

21 August 2025

Chair
Inquiry into aged care service delivery
Senate Standing Committee on Community Affairs

Via email community.affairs.sen@aph.gov.au

Dear Senator Allman-Payne

Inquiry into aged care service delivery

Ageing Australia thanks the Community Affairs References Committee for the opportunity to contribute to the Inquiry into aged care service delivery.

Ageing Australia is the national peak body for aged care, representing providers of retirement living, seniors housing, residential care, home care and community services. We advocate for our members, providing expert advice, resources and tailored services to ensure they deliver exceptional care to older Australians.

Ageing Australia's key recommendations relate to meeting demand for ageing at home, the wait list and wait times, ways to reduce risk for older people when programs are at capacity, assessment delays, access and equity, sector preparedness, and ICT readiness.

Recommendations:

R1 Immediate government investment to release 20,000 Home Care Packages to prevent further waitlist growth.

R2 Release 40,000 packages, within the first quarter, following the commencement of the new Aged Care Act.*

R3 Increase transparency through Home Care Package release and reporting plan to:

- a) substantially reduce the waitlist within 12-months to a one month wait,
- b) publish regional data on Home Care Package assessment and assignment, waitlist volumes and estimated wait times,
- c) maintain and publish a 24-month rolling schedule of package releases, reviewed quarterly, to enable agile workforce and operational planning.

R4 To ensure that older people receive the support they need, particularly during transition and implementation of the new Aged Care Act, the care management cap should be returned to 20%.

R5 Expand Commonwealth Home Support Program (CHSP) capacity through emergency CHSP block funding, targeted to regions with critical home care package waitlist levels and limited health sector supports.

R6 Strengthen training and capacity of Single Assessment System assessor teams, including accredited eLearning modules, KPI alignment to quality and transparency of performance metrics.

R7 Review and streamline triaging and referral processes to remove administrative barriers, empower providers to escalate high-risk cases directly and establish fast-track pathways for urgent participants.

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R8 Commit to appropriate lead times for significant operational changes and staged rollouts of complex future reforms, to prevent disruption to service delivery.

R9 Establish a \$600 million Digital Transformation Support Fund for providers, prioritising:

- System upgrades for interoperability and real-time reporting,
- Training for staff to uplift digital literacy,
- Cybersecurity enhancements.

R10 Staged implementation of non-urgent requirements, such as submitting evidence for purchases.

Wait list and wait times

At 31 March 2025, 87,597 people were waiting in the National Priority System (NPS) for a home care package (HCP) at their approved level.¹ To put this into context, this is higher than at March 2021 (87,162) when the Royal Commission into Aged Care Quality and Safety's (Royal Commission's) final report was released.²

As of 30 June 2025, the estimated wait time for all HCP was up to 12 months across all home care package levels.³ Data for April 2025 shows the wait time for Level 3 HCP increased over the quarter. Those already in the NPS waited eight months, while new entrants were projected to wait up to 12 months. This is a significant increase in the quarter and a stark contrast to the Royal Commission's one-month wait time target (Recommendation 39).⁴

In 2023-24, all priority groups waited 78 days at the 50th percentile and 216 days at the 90th percentile to be assigned an HCP following Aged Care Assessment Team (ACAT) approval.⁵ It is likely that wait times have increased further since this time. The Inspector-General of Aged Care in 2024 called for the implementation of a needs-based framework for the provision of aged care.⁶

The Royal Commission stated: 'Older people needing care do not have the luxury of time to wait for care to be delivered.'⁷ Current delays increase the risk of preventable hospitalisation, loss of independence, strain on carers and reduce the system's ability to achieve the reform objectives.

It is widely accepted that home care provision needs to grow, both in response to the growth in need and the clear preference of older people to live independently for as long as possible. As noted by the Aged Care Taskforce, 'The Australian community expects, and wants, older people to be able to live well and receive the care they need as they

¹ Department of Health and Aged Care (2025), [Home care packages program data report 1 January – 31 March 2025](#). AIHW Gen Aged Care Data.

² Department of Health and Aged Care (2025), [Home care packages program data report 1 January – 31 March 2021](#). (n.d.) AIHW Gen Aged Care Data.

³ Australian Government Department of Health and Aged Care, [Getting assessed for a Home Care Package | My Aged Care](#)

⁴ Royal Commission into Aged Care Quality and Safety (2021), [Final Report - Care, Dignity and Respect: Volume 1](#). Canberra: Commonwealth of Australia. p.236

⁵ Productivity Commission (2025), [Report on Government Services 2025, Part F: Community Services](#) p.19

⁶ Office of the Inspector-General of Aged Care [Statement by the Acting Inspector-General of Aged Care on the final report of the Aged Care Taskforce](#), 16 April 2024

⁷ Royal Commission into Aged Care Quality and Safety (2021), [Final Report - Care, Dignity and Respect: Volume 1](#). Canberra: Commonwealth of Australia. p.101

age,' and 'demand will increasingly shift towards home care.'⁸ This shift must be proactively supported through responsive supply planning.

The current model, where assessments occur well before package assignment, also creates additional challenges, due to the likelihood of an older person's needs increasing, sometimes dramatically, in the interim and because of the risk of confusion and loss of trust.

Resolving these delays requires both immediate investment and structural reforms.

Experience from previous package releases shows providers expand capacity in line with demand, avoiding unnecessary resourcing before packages are assigned. Additionally, in an Ageing Australia poll (involving responses from 196 home care providers on 19 August 2025), 98% of providers said they could increase the number of participants they support, with the greatest proportion indicating they could increase the number of packages by over 30%. Only 2% of providers reported that they are currently unable to increase their package numbers.

In March 2025, another member survey also confirmed providers can scale up services with existing workforce strategies in place.

In order to address the wait list effectively, more packages must be released as soon as possible. Information on when further packages will be released must also be made public, so that providers can plan increases to workforce and delivery ahead of time. Given the delay to the new Aged Care Act and the rapidly growing list, we believe that package releases from 1 November and 30 June should be front loaded, to ensure that providers can plan to build their capacity to deliver now. This will both reduce the impact of the slowdown in recruitment and growth over the Christmas period, and allow us to deal more quickly with the list as it stands.

Recommendations

R1 Immediate government investment to release 20,000 Home Care Packages to prevent further waitlist growth.

R2 Release 40,000 packages, within the first quarter, following the commencement of the new Aged Care Act.*

R3 Increase transparency through Home Care Package release and reporting plan to:

- a) substantially reduce the waitlist within 12 months to a one month wait,
- b) publish regional data on Home Care Package assessment and assignment, waitlist volumes and estimated wait times,
- c) maintain and publish a 24-month rolling schedule of package releases, reviewed quarterly, to enable agile workforce and operational planning.

*[*Quarter refers to a 3 month period]*

Meeting demand for ageing at home and in the community

Funding must meet the needs of those waiting for services today and the growing number of people that will require services in the future. Achieving this requires a viable and sustainable sector, with sufficient care managers and capacity to deliver quality services across the full 'continuum of ageing'.

The Aged Care Taskforce affirmed that 'the aged care system should support older people to live at home for as long as they wish and can do so safely.' The reduction of the care management cap from 20% to 10% puts this aim at significant risk, particularly at a time when participants need their care managers' support to navigate complex new arrangements. Provider experience shows that care management is a critical factor in

⁸ Australian Government (2024). [*Final report of the Aged Care Taskforce*](#), p.6

delivering high quality care, improving an individual's health and wellbeing. This is particularly critical in the early phase of an older person's care journey.

Recommendation

R4 To ensure that older people receive the support they need, particularly during transition and implementation of the new Aged Care Act, the care management cap should be returned to 20%.

Mechanisms to reduce risk to older people when program is at capacity

Reducing waitlists is critical, but immediate risk mitigation is also required for older Australians experiencing prolonged waits for HCP assignment.

Individuals with urgent or escalating care needs are at increased risk of:

- preventable hospital admissions (falls, infections, medication errors),
- premature entry into residential care, contrary to their preferences or community expectation,
- carer burnout and breakdown of informal care arrangements,
- deterioration in health, wellbeing and independence.

When this program is at capacity, risk is compounded by:

- over-reliance on Commonwealth Home Support Program (CHSP) services, which are not designed to meet complex care needs,
- increased pressure on General Practitioners (GPs) and hospitals, for non-acute services, contributing to system-wide ramping and bottlenecks,
- pressure on family and carers resulting in burnout impacting their own quality of life and ability to continue to provide unpaid care,
- existing cost-of-living pressures.

There is an opportunity to leverage the existing CHSP sector to stabilise regions where CHSP demand is significantly outpacing available services, thereby achieving health and wellbeing objectives for ageing in the home and community.

Recommendation

R5 Expand Commonwealth Home Support Program (CHSP) capacity through emergency CHSP block funding, targeted to regions with critical home care package waitlist levels and limited health sector supports.

Assessment delays and relationship to access and quality

The Single Assessment System is the backbone of an equitable and accessible Australian aged care system, but evidence from providers shows that it is not meeting its objectives nine months after implementation. The system requires attention and investment to meet community need.

While the SAS is designed to reduce wait-times and streamline assessments,⁹ delays have increased. Providers report inconsistent quality and gaps in information flow, where participants are required to repeat details once services commence. This is particularly concerning for people living with trauma.

Providers also report incomplete or outdated participant information, misalignment between assessed needs and actual support required, and participant needs changing prior to service commencement. This often means that providers need to re-assess

⁹ Department of Health and Aged Care (2024). [*Factsheet on the Single Assessment System*](#).

participants, creating unnecessary work and increasing delays to participants receiving the care they need.

In addition to the issues outlined above, individuals waiting for assessment are not reflected in waitlist data—resulting in underreporting of both HCP demand and wait times. In 2023–24, 50% of people with referrals waited up to 22 days for an ACAT approval, while people in the 90th percentile waited 138 days, up from 43 days in 2020–21.¹⁰

Recommendations

R6 Strengthen training and capacity of Single Assessment System assessor teams, including accredited eLearning modules, KPI alignment to quality, transparency of performance metrics.

R7 Review and streamline triaging and referral processes to remove administrative barriers, empower providers to escalate high-risk cases directly and establish fast-track pathways for urgent participants.

Sector preparedness

Aged care providers are preparing for an unprecedented volume of change as they align to the Support at Home (SaH) Program, while maintaining current service delivery.

As identified above, providers require information on the timing, volume, and distribution of future package releases, if they are to prepare to scale their workforces in advance of demand rather than in response to it—especially during this period of multiple reforms. In 2024, the Inspector-General of Aged Care highlighted the importance of giving providers sufficient time to prepare for change.¹¹

The success of the reforms is contingent upon a collaborative and transparent approach to sector transition planning. Sufficient lead times are required to enable providers to pivot to meet changing demands and needs, while delivering high quality services.

Recommendation

R8 Commit to appropriate lead times for significant operational changes and staged rollouts of complex future reforms, to prevent disruption to service delivery.

ICT readiness

The success of aged care reforms relies on a sophisticated digital ecosystem that enables real-time data exchange between providers, software vendors, and government systems.

Digital systems will facilitate interoperability across aged care, automate workflows to reduce manual processes and support efficient price development, compliance monitoring and reporting obligations.

The aged care sector faces a high-risk digital implementation environment leading up to 1 November. Providers have raised concerns regarding Services Australia system readiness for claims processes, the timeframe software vendors will have to build systems following release of all specifications, data flow limitations and increasing reliance on manual processes. We acknowledge and welcome the significant work that is taking place within the Department of Health, Disability and Ageing to rectify these

¹⁰ Productivity Commission (2025). [*Report on Government Services 2025 – Community services \(part F\)*](#), p.18

¹¹ Office of the Inspector-General of Aged Care (2024). [*2024 Progress Report - Implementation of the Recommendations of the Royal Commission into Aged Care Quality and Safety*](#), p.57

issues, but remain concerned about the ability of both government and providers to be adequately prepared for the new regime given the timeframe.

Without fit-for-purpose digital systems at the commencement of the new Aged Care Act on 1 November 2025, significant manual data management will create financial and operational burdens. This will increase the risk of older people experiencing disruption, confusion and loss of trust, particularly in the early months following 1 November.

In response, we believe that investment in digital readiness, and staged implementation of requirements that have no impact on the quality of care, such as submitting evidence for purchases until automated systems are ready, will enable providers (especially smaller organisations) to increase digital readiness and focus on care delivery.

Recommendations

R9 Establish a \$600 million Digital Transformation Support Fund for providers, prioritising:

- System upgrades for interoperability and real-time reporting,
- Training for staff to uplift digital literacy,
- Cybersecurity enhancements.

R10 Staged implementation of non-urgent requirements, such as submitting evidence for purchases.

Thank you again for the opportunity to provide feedback to the inquiry into aged care service delivery. Please contact Roald Versteeg, General Manager Policy and Advocacy at roald.versteeg@ageingaustralia.asn.au if you have any questions or would like to discuss our feedback.

Yours sincerely,

Tom Symondson
Chief Executive Officer