foundation continued for another two years to fund and collaborate with selected key national industry leaders in two areas, community care and housing, with the larger investment in the area of community care. This involved working with ACSA (which was working on behalf of a wide coalition of interest groups) to continue to raise the need for reform to community care with, amongst other things, two key strategically timed forums in Canberra to attract the attention of government. An important conference on housing and older people was also jointly sponsored with the AHURI, the most prominent specialist housing research organisation in Australia.

2.2 The context in which the project was undertaken

Across the 1980s and 1990s there had been an increasing awareness of population ageing and the need for improved efficiencies in the financing and delivery arrangements of residential and community care services for older people and there had been a series of reforms (Kendig H and Duckett S, 2001). The first years of the 21st century saw a number of initiatives by government to respond to increasing concern about the operation of aged care services in the light of expanding community need and expectation and ongoing concerns about existing services and resource levels. At the same time, industry and consumer peak bodies were becoming more vocal and organised in raising their concerns about aged care services.

In the lead-up to the November 2001 national election, a wide range of peak bodies formed the National Aged Care Alliance to lobby for increased funding and improved services for older people. For the first time aged care emerged as a central election issue and the Labor Party included aged care as one of a trio of social issues along with health and education (Kendig H and Duckett S, 2001 p. 46).

The Minister for Ageing at the time, Kevin Andrews, released a *National Strategy for an Ageing Australia* in October 2001, just prior to the election. This strategy was based around four key themes: independence and self provision; attitude, lifestyle and community support; healthy ageing; and world-class care.

The Myer Foundation 2020 Vision project was established in the midst of this increased awareness and political interest in aged care and ageing issues. Following on from the growing recognition of the need for change in response to ageing and aged care issues, other developments occurred in 2002 alongside the work of The Myer Foundation 2020 Vision project. A main development was that in 2002 a coalition of professional bodies, consumer groups and disability, aged and community care industry groups came together and developed a discussion document, *A Vision for Community Care*. This document, which was released in August 2002, built on earlier work undertaken by ACSA. It was known that in response to the work of ACSA and The Myer Foundation, the Minister for Ageing commissioned an internal review of community care programs (Aged & Community Services Australia, 2003 p. 2).

Table 2.1 sets out the key reports and events relevant to this project across the period from late 2001 to 2009. As can be seen from the Table, a number of other reports were released and initiatives implemented which would all make a contribution to the ongoing thinking about the future of aged care in Australia.

Table 2.1
Ageing – Key reports and relevant events

Late 2001	<i>National Strategy for an Ageing Australia</i> released by Hon Kevin Andrews, Minister for Ageing in October 2001
2002	<p>House of Representatives Standing Committee on Ageing established in June 2002 to enquire into long-term strategies to address the ageing of the Australian population</p> <p>First <i>Intergenerational Report</i> was tabled with the 2002–03 Commonwealth Budget. This report explored the economic implications of population ageing in terms of future public expenditure and the broader impact on Australia’s economic wellbeing and standard of living</p> <p>National Advisory Committee on Ageing established to facilitate discussion about the consequences of the ageing population for the development of policies and programs</p> <p>National Ageing Workforce Strategy begun, with the purpose of identifying the workforce profile of the aged care sector and its needs until 2010</p> <p>Announcement of a comprehensive review of pricing arrangements in residential aged care</p> <p><i>The Myer Foundation 2020: A Vision for Aged Care in Australia</i> released in November 2002</p>
2003	<p>A consultation paper on a new strategy for community care released for comment by the Commonwealth</p> <p>The Myer Foundation, in association with ACSA, convened a two-day National Community Care Summit in Canberra in June 2003 to work with 60 experts to develop a plan to reform and improve community care.</p> <p>The Myer Foundation in association with AHURI held a one-day conference, Housing Futures in an Ageing Australia, in Melbourne in November 2003.</p>
2004	<p>Release by the Commonwealth Government of <i>A new strategy for community care – the way forward</i>, August 2004</p> <p>Findings of the <i>Review of Pricing Arrangements in Residential Aged Care</i> (Hogan 2004) released</p>
2005	<p>Release of Productivity Commission research report – <i>Economic implications of an ageing Australia</i></p> <p>Trials for a new Aged Care Funding Instrument (ACFI) for residential aged care commenced.</p>
2006	New funding of \$21.6 million over 4 years to encourage best practice in residential aged care
2007	<p>Release of the second Commonwealth Government Intergenerational Report (Costello 2007)</p> <p>Review Agreement for the Home and Community Care (HACC) program between the Commonwealth and state and territory governments signed</p> <p><i>Securing the Future of Aged Care for Australians</i>, a significant Commonwealth government funding announcement in February 2007. This provided a \$1.5 billion package of aged residential care reforms aimed at addressing equity issues associated with residential care subsidies and charges. The most significant community care initiative was the increase in the aged care planning ratio, with the target for community care places to be increased from 20 places per 1,000 people aged 70 and over to 25 places by 2011. An allocation of \$411.7 million was made to provide an extra 7,200 care places over the next four years.</p>

	<p>Aged Care Amendment Act 2008 paved the way for the introduction of a new Aged Care Funding Instrument (ACFI) for residential aged care, as well as other reforms to improve flexibility and cost effectiveness. The changes enabled a number of reforms proposed in the 2004 Hogan report to be implemented.</p>
2008	<p>Updated version of 2004 – <i>A new strategy for community care – the way forward</i> released by the new Labor government</p> <p><i>Ageing and aged care in Australia</i> released by Commonwealth Department of Health and Ageing in July 2008, indicating that in responding to population ageing the government takes a whole of government perspective</p> <p>Release in September 2008 of the Productivity Commission Research Paper, <i>Trends in aged care services: some implications</i></p> <p>Announcement in May 2008 of a major review of Australia’s tax system, incorporating a special review of the pension system</p>
2009	<p>Release in February of <i>A healthier future for all Australians: interim report of the National Health and Hospitals Reform Commission</i></p> <p>Release in April of the Senate Standing Committee on Finance and Public Administration report <i>Residential and community aged care in Australia</i></p> <p>Release in May of the <i>Who cares..? Report of the inquiry into better support for carers</i> undertaken by the House of Representatives Standing Committee on Family, Community, Housing and Youth.</p>

Note: This is not a comprehensive listing of all key reports and events, but has been developed to illustrate issues central to this Outcomes Review report. The table draws on material in *Australia’s Welfare 2007* (AIHW 2007) as well as other sources.

Policy change in the area of ageing – a complex process

In order to assess the impact of The Myer Foundation 2020 Vision report, it seems essential to have some understanding of the process of policy change at the national level, as it is there that high order policy about the structural arrangements of aged care programs and services, regulation and funding occur.

The aged care policy arena is a complex one that has seen change occurring slowly as highlighted by Hal Kendig, an eminent academic in the ageing area:

... examples from the past provide some useful lessons as to when and how major changes have been possible in our aged care system. We can see what one might call a 'sedimentary' model of program development: new policies tend to be overlaid on old ones and there is more evolution than radical change. When changes do occur there is usually underlying social change ... For change to occur there are usually major fiscal pressures precipitating them (even though the outcome may well be more rather than less expenditure). Overall there has been a long term trend towards modest real growth of expenditure in aged care. Finally in terms of electoral cycles, major initiatives tend to emerge after rather than before elections. (Kendig H, 2004)

In addition, as pointed out by Gary Banks, Chairman of the Productivity Commission,

policy decisions will typically be influenced by much more than objective evidence, or rational analysis. Values, interest, personalities, timing, circumstances and happenstance – in short, democracy – determine what actually happens. (Banks G, 2009 p 4).

This highlights the challenges associated with assessing the impacts of The Myer Foundation 2020 Vision project. The Commonwealth government's response to the recommendations of *The Review of Pricing Arrangements in Residential Aged Care* (Hogan W 2004) is also illustrative. The government commissioned a highly respected person to undertake the review but rejected a number of the recommendations that related to the financing and regulation of residential care.

In addition, the core policy changes required to address fundamental issues contributing to fragmentation in the planning and design of aged care services, as well as the important link with health services, involve Commonwealth and state government roles, regulation and authority, something that may be difficult to influence from the outside.

It is evident that Commonwealth–state relations in the ageing and health area are complex. Part of the complexity relates to the future financial challenges associated with funding services for a growing ageing population and concern that state governments are not well placed to meet future financial pressures and expectations. Also relevant are the likely varied impacts in different states of any changed arrangements between the Commonwealth and states. An additional consideration is whether new arrangements would result in improvements for consumers, or unravel some state-led reform processes that are considered to be demonstrating success in improving the experience of consumers when they interact with the aged care system.

3 Assessing progress towards implementation of the Vision

This section of the report and the following section (Section 4) set out the evidence used to assess the progress towards achievement of the Vision outlined in the Vision 2020 report. It begins with an overview of recent reports, followed by a discussion of initiatives of the current government since coming into office in November 2007. The final part draws together the conclusions reached.

3.1 Evidence of limited progress

At present, overall progress towards implementation of the Vision is somewhat disappointing and of concern to many of those interviewed for this project. On some issues there has been some positive action in addressing identified challenges (illustrated in the discussion in Section 3.2 on current government initiatives and the later discussion on each area of the Five Point Plan (see Section 4).

There is considerable evidence to indicate that very limited progress has been made in setting in place substantive actions to respond to the fundamental issues needing to be addressed in each of the areas in the Five Point Plan. The strongest evidence on disappointing progress comes from four recent documents.

The Productivity Commission Research Paper *Trends in Aged Care Services* released in September 2008 updates progress on recommendations of earlier Productivity Commission reports. It identifies work is still required to assess the potential for unbundling accommodation, everyday living and personal care costs in residential care, and the feasibility of consumer centred care arrangements to enhance the potential for older people to influence the nature and scope of the services they receive. In addition, the planning approach for residential care and addressing a range of workforce issues are identified as still needing serious attention (p xiv).

The Senate Standing Committee on Finance and Public Administration, in its report *Residential and Community Care in Australia* released in April 2009, comments:

From the inquiry's inception, it became overwhelmingly evident that aged care providers and involved stakeholders across the country recognize a need to reform the aged care sector in Australia.

Witnesses commented on the 'bandaid' approach that has been taken to problems within the aged care sector and on the fact that they have been calling for reforms for many years. It was argued that the significant problems currently facing the sector and the need to meet future demand must be addressed immediately and in a more comprehensive and coherent manner. (Section 3.1, p.15). There are widely held concerns regarding what has been seen as a largely piecemeal approach to aged care funding which has not permitted adequate consideration of the sector as a whole, its future challenges and the changing expectations upon it. (pp.16–17)

The committee recommends that further work be undertaken on a number of key issues. Many of these issues are the same ones identified in the Vision 2020 report some six years ago. This is a strong indication of lack of substantive progress.

The report *Who Cares...? Report on the Inquiry into better support for carers* (April 2009) identifies a wide-ranging set of urgent issues relating to the significant challenges faced by carers that need to be addressed. One of the key themes to emerge from the review was:

... dissatisfaction with the community care systems. Specifically, evidence highlighted significant concerns in relation to the complexity of the systems, the level of unmet need, the costs of accessing services, inflexible delivery of services and in some cases, the questionable quality of care (p. 13).

The National Aged Care Alliance, a representative body of peak national organisations in aged care including consumer groups, providers, unions and health professionals, identified the following short to medium term issues in its 2009–10 federal Budget submission:

- **workforce** related improvements, including achievement of comparable pay and conditions for workers in the aged care sector; education and training and maintenance of competency of the diverse workforce; and research to support development of a national workforce strategy across all aged care settings.
- quality monitoring to **support greater consumer participation** in decision making about their care.
- better **transport** options to support older people to get transport to health services.
- improved **funding** arrangements and levels of funding for residential and community care.
- improved **linkages** between health and aged care services.
- improved funding for **technology** to assist older people maximise their capacity for independent living and to improve the efficiency of aged care services.

3.2 Initiatives of the current government

It needs to be acknowledged that the change of government in November 2007 has obviously had an impact on progress. The new government, which has now been in office for over one and a half years, has clearly taken a number of important steps to grapple with the fundamental structural challenges identified with the current services and funding arrangements, as demonstrated through the following initiatives.

COAG reforms

Health and ageing was one of the seven areas for reform as part of the new government's National Reform Agenda announced at the December 2007 COAG meeting. This was an important indication of Commonwealth interest in addressing some of the more fundamental structural issues affecting aged care services.

In October 2008 COAG agreed to reform roles and responsibilities between Commonwealth and state and territory governments for community and residential care services for older people as well as for people with disabilities and people with mental illness and to build a more seamless system to better meet the needs of the community on a national basis. The principles developed to guide these reforms are consistent with a number of the directions proposed in The Myer Foundation 2020 Vision report.

At the same time, the Commonwealth government proposed that it take over all responsibility for aged care. This is quite different from the proposal outlined in The Myer Foundation 2020 Vision Report which recommended that the Commonwealth be responsible for national policy development and the states for administration of health and aged care programs.

However, to date (July 2009) no new arrangements have been agreed between the Commonwealth and state and territory governments in relation to aged care. Continual postponement of announcements relating to the reforms is leading to uncertainty and potentially making it difficult for many stakeholders to maintain the momentum of service improvements already underway.

In addition, the proposed COAG reforms are unlikely to address the important interfaces with other programs areas such as health, housing and the built environment, which are all central elements of

an integrated approach for supporting positive ageing and enabling many older people to have a real choice about living at home for as long as possible.

New intergovernmental decision-making arrangements and consultative arrangements

As part of the COAG reform process, a Ministerial Conference on Ageing reporting to COAG was established to provide a forum for the three levels of government to facilitate a consistent approach in areas such as active ageing, housing for older people, integration of community aged care services and local government planning arrangements (Department of Health and Ageing, 2008).

The industry advisory body was revamped in mid 2008 to improve consultation with the aged care sector, workforce and peak consumer organisations. The new Ageing Consultative Committee includes commercial and not-for-profit aged care providers, consumer groups, professional and union bodies.

Establishment of the National Health and Hospitals Reform Commission

In early 2008 the National Health and Hospitals Reform Commission was established and charged with developing a long-term health reform plan for Australia. This is known to be a particularly challenging task and signals the government's willingness to tackle some longstanding difficult issues. The commission's interim report released in December 2008 proposes a number of changes which, if included in the final report and implemented, will result in important improvements for older people, and the coordination of a range of health and support services they may require.

Commitment to a social inclusion agenda

The Commonwealth government has made a commitment to a social inclusion agenda and is working in varied ways to facilitate social inclusion outcomes for disadvantaged Australians. While there has been little focus on social exclusion issues for older people in the initial priorities, the Communiqué from the Ministerial Conference on Ageing (November 2008) indicates an agreement to develop options for national initiatives involving all levels of government working together to strengthen the social inclusion of older people.

Increased budget allocations

There have been significant increases in funding commitments for aged care in the first two budgets of the Labor government (e.g. \$2.5 billion across the next four years in 2009/10). The emphasis has been on residential care, but increased funding has also been allocated for expansion of transition care places for people leaving hospital care, as well as other initiatives including workforce development and palliative care. (However, there have been no commensurate large-scale increases for community care, which is the care preference of most people and which is significantly underfunded according to recent reports and inquiries outlined earlier.)

Improved income support

The instigation of the review of pensions was a major government initiative and the announcement in the 2009/10 Budget of increases to pensions for single older people and carer payments and allowances is seen to partially address important historic income disadvantages which affect life choices.

3.3 Conclusions

Overall there is considerable evidence to indicate that to date very limited progress has been made on the fundamental issues needing to be addressed in each of five action areas. Given the increasing numbers of older people, and increasing proportions of older people from non English speaking backgrounds, since 2002, progress appears insufficient.

Incremental change in specific areas without wider system reform will not address the most significant strategic and structural issues. A number of those interviewed commented that the Vision and steps outlined in the Five Point Plan remain as relevant today as when first released.

The initiatives of the Labor government have obviously been welcomed. However, the continuing allocation of most new funding for aged care to a residential care system in need of major reform, alongside lack of attention to community care in the budget process, remains a cause for concern and frustration.

To date, while the Commonwealth government has instigated a number of important reform initiatives, there have been few tangible outcomes in terms of system reform. There is now a growing view that the reforms anticipated from the COAG agenda may not eventuate. In addition, in contrast to a number of other areas of government business, there is no overarching strategic framework to indicate that the Commonwealth government has a comprehensive plan to address the significant challenges associated with the ageing of Australia's population.

It can only be hoped at this stage that the work being undertaken now, and the response to the numerous recent reviews indicating the need for significant change, will lead to development and adoption of a more comprehensive and strategic framework.

Significant work is still required on redesigning and realigning the arrangements to ensure that older people have choice in how and where they live in their older years, have access to coordinated and flexible health and support services, and have certainty that their housing needs will be met. In addition, discussion about how to fund the aged care services required by an increasing older population remains a high priority.

4 Assessment of progress on the Five Point Plan

The Five Point Plan set out in the 2020 Vision report outlined issues needing to be addressed to support implementation of the Vision. This section of the report assesses the progress in each of these five areas. The directions proposed in the plan are set out at the beginning of each topic.

4.1 Community care¹

The community care reforms proposed in the 2020 Vision report

Australia will need expanded, robust and effective community care to assist the vast majority of older people who need care and want to receive it in their own homes. Substantial reform is required including:

- *Increasing funding to the community care sector to ensure older people needing support in their daily lives get access to a range of services that meet their changing needs*
- *Establishing a national program integrating the full range of required community care services*
- *Ensuring equity of access to similar services based on assessed need across all regions of Australia*
- *Expanding and improving the efficiency of community based care by supporting the development of comprehensive care providers*
- *Recognising the key role of hospitals in a care system designed to support frail older people in the community*
- *Supporting the central role of informal carers in providing community care*

Progress

While significant work has been undertaken by all spheres of government to continue to work on ways of improving community care services for older people, overall progress is reported as painfully slow with only limited tangible outcomes in the areas identified in the Vision 2020 report.

Community care still does not receive the recognition and relative funding required to build a system capable of providing appropriate levels of support and real choice for older people and their families in an equitable way; it remains in the shadows of residential care when it comes to budget allocations. The vast majority of Commonwealth budget increases for aged care continue to go to residential care.

Very limited progress has been made to date on addressing the structural issues arising from fragmented and overlapping programs or on deliberate strategies to develop comprehensive care providers. However, the 2007 HACC Review Agreement commits governments to work together to continue to improve the system in the areas highlighted in The Myer Foundation 2020 Vision Report as outlined below. There are also other examples of improvements in individual aspects, but the overall fragmentation, lack of flexibility and underfunding of community care continues.

The following outlines some of the specific positive developments to date.

¹ It should be noted that the Myer Foundation continued to play an active role in 2003 and 2004 in debates about directions for community care.

HACC reforms

The Australian and state and territory governments, in signing the HACC Review Agreement in 2007, agreed to continue to work on development of common arrangements to improve national consistency and reduce duplication and overlap in administration. Areas of focus include eligibility, assessment, fees, reporting and planning. The scope of proposed reforms are outlined in a Commonwealth document *A new strategy for community care – the way forward*, released in 2004 and updated in 2008.

At the ACSA national conference in October 2003, the Aged Care Minister, Julie Bishop, commenting on the early consultation paper setting out the new strategy, had indicated that:
... several of the reforms proposed in the Government's paper address concerns and issues flagged in the Myer-Parbo Vision 2020 report ...

As part of the HACC reforms, new national initiatives are being implemented, such as Access Point Demonstration projects testing new approaches to simplify access and assessment processes for the HACC program. New screening and eligibility assessment forms have been developed. Individual state governments are also leading some reforms: initiatives in Victoria, for example, focus on improving access for people from culturally and linguistically diverse backgrounds and on a restorative and capacity building approach to community care services.

Sector and philanthropic driven work on new models for community care

Across 2006 and 2007 two coalitions of service providers, older people and carers initiated significant research projects about what needed to be done to improve community care services for older people.

- The National Community Care Coalition project commissioned The Allen Consulting Group to produce a report, *The Future of Community Care*, which identified options for future expansion of community care.
- The Helen MacPherson Smith Trust, in partnership with the Victorian Community Care Coalition, commissioned work to examine what would be required to develop a more capable, responsive and sustainable community care system. The result was outlined in a report by the Nous Group (2006), *Moving to Centre Stage*.

The peak bodies for service providers, older people and carers have continued to work on developing the details of the Vision for an improved community care system. For example:

- ACSA in August 2008 released a paper *New generation community care*.
- Papers on consumer-directed care have been developed by ACSA (2008), Alzheimer's Australia (Tilly J and Rees G, 2007) and the Brotherhood of St Laurence (Laragy C and Naughtin G, 2009).
- A randomised control trial on pooled funding and consumer directed care has been initiated through UnitingCare Community Options, in collaboration with a coalition of peak consumer groups and service providers including the Brotherhood. The Helen McPherson Smith Trust was the initial funder for this project which has now attracted additional funding from other philanthropic groups and importantly also from the Australian Research Council.

Increased funding

There have been ongoing increases in funding for community care, with the largest rate of growth in packaged care. Between 2003 and 2006, there was a 7.7% increase in community care packages per 1,000 people aged 70 years and over. In 2007 the government announced a further increase in the planning target ratio from 20 community care packages to 25 per 1,000 people 70 years and over by 2011 (Australian Institute of Health and Welfare, 2007, p. 106).

Between 2001/02 and 2005/06, Commonwealth HACC expenditure increased in real terms by 17 per cent, while funding for community care packages combined with the National Respite for Carers Program increased by 50 per cent (Australian Institute of Health and Welfare, 2007, p. 141). Increased funding for financial and other supports for carers has been evident since 2002.

The interface between hospital, aged care and home

In 2004 a national action plan, developed on behalf of the Australian Health Ministers Advisory Council (AHMAC), was released for improving the care of older people across the acute-aged care continuum. All states were required to report progress against the action plan on a regular basis.

In 2005/06 a Transition Care Program was introduced, and this program has continued to grow. At 30 June 2008, the Commonwealth Government had allocated 2,228 places to transition care, with further expansion announced in the two most recent budgets. This program provides assistance for up to 12 weeks to older people to complete their recovery after a hospital stay (Australian Institute of Health and Welfare, 2007).

4.2 Housing

The housing reforms proposed in the 2020 Vision report

Innovative, accessible housing arrangements and community infrastructure need to be developed so older Australians can live in their own homes and communities as they age. This can be achieved by:

- *Ensuring that a significant percentage of new housing is built to meet the Australian standard for adaptable housing by 2020*
- *Establishing national guidelines and standards for 'aids and appliances' and home modifications/home maintenance programs that are funded and administered as part of a comprehensive community care scheme*
- *Developing a range of new community housing options for frail older people*
- *Using effective urban design to create more age and disability friendly built environments*

Progress

The overall lack of progress on a sound national approach to planning for the future housing needs of older Australians is demonstrated through the call for action made to the Commonwealth Government in mid 2008 by a Housing Affordability for Seniors Alliance of ACSA, Council on the Ageing (COTA) and the Brotherhood of St Laurence. The alliance identified the need for a National Older Persons Housing Strategy that would focus on enabling older people to make adjustments and choices that enhance ageing in place, wellbeing and lifestyle. Also highlighted was the housing affordability crisis being experienced by a growing number of older people, particularly those living in rental housing.

The major AHURI study, *21st century housing careers and Australia's housing future* (Beer & Faulkner 2009), which looked at major drivers of housing careers of Australia's population, also highlights the need for a formal housing strategy for older people. .

There are also indications of progress on some specific housing-related issues identified in The Myer Foundation 2020 Vision Report including the following:

- The guidelines for development of 20,000 new social housing units funded through a \$6.4 billion allocation out of the Australian Government Nation Building and Jobs Plan stimulus package indicate that the government will be looking to fund housing proposals that adhere to universal design principles wherever possible. This is an important expectation by government but it is unclear how many new properties will actually meet universal design principles given the short time frames for spending.
- The New South Wales Government plan to addressing population ageing commits to encouraging universal design of housing for older people (New South Wales Government, 2008). In Victoria, the government recently announced a package of measures to encourage accessible housing called the 'Build for Life' campaign. This initiative is to include the release later in 2009 of a draft regulatory impact statement about introduction of minimum mandatory accessibility standards into Victoria's building regulations. (Department of Planning and Community Development, 2009)
- There have been some initiatives to support more age-friendly urban design. In 2003 the Australian Local Government Association, the peak body for local governments, entered a partnership with the Australian Government to assist local governments meet the opportunities and challenge of an ageing population. One element was a project to encourage and support local governments take up opportunities to create more age-friendly built environments (Australian Local Government Association, 2005). However, it is up to individual local governments to initiate actions and there has been no follow-up funding to give ongoing impetus. Some councils in Victoria and Western Australia have also been using the World Health Organization *Checklist of essential features of age-friendly cities* to assess their own performance.
- The Australian Government recognised the needs of homeless older people in its White Paper on Homelessness (December 2008) and committed \$18 million over four years to further develop specialist housing and support approaches for this group.

There has been minimal progress in the area of aids and equipment and home maintenance/modifications. A recent AHURI report on home maintenance and modification services (Jones A et al., 2008a) identifies the lack of any comprehensive strategy or framework for these services at the national level or within individual states and highlights the complexity of achieving this as it involves the health, housing and community care sectors. The Interim Report of the National Health and Hospitals Reform Commission (December 2008) notes the difficulties created by the lack of consistency, adequacy and affordability for consumers of the current uncoordinated range of aids and equipment programs.

Limited progress has been made on any systematic approach to encouraging new housing options for frail older people. However, in response to community demand, both the private and non-government sector, and in some instances government housing authorities, have been developing housing in combination with various types of support. A research project commissioned by the AHURI has been examining the developments. (Jones A et al., 2008b). The second and final report of the project, outlining the issues for government and the housing sector to consider, is expected in the second half of 2009.

4.3 Administration

The administration reforms proposed in the 2020 Vision report

Responsibilities for policy development, planning and provision of Australia's aged care and health services need to be clarified and redistributed across all levels of government, under a national policy framework.

This can be achieved by:

- *Ensuring the Commonwealth Government, with the states, sets and benchmarks national standards and performance measures and provides appropriate levels of funding*
- *Commonwealth and state governments agreeing on an administrative framework that aligns responsibilities across all aged care and health services*
- *Implementing strategies to streamline the administration of care over the short to medium term, including better co-ordination and regional pooling of funds*
- *In the longer term, working towards the Commonwealth being responsible for national policy development, with the states having direct administrative responsibility for health and aged care programs*

Progress

Not long after coming into office the new Labor government announced a National Reform Agenda and a new era in Commonwealth–state relations. At the first COAG meeting on 20 December 2007, health and ageing was one of the seven areas identified for reform and a working group was set up to develop proposals for health and ageing for COAG to consider at a later meeting.

At the 2 October 2008 COAG meeting, the Commonwealth announced its intention to progress reforms to the roles and responsibilities between the Commonwealth and states and territories for community and residential care services for older people. The Commonwealth proposed to take over all responsibility for aged care programs, meaning it would remove the current state and territory role in managing the HACC program. This proposal is quite different from the position outlined in the Vision 2020 Report, that the Commonwealth be responsible for national policy development and the states for administration of health and aged care programs.

It is evident that the matters of Commonwealth–state relations in the ageing and health area are complex. Part of the complexity relates to the future financing of services for an ageing population and concern that state governments are not well placed to meet future pressures and expectations. Other complications relate to likely varied impacts in different states of changed arrangements for service provision and to whether new arrangements would result in improvements for consumers.

To date no national framework for policy development, planning and provision of aged care services has been agreed through the COAG processes, although considerable deliberation by all spheres of government has been evident. Announcement on implementation of proposed reforms have been continually postponed.

The interim report of the National Health and Hospitals Reform Commission released in December 2008 supports the consolidation of aged care programs with the Commonwealth, along with more flexible care subsidies and greater consumer choice about where their care is provided and how they use their care subsidy. While these latter two directions are consistent with the Vision spelt out in the 2020 Vision Report, the first is not.

4.4 Funding

The funding reforms proposed in the 2020 Vision report

A funding model needs to be developed that will deliver the significantly greater resources needed over the next 20 years to increase and broaden the range of available services and improve service standards. This can be achieved by:

- *Separating funding for the accommodation, hotel (or living) and care components of aged care services*
- *Increasing public resources to fund high quality care services*
- *Identifying new short and long term sources of funding for aged care services which could include:*
 - *Mechanisms to enable people to access resources within their own home – such as ‘reverse mortgage’ products – so they can contribute to accommodation costs if they are not being cared for at home*
 - *A form of pre-funding, such as an individual-based compulsory savings scheme or universal social insurance scheme, to provide additional funds to underpin the ‘care’ component of services*

Progress

There have been successive increases in government funding for services for older people and carers across the past decade. For example, the last Budget of the Coalition government (2007/08) contained a \$1.7 billion package of reforms across 4 years. The two largest allocations were \$1.3 billion to increase payments to residential aged care providers and \$411 million to provide an additional 7,200 community care places (Pyne C (Minister for Ageing), 2007).

The most significant increases have been to address the ongoing viability of the residential aged care sector and its capacity to respond to the needs of older people. However, these funding increases, while most welcome, fall well below what is required to effectively support older people in line with the current expected standards.

The first Budget of the new Labor government saw the majority of increased expenditure going to residential care, with the most notable other expenditure of \$293 million over four years for providing an extra 2,000 transition care places to assist people manage the transition from hospital to home. (Elliot J (Minister for Ageing), 2008b). The government had also introduced the new Aged Care Funding Instrument (ACFI) for residential care to improve funding and administrative efficiency for providers. The 2009/10 Budget saw further increases to aged care funding of \$2.5 billion over the next four years, again largely allocated to residential care. Older singles and carers were also beneficiaries of a significant improvement to income support payments and allowances.

Despite such budget initiatives and increases since 2002, there are still major issues with funding arrangements and the capacity of government to fund the level and quality of services considered necessary, as well as to achieve a balance between community and residential care services reflective of community preferences. While there is growing discussion about the potential of a disability insurance scheme for people under 65 to provide improved levels of funding and greater funding certainty for people with disabilities, there is no serious public discussion yet about a more universal insurance scheme or other arrangement that could contribute to covering the future costs of aged care services. Funding of aged care currently remains reliant on government subsidy and user contributions only.

4.5 Industry planning

The industry planning reforms proposed in the 2020 Vision report

Successfully providing excellent aged care depends on a vibrant, strong and efficient industry. This can be achieved by:

- *Developing an aged care industry plan that shapes:*
 - *Appropriate roles for private and public, for-profit and not-for-profit providers*
 - *The range of service types delivered by any one provider and the links to acute care and other services*
 - *The concentration or amalgamation needed to achieve economies of scale and efficiencies in operation*
 - *The expanded role of the community care sector in the scope of the plan*
 - *Integration across the community, residential and hospital sectors*
- *Ensuring there are enough, well remunerated and qualified workers to deliver future aged care, through workforce planning, education and training*
- *Developing a national aged care research agenda*
- *Developing and harnessing new technologies*

Progress

Comprehensive industry plan

No comprehensive industry plan incorporating the range of elements outlined in the 2020 Vision report has been developed for services to support older people. The final report of the Health and Hospitals Reform Commission due by mid 2009 may contain some concrete proposals for improving integration of services across health, residential and community care.

Workforce planning

There has been incremental work on workforce planning. The most recent report on the residential and community care workforce concludes that the recruitment and retention challenges facing the aged care sector rose between 2003 and 2007 (Martin B and King D, 2008 p. xvii). The 2008/09 Commonwealth Budget contained a number of initiatives to address nursing and personal care workforce issues. These included cash incentives for nurses returning to the aged care workforce, improved scholarship arrangements for nurses entering aged care and a range of training initiatives for personal care workers (Justine Elliot (Minister for Ageing), 2008).

Research agenda

At the time of the launch of The Myer Foundation Vision 2020 Report there was considerable discussion about developing an Australian ageing research agenda, with a major symposium in September 2003 (Australian Institute of Health and Welfare and Office for an Ageing Australia, 2003, Australian Institute of Health and Welfare, 2003). This discussion was precipitated by the announcement by the Prime Minister in December 2002 of four national research priorities, with 'ageing well, ageing productivity' being one of three goals under the Research Priority 2 – Promoting and maintaining good health. This resulted in the funding of the ARC/NHMRC Research Network in Ageing Well, with a significant Commonwealth allocation over five years. This funding concludes in 2009.

At this stage there is no agreed future strategic research agenda (with funding) around ageing issues to provide government, consumers and the aged care industry with an evidence base for future policy and program development. Key professional and industry bodies and researchers have been considering a future agenda. (Aged & Community Services Australia, 2008b, Carroll M and

Kendig H, 2008), but this has many stages to go through to secure wide stakeholder agreement and required resources.

Technology

There is continued interest amongst stakeholders in how various technologies can improve the efficiency of health and aged care services, address the problems associated with remoteness and directly assist older people to maintain their independence. Trialling and implementation of varied systems for electronic record sharing are at different stages across different services. However, developments still appear to be ad hoc and intermittently funded by government. Private companies appear to have been advancing the development of telemedicine.

The 2007/08 Commonwealth Budget included an allocation of \$21.4 million across four years to increase the availability and use of assistive technology to support older people maintain their safety and independence at home. However, this allocation remained unspent and the funding was surprisingly withdrawn in the most recent Budget.

5 The conclusions of the review of the 2020 Vision project

This section of the report draws together the insights about the impact of the 2020 Vision project. The conclusions reached have been informed by the 25 interviews undertaken for the project and examination of a range of reports commenting on developments in ageing and aged care.

The section starts by summarising the findings from the earlier evaluation in 2004 as this also provides important insights about the short-term impact of the project at a time when people's awareness of the project was still very fresh. This is followed by an outline of the project's contributions, looking back six years. The final sub-section outlines the broader conclusions emerging from this review. These provide an important context for developing a further agenda for change.

5.1 Findings from the 2004 *Impact and legacy of 2020* evaluation

The Myer Foundation commissioned an initial evaluation of the impact and legacy of The Myer Foundation 2020 Vision project in early 2004. This evaluation involved qualitative research based on in-depth interviews with 47 individuals who had been involved with aged care and/or the 2020 Vision project, including legislators, policy makers, practitioners, service providers, researchers and administrators.

Key conclusions from the unpublished report (Saulwick Muller Social Research, 2004) were that the project was worth doing. It had raised the profile of ageing and aged care among politicians, bureaucrats, practitioners, and the general community. The high profile of the project was demonstrated through a short Internet survey, which indicated it received 258 mentions in parliamentary reports and debates, and 509 mentions in newspapers and magazines.

The evaluation found that there were differing expectations about what the project might achieve, with some interviewees assuming it would be able to implement change. Others however recognised that this was not possible, with its contribution being to energise those in positions to bring about policy change. It was considered that the legacy of the project would be enhanced if the momentum could be maintained and further work undertaken to keep the issue alive in the minds of all those who have the capacity to influence change.

The project was also seen as an effective model for philanthropy:

The stature of the project's patrons, the Foundation's acknowledged independence from political and other interests, its engagement of recognised experts to conduct the work of the project, and the generosity of its resourcing were all important considerations for respondents in assessing the role of the Foundation. (Saulwick Muller Social Research 2004)

5.2 What impact did the project have looking back six years

As noted earlier, there were many initiatives happening at the time of The Myer Foundation 2020 project, which made it very difficult to clearly determine what specific impact the project had. As outlined in Section 3, progress on many reforms to the aged care system has been slow, and it is difficult to predict what actions might have had a strong influence on policy at a given point of time. Nevertheless some assessments can be made of the contributions made by The Myer Foundation 2020 Vision project, by drawing on the interviews undertaken for this project and the available documentation.

The key conclusions reached about the contribution of the 2020 Vision project are as follows. Each is discussed in more detail below.

- The project had an important influence on thinking, particularly from 2002 to 2004.
- The project made important contributions to reform processes in community care in particular.
- The background and research papers commissioned by the project provided important new and contemporary documentation and evidence about the issues associated with population ageing.
- The project raised awareness and stimulated discussion within the philanthropic sector about its role in influencing and funding in the ageing area.

Important source of influence on thinking, particularly across 2002–2004

The 2020 Vision project (including its report, the commissioned background and research papers and the consultation, engagement and influencing process) was viewed as one of the important sources of influence across 2002–2004. It contributed to increasing awareness of the urgency to address issues associated with aged care and population ageing and helped to shape the debate about directions and actions needed to achieve better outcomes for older people needing assistance from aged care services, particularly shifting the focus to recognise the importance of community care.

Important contribution to reforms in community care in particular

The most notable impact of the 2020 Vision project that can be tracked through documentation and discussions is its influence in the area of community care. Those who had been strong advocates for reform and expansion of community care (which was seen to operate in the shadow of residential care) perceived the 2020 Vision project to add significant momentum to the pressure for reform of community care.

In response to the 2020 Vision report and *A vision for community care* released by the community care coalition partners, the federal Minister for Aged Care commissioned an internal review of community care programs. This resulted in the release in March 2003 of *A new strategy for community care* Consultation paper. This paper indicated that the Government agreed that reforms were necessary. Current reform in the HACC program is largely working to implement the reforms outlined in the final version of *A new strategy for community care – a way forward* released in 2008.

The need for improvement in the current community care model identified in the 2020 Vision report was also the impetus for the Helen McPherson Smith Trust funding a substantive research report *Moving to centre stage* (The Nous Group, 2006). This project was undertaken in collaboration with the Victorian Community Care Coalition and focused on identifying a range of options to support development of a more responsive and sustainable community care system. The Helen McPherson Smith Trust has provided funding to UnitingCare Community Options for a substantial follow-on project to trial pooled funding and consumer-directed care for community care.

The increase in the planning ratio for community care places announced as part of the Commonwealth Government's 2007 Securing the Future for Aged Care package may also have some links back to the concerted campaigns to improve community care provision in which The Myer Foundation played a key role.

Important contribution to the evidence base

A number of interviewees commented on the usefulness of the discussion and research reports. They were seen to provide new Australian literature documenting contemporary issues and had been written by people known for their expertise. The reports were referenced in a number of

submissions to government, for example, by the Victorian Government in their submission to the Commonwealth review of pricing arrangements in residential care (Aged Care Branch Department of Human Services, 2003). The Productivity Commission also drew heavily on the papers in their submission to the same review and when interviewed for this project indicated that The Myer Foundation reports were ‘an invaluable body of work’. UnitingCare Australia in their 2002 submission to another government inquiry drew on the reports and within it stated that they supported the recommendations of The Myer Foundation 2020 Vision report.

One of the issues identified through the project was that copies of the discussion and research papers are now very difficult to find as they are no longer available on The Myer Foundation website and are not readily accessible electronically from any other website. The papers are still relevant and form part of the literature informing the current understanding of issues and future options given the slow pace of change.

Some people commented that the breadth and scale of the project were great strengths. Rather than funding unrelated small pieces of research or expert views, this project funded a significant number of papers with coherent themes. The findings were effectively brought together in the overview Vision 2020 report.

Influence on awareness and thinking in the philanthropic sector

Following the release of the 2020 Vision report in November 2002, a forum was held in February 2003 for philanthropic organisations with an interest in the aged care and ageing area. This forum and the project’s research and reports contributed to a greater awareness among grant-makers of the diverse issues associated with an ageing population and have fostered an interest within the philanthropic sector to explore new granting opportunities that are more developmental and strategic.

After some early meetings, this interest group moved on to operate as an Affinity Group under the Philanthropy Australia umbrella and is now called the Ageing Futures Affinity Group. The mission of this group is to inform philanthropic practice and foster collaboration among those members of Philanthropy Australia that share an interest in ageing and aged care related issues. This Affinity Group continues to meet regularly to examine the various challenges associated with ageing and aged care services, in order to identify areas for philanthropic contributions that could bring about positive change and influence new approaches and attitudes.

5.3 Additional broader insights and conclusions

This section outlines additional insights from this review which assist understanding of the challenges of influencing reform in complex policy areas, as well as of the outstanding issues that need to be addressed. A number of the issues outlined below have had an important influence on the proposed agenda for progressing outstanding issues discussed in the final section of this report (Section 6 following).

Slow progress but continuing relevance of the directions proposed in 2020 Vision report

The Vision and directions outlined in the *The Myer Foundation 2020: A Vision for Aged Care in Australia* remain highly relevant, more than six years after they were first published. Progress on advancing the Vision has been slow and piecemeal. Significant work is still required on many issues identified in the 2020 Vision report, including the need for:

- a more integrated, coordinated and flexible network of services that give older people and their carers real options and that streamline movement between different services
- more age-friendly design of communities and housing

- increasing funding levels, identification of new funding sources, greater budgetary recognition of the central role of community care and greater equity in subsidies and charges for consumers
- reforms to the roles and responsibilities for the Commonwealth and state and territory governments to support improved planning, accountability, equity of access and streamlining of services
- improved industry planning, including clear roles for all players; maintaining an ongoing adequately trained and motivated workforce; research and development work to inform service industry reform and improved approaches to service design.

There is increasing urgency to redesign and realign the arrangements to ensure that older people have choice in how and where they live, have access to coordinated and flexible health and support services and have certainty that their housing needs will be met.

A change of government in late 2007 has obviously had an impact on progress as the new Labor government seeks to develop its understanding of the range of issues to be addressed in light of a rapidly increasing older population at a time of unprecedented challenge resulting from the global financial crisis. It can only be hoped that the investigations and initiatives of the current government quickly lead to tangible improvements.

There are considerable challenges associated with influencing and achieving reforms

The multiple challenges associated with influencing policy and reform processes include:

Reform is complex and diverse sectoral interests make it more challenging.

There are diverse sectoral interests in the ageing area and the policy and reform issues that need to be addressed are complex and cross-sectoral. A significant area of required reform relates to roles and responsibilities of Commonwealth and state and territory governments – these can be very difficult to influence and difficult for governments across Australia to negotiate. Development of integrated, financially sustainable services and strategies that maximise older people’s wellbeing and independence and provide more flexible and improved living options for the current and future generations is complex and challenging. Different sectors have different views about what needs to be done and what the priorities are.

Influencing policy in complex policy areas needs consistent effort across time.

The strongest message from those interviewed who had particular experience in influencing policy is that in complex policy areas (such as ageing and aged care) policy change takes time and influence is usually only achieved by having an ongoing presence in the debates which may continue for many years. Additionally, different governments and different ministers within the same government have varied understandings of the issues and priorities in ageing and aged care. Therefore the argument for policy change may need to be adjusted and refined in light of different government and ministerial understandings and priorities. Having strong research and expert evidence underpinning advocacy and policy influencing processes (as The Myer Foundation project did) was viewed as extremely important – they add credibility.

As seen from the analysis in this report, achieving change in key policies and redesign of service models is a process that usually does not happen quickly. While the 2020 Vision project had an impact on some aspects of Coalition government policy in the community care area (alongside some other key players), not having an ongoing strong and strategic presence to advocate for change across time clearly weakens the potential to influence in complex policy areas. With the change of government in late 2007, new influencing processes need to be initiated to revitalise the understanding of the Vision.

Reform is inevitable but when, what and how significant are all far from clear.

Aged care services have been through considerable policy change and periodic waves of major structural reform across the past few decades. The recent reviews and reports (many commissioned by the new government), all indicating the need for significant reform, can be anticipated to result in changes; but when, what and the magnitude of change are all far from clear. A number of reports, such as the recent April 2009 Senate report on *Residential and Community Care in Australia* call for still more investigation of many longstanding key issues, further deferring and delaying action.

There is a need for an integrated whole of government framework for addressing ageing

There are various elements that need to come together to facilitate and support more older people having the option to live at home for as long as possible (a key underpinning direction of The Myer Foundation 2020 Vision project) with as much independence as possible, despite increasing frailty. These elements are far wider than aged care services alone. In addition the capacity for older people to remain active, engaged and healthy and have choices in their oldest years is heavily dependent on the decisions people make, the options available to them and what they do in the decades before reaching this age.

In light of the new government now having settled in and the plethora of recent reviews, reports and initiatives, it appears timely that the government provide leadership in development of an integrated vision and strategy for enabling positive ageing experiences across the whole community. As evident in the 2020 Vision report, for example, the ability to exercise the choice to remain at home with increasing frailty requires a person to have appropriate housing, engage in preventative health measures, and be able to readily access shops, transport and health services in addition to community care and support services as required.

The last Commonwealth Government vision setting out an integrated framework for responses to an ageing Australia was released in October 2001. Any new vision should encompass income, employment and productive activity, housing, aged care services and supports, health services, promotion of maintenance of independence and wellbeing, positive attitudes to ageing and valuing of older community members. The needs of groups likely to experience barriers to positive ageing should be identified for special attention.

Coverage of this range of issues is more likely to achieve development of a framework for integrated action by this government and ensure that the essential interconnections are recognised, that the diversity amongst older people is taken account of (in terms of age, gender, ethnicity, wealth, health status, etc.) and that the needs of more marginal groups of older people are not overlooked. Many ideas and proposals for elements of such a strategy have already been developed for consideration, with one example being the National Seniors Australia, *AdvantAGE Australia* report (August 2008).

There is a need for older people's voices to be strengthened in the debates about ageing and aged care

The views of older people themselves and their advocates need to be given greater prominence in the debates about how to improve responses to ageing and the structure and operation of aged care services. Many of the debates focus on funding, regulation and compliance rather than on what arrangements would achieve the best outcomes for individual older people and give consumers greater choice and control over how they are assisted (with the 'best outcomes' informed by the views of older people themselves and their carers, not only by service providers). The peak organisations representing older people interviewed for this project (National Seniors and COTA Victoria) are continuing to advocate to government for improved consultative processes with older

people themselves on policy and service design issues. (See Appendix B for further information about what matters to older people.)

There is a key role for philanthropy in influencing ageing issues

The 2004 Saulwick Muller evaluation of the Myer 2020 vision project identified that The Myer Foundation's approach provided an effective model for the philanthropic sector's engagement in public policy making and its investment in the community. The stature of the project's patrons, the Foundation's acknowledged independence of political and other interest, its engagement of recognised experts to undertake the project and its generous resourcing were all important elements of the model's effectiveness.

The ageing of the population will have a significant impact on Australian society across the next 30 years and there is a clear and important ongoing role for philanthropy in shaping future responses. There is no shortage of issues that need to be considered and addressed in the ageing area and there are multiple levels of possible involvement for the philanthropic sector. (See the next section for more detail).

Because philanthropic organisations are not aligned with any particular sector, they are well placed to stay above the narrower sectoral interests of other organisations that are advocating change. Philanthropic organisations have the capacity to maintain a strong focus on high order outcomes for older people, foster strategic alliances and new evidence-based research about good practice and more consumer-focused approaches. Philanthropic organisations are also in a sound position to advocate strongly for equitable opportunities for all and set in place strategies to monitor whether equitable outcomes are being achieved; in collaboration with others they are well placed to propose approaches for addressing identified shortcomings.

However influencing policy and practice change in complicated areas such as ageing is a complex process and usually does not happen quickly. Therefore any philanthropic involvement needs to have a long term perspective, target strategic issues and work in strategic partnerships with others who are focused on fostering change.

6 Proposed agenda to progress outstanding issues

One of the tasks of this project was to propose an agenda to progress outstanding issues of the 2020 Vision report, taking into account the lessons learnt from this project and changes to the policy context. This final section of the report outlines a number of broad options for the philanthropic sector to influence change. It also proposes examples of some specific types of projects.

6.1 Context for thinking

The examination of progress towards implementation of the Vision (outlined in earlier sections) has identified that there are still many outstanding issues. In addition, it has become increasingly evident that an even wider range of issues than those directly addressed in the 2020 Vision project influence people's quality of life as they grow older and their care and support choices when they reach the stage of needing assistance.

As indicated in the previous section, the philanthropic sector appears well-placed to complement the role of others in responding to issues of population ageing:

- because of its independence it can stay above narrower sectoral interests
- it has capacity to maintain a strong focus on higher order outcomes for older people, rather than more narrow perspectives
- it can commission research that is not constrained by government sensitivities
- it is free to foster new strategic alliances
- it has a strong mandate to ensure that the needs of those who are most disadvantaged remain a high priority throughout any reform processes.

The insights gained through this review highlight that influencing policy and practice takes time and therefore to be highly effective any philanthropic involvement needs to have a long-term perspective, target strategically selected issues and work in strategic partnership with others who are focused on fostering change.

The 2020 Vision report concluded with comment on the way forward, providing a challenge for the wider philanthropic sector in advancing proposed reforms. These options are still relevant today.

A Way Forward for Philanthropy

The Myer Foundation has steered the visioning process to this stage. It has done this by bringing interested people to the discussion table, commissioning expert papers and through preparing this report. But no vision is realised by one report alone. The Myer Foundation believes that the philanthropic sector has a critical role in advancing the proposed reforms. Some actions that could be taken include:

1. Convene independent working groups from industry, government, community and the private sector to consider and act on proposed reforms. These groups may include independent 'round table' forums and community consultations.
2. Bring together an alliance of philanthropic bodies to support and monitor the reform process and to issue a regular score-card on progress.
3. Allocate funds to pilot programs to test models of reform suggested throughout the report and seek ways to reward innovation.
4. Initiate community consultation across generations to hear what Australians want for aged care in the future and what they think about new ways of accessing funding for that care.
5. Commission research to build understanding of critical aspects and trends in aged care.

(The Myer Foundation 2020: Vision for Aged Care in Australia, 2002, p. 40)

6.2 Broad options for influencing and improving the future

The insights developed through this review have highlighted a number of possible options for philanthropic involvement that would make a significant contribution.

Three high order issues

Three higher order issues that could usefully underpin thinking about possible focus and directions for involvement by philanthropic organisations in the ageing area have become evident and these are discussed below.

- **The views of older people need to be better understood**
Improved understanding is required of the views and experiences of older people and a greater focus on ensuring that these views have high prominence in thinking about higher order issues affecting system reform as well as lower order issues about the ways in which individual service models are developed and individual services operate. (Appendix 2 provides some insights into the perspectives of older people in order to demonstrate the diversity of things that are important to them.)
- **Multidimensional issues influence capacity for independence and positive ageing**
Increased understanding is required of the various elements that need to be in place for older people, particularly when they become less physically able, to continue to maintain their independence, their health and wellbeing, social connections and community engagement. The World Health Organization's *Global age-friendly cities: a guide* and the associated Checklist provide a very helpful summary of key aspects, based on consultations with older people.²
- **Old stereotypes and negative attitudes are not acceptable or helpful**
There is a need within the community, government, organisations and the media and among older people themselves for a far more positive attitude towards ageing and older people, and far better understanding of the capacities of older people and their positive contributions. This needs to challenge the limited stereotypes of older people and appreciate the diversity found among older people.

Initiatives to address these three issues can be expected to significantly change the nature of the debate around ageing and provide new perspectives to inform thinking about priorities for the future.

Key areas for focus

As highlighted throughout this report, ongoing reforms to improve the way in which the various elements of the care and support systems, and their interface with the health system, respond to the needs of older people remain urgent. The following proposes a focus for the philanthropic sector in influencing improvements for older people.

- **Maintaining a focus on the urgent need for reform:** There is an ongoing need for leadership in continuing to keep pressure on all players to make progress on resolving outstanding issues and to keep a strong moral voice in the debate about the inherent responsibility all stakeholders have to focus on achieving improvements for older people.

² The eight topic areas identified in the WHO Checklist are: outdoor spaces and buildings; transportation; housing; social participation; respect and social inclusion; civic participation and employment; communication and information; and community and health services.

- **Facilitating informed debate:** There is a need for ongoing discussion and debate, informed by new insights and research evidence, on how services and approaches can be remodelled or fine-tuned to achieve improvements for older people.
- **Supporting experimentation and action research:** There is a need to be able to experiment, to undertake action research and to challenge existing ways of providing services and outdated ways of encouraging and facilitating older people to maximise their wellbeing, their capacities for retaining as much independence as possible and opportunities for continuing active and valued lives.
- **Fostering a focus on equity and addressing disadvantage;** There is a need to ensure that attention is paid to seeking greater equity in opportunities for those older people who are most vulnerable or disadvantaged in particular contexts. Disadvantaged and vulnerable groups are likely to include, but are not limited to, the following: low-income private renters; people who are homeless or at risk of becoming homeless; people without personal support networks; people from non-English speaking backgrounds without English language skills; Indigenous elders; people in living in isolated rural areas; and people ageing with lifelong disabilities.
- **Challenging discrimination:** There is a need to encourage discussion about rights and about discrimination experienced by older people in order to influence reframing of outdated views and attitudes.

6.3 Specific examples of potential approaches

Following are examples of specific possible approaches for future philanthropic engagement in the ageing area.

Monitoring the reform process

As indicated above, overall there has been limited progress towards the Vision outlined in The Myer Foundation 2020 Vision report and many recent reports and submissions are highlighting many outstanding issues. Given the ongoing relevance of the report and Five Point Plan, one of the very tangible contributions that the philanthropic sector could make is to regularly and systematically assess progress towards the Vision set out in the 2020 Vision report. To have maximum impact it would be important to publicly report on this in a manner that seeks to strategically maximise influence in the political as well as the bureaucratic realm. The proposal outlined below is similar to the concept of issuing a regular score-card on progress identified in the 2020 Vision report.

One of the methods for regularly assessing progress is to **establish a short-term task group every second year**. A cross section of ‘experts’ would be asked to participate in the task group. The impact of the group would be strengthened by appointing a strong and independent chair to lead and guide its work.

The task group’s work on assessing progress being made on implementing the Vision could be informed in a number of ways. Task group members would draw on their own knowledge. Submissions about progress on all or particular aspects of the Vision could be sought from older people, the community and industry groups. A targeted consultation program could be developed to supplement insights in specific areas, giving high priority to the views and feedback of older people themselves. In addition, at the discretion of the sponsoring philanthropic organisation/s and chair, the group could also commission tightly focused research or other investigations to assist them.

The task group would report progress against the Vision, as well as identify areas requiring priority attention from government and various sectoral stakeholders. It might also propose any necessary modifications to the Vision if required to ensure it retains contemporary relevance as the understanding of ageing continues to develop.

In order to raise the profile of the issues and influence thinking, a public event could be held to report the task group's findings and provide an opportunity for ministers, shadow ministers and bureaucrats to respond. Media briefings would be arranged as part of the public event. To enhance the effectiveness of influencing political and bureaucratic thinking, private briefings could be held beforehand with politicians (both government and opposition) and senior bureaucrats.

As outlined earlier, to have a good chance of influencing policy requires ongoing engagement in the debate and being able to create as well as seize opportunities for influence as they arise. It would be ideal for the philanthropic sector to have an ongoing active presence in leading research initiatives and debates on social policy (for example as the Joseph Rowntree Foundation does in the UK). This may not be realistic at this stage in the development of the philanthropic sector in Australia. However, a forward commitment to facilitate a process, in collaboration with experts in the field, to report on progress every two years for an initial 4–6 years would place this activity on the calendars of organisations and individuals and create anticipation of structured periodic engagement by the philanthropic sector.

In addition, there may be specific developmental projects to which the philanthropic sector could contribute as a way of building the evidence base for the next assessment for progress towards the Vision. For example, an opportunity may be identified to trial a new practice model or approach; alternatively, there may be areas where there is considerable divergence between the views and evidence being provided on progress between government, consumer and/or industry groups and some independent research may be appropriate.

Facilitating development of a high level integrated strategic vision

There is the need for a high level integrated strategic vision and plan that builds on and expands the areas covered in The Myer Foundation 2020 Vision to ensure that Australia is well placed to respond to the challenges and opportunities arising from the ageing of the population.

Since the last national strategic framework developed by the Commonwealth Government was in 2001, there is an opportunity for the philanthropic sector to take a facilitative and leadership role in partnerships with other key players to draw on existing research and ideas to develop this high level integrated framework and present it to the Commonwealth and state and territory governments and peak industry bodies for their consideration.

Supporting development of good research and evidence, new approaches and fostering informed debate and discussion

There are a number of important ways in which the philanthropic sector can support the ongoing development of an evidence base and critical debate. This was one of the strengths of the Vision 2020 project. Examples include the following.

- Providing support for **research to advance improved policy understanding** and development in specific areas, for example, growing inequities in income and resources of older people, the impact of limited affordable rental housing models on people's opportunities to remain living well in the community, and how age discrimination limits opportunities for older people to remain actively engaged in the community using their skills in meaningful ways.
- Supporting **forums for discussion on key policy issues** at regional, state and national levels to facilitate more balanced and open exchange not constrained by normal sectoral power relationships.
- Supporting **development and piloting of new service models** designed to improve outcomes for older people, with a strong focus on action research, evaluation and information dissemination.

- Facilitating **cross-sectoral forums** of organisations and individuals who are endeavouring to respond creatively to issues affecting older people and documenting these **good practice approaches**, to ensure wider dissemination. (Topics could include: more creative approaches for addressing social isolation; ways of tackling ageist attitudes through intergenerational approaches; and ways of empowering older people to have more influence in local communities over the design and operation of services.)
- Cultivating and funding projects in partnership with appropriate organisations that **seek new ways to address specific issues of disadvantage** and vulnerability among sub-groups of older people. Examples could include:
 - improved housing models (with some support services) for frail older people in private rental
 - new shared equity models for older people with some assets who have potential for partial home ownership
 - more culturally appropriate services for people from culturally and linguistically diverse backgrounds
 - addressing challenges to ongoing independence for people living in isolated rural areas
 - addressing disadvantages experienced by Indigenous elders in exercising choice about their support and care.

Appendix A: List of people interviewed

- Associate Professor Andrew Jones, Director of the Queensland Research Centre of the Australian Housing and Urban Research Institute
- Brian Howe, Professorial Associate, Centre for Public Policy, University of Melbourne
- Clare Hargreaves, Manager Social Policy, and Derryn Wilson, Project Manager, Municipal Association of Victoria
- Corrinne Armour, Consultant Philanthropy, ANZ Trustees
- Elizabeth Ozanne, Associate Professor Social Work, University of Melbourne
- Fleur Bernasochi and Anita Hopkins, State Trustees
- Gerry Naughtin, formerly Associate Professor, La Trobe University and Senior Manager Ageing and Social Policy, Brotherhood of St Laurence and now CEO, Mind
- Gill Pierce, Program Manager, Policy and Research, Carers Victoria
- Greg Mundy, CEO, Aged & Community Services Australia (ACSA)
- Professor Hal Kendig, Faculty of Health Sciences Sydney University and Convenor of the ARC/NHMRC Research Network in Ageing Well
- Ian Winter, Executive Director, Australian Housing and Urban Research Institute
- Irene Bouzo, Policy Officer, Aged Care, Ethnic Communities Council Victoria
- Jeannine Jacobson, Manager, HACC and Assessment, Aged Care Branch, Department of Human Services, Victoria
- Jan Robins, Executive Officer, The Jack Brockhoff Foundation
- Professor Len Gray, Senior Principal Research Fellow, Australian Centre for Ageing, University of Queensland, and formerly Project Director for the 2020 Aged Care Vision Project
- Liz Gillies, formerly of the Helen McPherson Smith Trust
- Lawrence Joseph, Executive Director, the Gandel Charitable Trust
- Mike Woods, Alistair Davidson and Anthony Housego, Productivity Commission
- Peter Matwijiw, General Manager Policy and Research, National Seniors Australia
- Sue Hendy, Executive Director of the Council on the Ageing (COTA) Victoria
- Trudy Wyse, Melbourne Community Foundation

Appendix B: Increasing understanding of what matters to older people

[We are] the same as other sections of the community – we are still diverse – only older.
Give us choices! (Ministerial Advisory Council of Senior Victorians 2008)

In all the debates and discussions about the need for more funding and for structural reform to develop a more sustainable and more effective system of services for older people, the focus often loses sight of the outcomes for individual older people that services are designed to support – such as maximising independence and choice.

Older people have strong views on what is important to them, and understand the trade-offs that they sometimes need to make as their capacities and resources become more limited. However, it is often difficult for these views to be heard amidst the multitude of service provider representatives and government officers having their say. Limited effort is made to ensure prominence for the views and experience of older people themselves.

COTA Victoria, in collating comments from consultations with older people on **the meaning of independence**, reached the following conclusions (COTA Victoria Policy Unit, 2009):

They [older people] value being independent as much as the rest of the community. Independence is held as a core principle of personal identity, social participation and citizenship. Because our society is diverse, an individual's idea of what independence means will vary and their needs for support and strategies to maintain independence throughout life will differ.

Many people encounter physical decline as a barrier to maintaining independence in their activities of daily life. However older people identify that maintaining autonomy over decisions, exercising preferences and choices, and maintaining relationships and social connections are equally important as physical capacity, and are critical for sustaining individuals to be who they are as a person.'

The paper goes on to comment:

Service models that defined people in terms of their illnesses can foster dependency and institutionalisation. Alternatively, service models that are person-centred and focus on enabling an individual to achieve what is important to them promote independence and support positive ageing.

Social support and social activities are critical to maintaining the well being of older people. Aged services budgets need to direct resources to support what individuals identify as their key social networks, rather than creating more funded 'activities groups'.

Older people have a right to expect that services respond to their individual needs and support their independence in ways that are relevant and appropriate to their lives. Older people need to speak up more about the things that are most useful to achieve this. As consumers, older people have ideas and experience that will assist service providers to improve community support systems to meet their needs. The starting point for policy makers and service providers must be the views of older people about what is important to them in their lives. It is critical that they have input into policy and service development to achieve support systems that are more responsive to their needs.

For older people to maintain their independence and stay engaged with the community requires attention to the fine detail of daily living including the capacity to move around, despite reducing mobility or increasing frailty.

Consultations with older people as part of the City of Moreland's Ageing Well Project, which used the World Health Organization Checklist of Essential Features of Age-Friendly Cities, identified the following among other aspects:

- Access to public toilets was an important issue – 'Public toilets are a real issue and a massive problem. Many people can't go out if there isn't going to be toilet facilities. They need to be accessible, unlocked and clean'.
- Attention to the surfaces of footpaths and roads was important – so that they were safe to walk on.
- Not all people had access to computers, so printed information was very important – but 'Small print is a nightmare – even with glasses' (Moreland City Council, 2007).

Many local governments in Victoria have developed positive ageing or age friendly city plans and many have consulted widely with older people in the shaping of these plans. These plans provide key insights into what older people identify as important to them and are a resource from wider use.

A recent consultation process with older people undertaken by the Ministerial Advisory Council of Senior Victorians (2008) identified the following amongst the concerns of older people about transport.

Perhaps the most consistent priority for senior Victorians across the consultations was in relation to the mobility and transport barriers they face in maintaining independence and participation. Discussion pointed to three distinct challenges. Firstly the lack of level and connected footpaths, regular rest points and public toilets created physical barriers to maintaining mobility within local communities as people get older.

Second is the increasing need for a range of transport options ... An important component of a more responsive transport system is the need for more flexible medical transport options ...

The third is the challenge of accessing and safely using private transport and public modes of transport, particularly as there may not be adequate room or access for mobility aids and it can be difficult to reach a seat or ensure a secure hold before buses and trams take off. (Ministerial Advisory Council of Senior Victorians, 2008b)

The recent House of Representatives inquiry into Carers heard the views of more than 1,300 carers about the difficulties they experienced and what was needed to improve the support they receive. As stated in the report's foreword, 'its objective was to learn more about the needs of carers from the experts – that is from the carers themselves. (House of Representatives Standing Committee on Family, 2009, p.ix). This contrasts with other recent enquiries and reports into aged care, which have focused predominantly on the system issues from the service provider perspective. For example, of 104 witnesses before the recent Senate Inquiry into Residential and Community Care in Australia, only seven gave a consumer perspective, with only two of these direct clients of services and both of them carers. While this partly reflected its terms of reference, this inquiry, like so many before it, did not specifically seek to understand what was important to older people themselves.

There is a need to ensure that what is already known about the views of older people informs the design of policy and services. In addition, issues for consultation need to be framed with a focus on what matters to older people themselves. There is also a need to develop leadership among older people so that they can more strongly and confidently represent their views. Philanthropy can play a key role in encouraging all these areas.

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