

## **Proposed changes to the User Right Principles 2014 - How CDC impacts on the delivery of home modifications and maintenance**

### **What is MOD.A?**

Home Modifications Australia (MOD.A), is the national body representing home modification and home maintenance service providers who specialise in service delivery to people who are frail aged or who have a disability. MOD.A's vision is to enable all Australians with disability and those who are frail-aged to continue to live independently and safely in their own homes where the provision of a home modification or home maintenance is what is required to make this possible. Our mission is to provide a resource for service providers, their clients and families across Australia through the coordination and promulgation of high quality evidence and practical support. Our purpose is to support service providers, strengthen clients, grow a sustainable home modification sector, cultivate leadership and foster respect for all.

### **Overview**

MOD.A is supportive of the overall aim of aged care reforms to deliver much more support to older people in their own homes, offering them the opportunity to age in place, and acknowledges the plans of DSS to expand the national availability of HCPs from around 66,000 to around 100,000 by 2017 (i.e. by around 34,000 ). We are hopeful that this number will continue to increase, with the result that the home will become the principal site of service delivery for older people in the near future.

Home Modification and Maintenance Services can enable a person to remain in their home and age in place aiding an older person's functional capacity, independence, and quality of life, as well as aligning with the principles of wellness, reablement and restorative approaches to care. An appropriate modification can improve the safety and independence of a client, reduce the ongoing cost of care, and promote a safer working environment for care workers.

The DSS Home Care Packages Programme Consultation Paper and Exposure Draft provides a guide to proposed amendments to the User Rights Principles 2014. The documents discuss how Consumer Directed Care (CDC) will be embedded into all Home Care Packages from July 2015. The intention is that consumers and providers will work in partnership to determine a consumer's needs and design a package of care where the consumer is provided with clear information on the funding available for their care and the use of funds to purchase services. Older people or their representatives will have greater control over their health and wellbeing through CDC which will allow them to make choices regarding their needs and goals, the types of care and services they wish to receive, the location of where services are delivered, and by whom. Involvement from consumers/their representative could be in all aspects of the package, including coordination of care and services, or a less active role in decision making.

Home modifications and Home maintenance services are among the options of services available for purchase within the Home Care Packages (HCP). With the principles of CDC individuals may access these services which have been proven to enable individuals to function independently and lead regular lives.

## Response

### ***Availability of home modifications for HCP recipients***

Given the proven capability of home modifications to enable people to function more independently within their home and undertake a wider range of tasks in a safe and accessible environment MOD.A is concerned about the lack of detail regarding the quantum of funds available to subsidise home modifications for those assessed as eligible for HCP. During the period of consultation about the new CHSP a good deal of emphasis was placed upon the differentiation of it as a “entry-level, low-cost” program, and the higher level HCP, with the latter to cater for those whose level of need was greater. The description in the CHSP manual regarding what home modifications are available says:

*Examples of home modifications could include:*

- *bathroom redesign (e.g. removal of shower hobs, changes to design lay out to improve accessibility)*
- *kitchen redesign (e.g. lowering kitchen bench tops, changes to design layout to improve accessibility)*
- *widening doorways and passages (e.g. to allow wheelchair access)*
- *grab rails in the shower*
- *appropriate lever tap sets*
- *hand rails next to steps*
- *installation and fitting of emergency alarms and other safety aids (p.26).*

The cap set on Commonwealth subsidies for home modifications in CHSP is \$10,000. In contrast the HCP manual refers to:

*modifications to the home, such as easy access taps, shower hose or bath rails assisting the consumer, and the homeowner if the home owner is not the consumer, to access technical advice on major home modifications (p.45).*

It offers no guide as to how modifications may be paid for through the packages themselves. If a person eligible for HCP is generally likely to require more support than one accessing CHSP, it is just as likely, if not more so, that the person will require home modifications. As it stands there is very little clarity about what level of funding is available to those on HCP for home modifications, and how this can be successfully afforded alongside the other supports they may require ongoing.

**MOD.A would like to see much more emphasis placed upon the home environment of those people who are eligible for HCP, with clear details of what funds from the packages may be expended on home modifications, what proportion of this is required to be paid for by the recipient, and how packages can be organised to ensure there are adequate funds available for ongoing support as well.**

### ***Information for consumers and providers about home modifications***

There is a perception amongst some home modification providers that the continued practice of single organisations holding packages of funds for individuals leads to a tendency toward the provision of ongoing services rather than one-off, environmental interventions such as home modifications. In this context CDC has the capability of changing current practice, but only if consumers themselves demand home modifications (and, as discussed above, access to funding for these is made explicit). There is a role to play for increasing consumer awareness of the benefits of home modifications. According to schedule 2 of the Principles 2014 Consumers have to accept responsibility for their own actions and choices even though some actions and choices may involve an element of risk. Given the complex and technical nature of home modifications it is essential that the quality of information provided to clients is accurate and geared towards the alleviation of risk. The Home Modification

Information (HMinfo) Clearinghouse is an information service tasked with collating, reviewing and creating the evidence base for best practice in modifications of the home environment to support people with problems in self care, participation and autonomy, and together with MOD.A there is potential to create a knowledge bank of modifications and how these can assist with common impairments individuals may face.

**MOD.A is well placed to provide detailed and quality information to assist consumers make choices and decisions about home modifications as part of their HCP options. MOD.A could also provide information and advice beyond its own membership to fund-holding organisations, regarding the information they in turn should provide to consumers to give them a real choice. With funding from DSS MOD.A can develop specific resources and strategies for disseminating information to various client groups.**

An individual's functional capacity and interaction within their home environment has to be comprehensive assessed to identify sources of support for a care plan, which could potentially include home modifications. HCP administrators/case manager's need to be able to identify when modifications could facilitate safety and independence for an individual (e.g. timely home modifications can enhance independence safety around the home for daily living activities and reduce the risk of falls as well as reduce functional decline and slow the impact of age related disability). There also needs to be wider recognition of how home modification services can reduce or make the need for other services unnecessary as well as enhance the work of other services. This points to a greater focus during assessment on the environment in which a consumer lives.

**It is MOD.A's position that each person eligible for HCP must undergo a separate, environmental assessment which accurately identifies the risks to the person in their home, and outlines the work that needs to be done to bring the environment up to the standard whereby the consumer can be reasonably expected to meet wellness and reablement goals.**

### ***Individual budgets and care plans***

While the increase in HCPs is welcome and CDC MOD.A would like more done to attach funding to individuals to help them facilitate choice instead of the funds being held by a service provider. Consumers are to be provided with an individualised budget linked to their care plan based upon their assessed needs and intended goals. While the costs of a home modification may initially appear to be higher than a daily service/s in the longer term this choice may be cheaper as home modification services have the potential ability to support a person whereby the need for other services may be reduced or unnecessary. Therefore, it is key that consumers are provided with a longer term budget forecast linked to ongoing services as well as a comparison of how a home modification may affect the need and use of certain other services. The fees and the lifetime caps on home modification costs must be included in budget discussions.

### ***Safeguards for participants who manage their own budgets and care plans***

The application of modifications to an individual's or family's home involves consultation and decision making, to ensure not only that they are fit for purpose but that the work also blends in with the remainder of the dwelling. MOD.A's research indicates that participants are already beginning to take greater control of their decision making regarding home modifications in their homes. For example, this includes participants making decisions about which builder/tradesperson is employed and being the main signatory for contractual agreements with builders/tradespeople in what is expected to be built as well as the costs to be incurred. When enabling more choice and control for participants it is even more critical to provide a list of qualified and/or registered builders/tradespeople for participants to select from. A registration system for all the professionals involved in the provision of home modifications will not only provide a safety mechanism for participants, but also provide them with

quality information in the selection process for who will be involved in assessing and completing the home modification.

**MOD.A is currently working on an accreditation system for the industry which would greatly assist a registration process.**