



# **OLD COLONISTS'** ASSOCIATION OF VICTORIA

## **Old Colonists Association of Victoria Federal Election Platform 2019**



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CEO

## ABOUT THE OLD COLONISTS' ASSOCIATION OF VICTORIA

OCAV is a leading not-for-profit retirement village provider offering a continuum of care from independent living, assisted living and aged care in Victoria. Our four villages in Berwick, Euroa, North Fitzroy and St Helena are home to 500 older Victorians in need.

OCAV was established almost 150 years ago by a group of prominent Melburnians to ensure that older Victorians in need had somewhere secure and affordable to live, support when and if they needed it, and a community in which they felt engaged.

Our mission remains unchanged. The need is greater than ever with an increase in single homeless women, a lack of affordable rental housing, limited public housing.

As a leading retirement village and aged care provider in Victoria, we work to provide affordable and safe housing for elderly Victorians in need, whether they live independently, or in supported or aged care living. Many of our residents have lived within OCAV villages for ten years and longer, maintaining relationships with friends and families.

Our services – both safe, affordable housing and support for older Victorians – are in high demand. We currently have a waiting list of 1,000 across our four villages and we are seeking sites and capital for additional villages to cater for this demand.

Our funding model: we support capital investment in affordable housing through contributions from those with financial resources and at the same time provide safe and dignified housing for those with very limited or no financial means.

## SOCIAL RETURN ON INVESTMENT

For every \$1 invested in OCAV, \$7.41 of value is created.

Additional value to the Australian Government of \$9 million each year occurs due to reduced health care expenditure.

Our provision of housing to people who would otherwise live in public housing provides the Victorian Government with a value of \$1.6 million a year.

## WHO OUR RESIDENTS ARE

- 53% of OCAV residents were either homeless or vulnerably housed before they moved into an OCAV village.
- 45% of our residents were in private rentals before moving to an OCAV village
- 81% of our residents are single, older women.
- 90 out of our 185 volunteers are OCAV residents
- All our residents have a need of some description be it financial, social or medical.

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## OUR FEDERAL GOVERNMENT ELECTION PLATFORM

This election platform has drawn on the views of our residents, our Conversations for Change series, and our volunteers and staff who daily witness the impact the lack of effective policies at local, state and federal governments on our residents.

OCAV is disappointed that improved fiscal performance is the driver for improved outcomes for older people. This seems to be at odds with the reality that Australia is not addressing the very real funding issues in aged care; that access to other health services, such as dental and optical, is limited to those who can either afford it or have private insurance; that the aged pension is not aligned to the real cost of living, and that care is seen to be the main critical factor in the lives of our elderly.

We know from our 450-strong residents that they want to live in and be supported by an age-friendly society. They want to access transport, services and information that does not require them to be digitally adroit, and they want to be able to volunteer, work and take part in social and cultural activities.

We know from our waitlist of 1,100 older Victorians that lack of accessible, safe housing, financial difficulties, poor health, and limited working options are challenging.

They want to be supported by policies which enable them to remain healthy, connected and independent for as long as possible. This includes changing attitudes to ageing and proper planning for an ageing population.

### **Our priorities are:**

- Develop a National Housing Strategy to meet Australia's identified shortfall of 500,000 social and affordable rental homes
- Fix the funding emergency in residential care and commit to ensuring funding matches the measured costs of delivering high quality care
- Invest in workforce growth and development
- Have a Minister for older Australians and aged care in Cabinet and develop a comprehensive national 'ageing well' strategy

OCAV calls on all parties to put in place strategies, supports and services that allow all older Australians to continue to lead happy, healthy and fulfilling lives.

OCAV calls on all parties to acknowledge that older Australians are active participants in their families, communities and economy, whether they are working, volunteering, or being unpaid carers for their partners, children and grandchildren.

## DEVELOP A NATIONAL HOUSING STRATEGY TO MEET AUSTRALIA'S IDENTIFIED SHORTFALL OF 500,000 SOCIAL AND AFFORDABLE RENTAL HOMES

OCAV is a member of the Everybody's Home campaign, which advocates that with real effort, homelessness can be halved in five years and end in 10.

We're calling on all parties to commit to a national action plan to end homelessness that:

- Addresses all the drivers of homelessness, including the lack of affordable housing, poverty and family violence.
- Rapidly rehouses people who are homeless and helps them stay there.
- Addresses the over-representation of Aboriginal people in the homeless service system.
- Commit to ending homelessness by 2030 by acting to prevent homelessness and delivering rapid access to the housing and support people need if they do lose their own home.

## INCREASING HOUSING OPTIONS FOR OLDER PEOPLE

At an OCAV Conversations for Change forum, Dr Owen Donald, Chief Commissioner, Victorian Building Authority argued that housing should be viewed as infrastructure, rather than a social need. He also called for older people to be included at every stage of later life in strategic and precinct level land-use planning; an allocation of land and housing developments dedicated to suitable affordable housing for older people; and greater public financial support (recurrent and/or capital funding) for suitable affordable housing for older people of limited means.

In addition to a national housing strategy and plan, we call on all parties:

- To commit to allocating dedicated suitable affordable housing for older people on all land and housing developments.
- To commit to greater public financial support (recurrent and/or capital funding) for suitable affordable housing for older people of limited means.
- To invest in a range of longer term affordable and public housing options for older people who are victims of elder abuse or homelessness.

## **MAKE NEW HOMES AGE AND DISABILITY-FRIENDLY**

Over the past two years OCAV has through philanthropic funding and its own resources invested in making its older-style units and cottages disability and dementia friendly. These included creating clear access paths to front doors, step-less bathrooms and front and back doors and making sure doors are wide enough for disability access.

According to the Australian Network for Universal Housing Design current housing designs do not work for many people including older people with or without mobility issues. All Australian housing industry leaders agreed to incorporate: doors, corridors and living spaces that allow ease of access for most people on the entry level; accessible paths of travel from the street or parking area to and within the entry level of a dwelling; and bathroom, shower and toilet that can be used by most people, with reinforced wall areas for grab-rails later in all new housing by 2020. Few have taken up the agreement. This is critical to the success of the National Disability Insurance Schemes and aged care reforms.

- OCAV calls on all parties to support the National Construction Code and to implement universal design features.
- OCAV calls on all parties to support reforms to Victoria's building regulations to ensure all new buildings are age-friendly.

## **AGEING IN PLACE**

Further funding is required to put supports in place that allow elderly Australians to 'age in place' independently. This is a priority as many either do not own or cannot afford a home in which to age, or are living in unsafe public housing. People with disability and older people have different accessibility needs, which are often not provided for in standard housing design, and this can exclude them from mainstream housing.

- OCAV calls on all parties to put in place funding so that universal design principles are adopted to increase housing that meets accessibility standards.
- OCAV calls on all parties to introduce recommendations made on building code accessibility standards in 2010.

## **ADDRESSING HOMELESSNESS AMONG OLDER WOMEN**

At OCAV 79% of our residents are women. Over 80 % of these women were single when they moved in and just under half were in private rental accommodation which can be precarious and subject to rent hikes. Almost all the single, older women residents at OCAV experience financial stress due to multiple life event impacts – divorce, parenting, lack of superannuation and savings. They know what it is like to live from day to day, and often battling the various siloed services of housing, health, aged care and disability.

OCAV calls on all parties to:

- Commit to invest and partner with us to develop more accommodation and support for the growing cohort of older women who do not go to shelters or homeless services.
- Invest in services and housing for older women who are escaping family violence or elder abuse: a special focus should be on investing in accommodation in regional and rural Australia.

## FIX THE FUNDING EMERGENCY IN RESIDENTIAL CARE AND COMMIT TO ENSURING FUNDING MATCHES THE MEASURED COSTS OF DELIVERING HIGH QUALITY CARE

OCAV is a member of LASA, and defers to its election submission regarding residential aged care funding, and particularly:

While Government recognition of the situation facing residential care providers is welcome, an extra \$3.30 per resident, per day over 18 months is unlikely to even cover the cost of anticipated wage increases. There is also no certainty that even this modest increase will be maintained after June 2020, which means there is no commitment to fix this problem.

Despite the funding pressure OCAV, like other providers, has continued to increase the number of hours of care per resident, but this cannot continue indefinitely. We make every effort to find efficiencies in back office and administrative functions rather than cutting direct service hours, but this has its own risks with human resource management and information systems accounting for two of the three most commonly failed standards.

Despite this pressure, we have invested in retrofits in some areas of our aged care facilities. However, this is not enough to meet current DBMAS needs, nor the increasing needs of high risk residents.

- OCAV calls on all parties to commit to longer-term reform of funding based on the principle that pay for providers should be based on the measured costs of delivering high quality care, with annual indexation that reflects actual increases in costs. Agreement to this seemingly uncontroversial principle would represent a significant shift in the way that funding for aged care is currently allocated.

A recent study commissioned by the Government as examined how the resources required to deliver care vary from resident to resident and between facilities. The study also measured what providers do now within existing funding constraints rather than what they would choose to do under a better funding model.

As a first step to a more appropriate funding model, OCAV calls on all parties to commit to:

- Increased funding of no less than \$10 per resident per day (about \$670 million a year) to put residential aged care on a sustainable footing while the Royal Commission completes its work, with extra investment needed for behavioural and psychological symptoms of dementia and rural and remote facilities also needed.
- To move towards a more appropriate funding model for aged care, OCAV calls on all parties to commit to:
- Funding research to identify measurable quality indicators that balance reliability, validity, timeliness, cost-effectiveness and the risk of perverse incentives. These

indicators also need to be benchmarked by considering factors beyond a providers' control such as the characteristics of clients/residents or the location of the service.

- Funding based on the average resources (including the mix of skills) required to deliver services to meet assessed need to the agreed benchmark, taking into account client characteristics and any other relevant factors.

## **PALLIATIVE AND END OF LIFE CARE**

OCAV has a strong record for palliating its residents at Liscombe House, its nursing home. Over the past year 19 residents chose end of life care at Liscombe House rather than die in hospital. Its nursing staff have received specialised training, and its wellbeing staff work with all residents coming into the nursing home to ensure their life stories are known and written down for use by nursing staff. This work has been done at OCAV's own cost.

OCAV is concerned that there is no clear action plan and deadlines regarding End of Life and Palliative Care.

We urge all parties to commit to:

- Identifying and addressing barriers to improved access to palliative care for people living in residential aged care facilities.
- Implementing approaches to support service providers of residential aged care facilities to provide access to palliative care services, rather than for instance, transferring patients to hospitals.
- Implementing initiatives to provide staff with information and training on palliative care.
- Finalising an updated National Palliative Care Strategy and ensuring funding is available to support initiatives that improve access to, and the quality of, palliative care for people living in residential aged care and home care.
- Implementing regular and ongoing data collection to better identify the provision and quality of palliative care for all who should receive it.
- Implementing measures to ensure that the education and training of all aged care workers includes "end of life care" as a basic competency and is included in the core curricula of all courses.

## INVEST IN WORKFORCE GROWTH AND DEVELOPMENT

Having the right staff with the right qualifications, in the right numbers is fundamental to delivering good quality care and ageing well. Estimates suggest that by 2050 the aged care sector will need to employ almost a million workers, almost triple the 366,000 people employed in 2016.

Aged care providers are competing with other growing areas of health and community services for staff with similar skills and work preferences. Staff in aged care receive around 15 per cent less than staff in similar roles in other industries according to analysis undertaken for the recent aged care workforce strategy. The challenges are amplified in rural and remote areas, where providers already often report experiencing skills shortages.

We call on all parties to commit to:

- Creating a voluntary register for aged care workers that can be used by the sector in anticipation of a possible mandatory scheme being recommended by the Royal Commission
- Putting personal care workers on the priority list for skilled migration, particularly if mandatory qualifications are introduced
- Providing an increase in pay to reflect these increased requirements on the condition that there is a commensurate increase in funding
- Funding research to better understand the mix of nursing, care, allied health and other staff that will best meet the individual needs of older Australians
- Supporting the Aged Care Workforce Council to implement the Aged Care Workforce Strategy.
- Investing in substantially more funding to build the capacity of the aged care workforce to deliver higher quality care, tied to the achievement of workforce KPIs developed by the Aged Care Industry Workforce Council, which is currently being established after the recommendations of the Aged Care Workforce Strategy Taskforce
- Providing funding to implement the recommendations of the Aged Care Workforce Taskforce made in its “A matter of care” report”, especially to build the capacity of the aged care workforce to deliver higher quality care.
- Implementing strategies to encourage Australian residents to pursue a career in aged care, including strategies that counter ageism in the Australian community

## HAVE A MINISTER FOR OLDER AUSTRALIANS AND AGED CARE IN CABINET AND DEVELOP A COMPREHENSIVE 'AGEING WELL' STRATEGY

We have an ageing Australia, no national 'ageing well' strategy, and a Minister for Senior Australians and Aged Care who is not in Cabinet.

- Raise awareness of and challenge ageism and ageist stereotypes.
- Seek government support for developing government policies and programs that challenge rather than reinforce ageism and ageist stereotypes. Develop evidence-based approaches to reduce and ultimately prevent ageism (with funding to support the approaches).
- Plan and promote the inclusion of new longevity and modern ageing paradigms in policies, programs and the community; to balance or complement those approaches that focus on disease, care and support models.
- Implementing financial literacy initiatives for older Australians.
- Develop approaches to help the community identify loneliness, or the risk of loneliness, among older people; and upskill the community to address it early before loneliness becomes serious and results in poor quality of life and health outcomes.

## MENTAL HEALTH

Mental health features highly in the many conversations that male residents have had with OCAV staff. Among their concerns are the exclusion of older people from community mental health services and some clinical services. The growing incidence of male suicide is also of concern to them: Australian men aged over 85 have the highest suicide rate in Australia.

OCAV calls on all parties to:

- Explore and act upon the barriers that older people are facing in accessing appropriate mental health services in the community, aged care and clinical services.
- Commit to funding services and community grants aimed at improving mental health among older people.

## NATIONAL DISABILITY INSURANCE SCHEME

From 1 July 2019, all older Victorians who do not meet the age eligibility requirements for the NDIS and have not previously received state-funded services will be forced to access services from the aged care system, which may not fully support their disability-related needs.

OCAV calls on all parties to:

- Confirm NDIS funding arrangements after 1 July 2019 and provide clear information about where older Victorians with disability can access assistive technology services.
- OCAV calls on all parties to fund community services to provide support for people over 65 with a disability living in the community who are not eligible for NDIS.

## **SOCIAL ISOLATION AND LONELINESS**

Social isolation, loneliness and finding friendship can be major issues for people living in Residential Aged Care Facilities. Older people receiving aged care at home can also be vulnerable to loneliness, even though they may have access to social support.

We urge all parties to commit to:

- Developing approaches to increase social connections, reduce loneliness and foster friendships for people living in Residential Aged Care Facilities and those receiving aged care support at home, including but not limited to increased participation in the Community Visitors Scheme.
- Developing approaches to help the community identify loneliness, or the risk of loneliness, in the community; and upskill the community to address it early before loneliness becomes serious and results in poor quality of life and health outcomes.

## **ORAL AND DENTAL HEALTH**

The oral and dental health system and funding options in Australia are currently structured similarly for all the adult population, yet the associated health, economic and service access issues are considerably different for older people, particularly for those on low incomes and those living in Residential Aged Care Facilities. There are co-morbidities associated with chronic disease in older people, and the addition of poor oral health further compromises healthy ageing.

Older people can have less available options to increase their income (than the broader adult population) to self-fund private dental and oral health services or to fund private health insurance that includes dental cover.

We urge all parties to commit to:

- Introducing an oral and dental health support scheme for older Australians on low incomes, and for people living in Residential Aged Care Facilities.
- Considering a scheme that would be similar in supports to the existing Child Dental Health Scheme but designed for older Australians.
- Implementing a new National Partnership on Public Dental Services for Adults (the existing partnership expires 30 June 2019)<sup>17</sup>, with the inclusion of performance benchmarks to provide adequate support for people in Residential Aged Care Facilities.
- Moreover, considering the inclusion of increased support for mobile dental services to people living in Residential Aged Care Facilities.

## **WORKING IN LATER LIFE**

For some older Australians, it is crucial to continue employment for financial reasons due to factors such as low superannuation or other savings, high costs of living, and living in the private rental market.

The OCAV urges all parties to:

- Implement initiatives to prevent age-related bias and unlawful discriminatory practices towards older people in employment, including strengthening the Age Discrimination Act
- Provide practical guidance to employers on mature age employment retention and attraction.
- Review and publish the participation rates in the Skills Checkpoint for Older Workers Program. Integrate the Skills Checkpoint for Older Workers with the Better Ageing –45 and 65-year online check-up
- Increase skills development support for older people, including retraining.
- Develop initiatives to address underemployment of older Australians.

## **RETIREMENT INCOMES**

There is a need for the retirement income system to be structured and communicated so that people are better able to understand and navigate the system to plan and access optimum and appropriate benefits. Moreover, related concessions and employment incomes people receive leading up to retirement can significantly affect retirement incomes.

We urge all parties to commit to:

- Commissioning a comprehensive, independent Retirement Incomes Review to review the development of the retirement income system and recommend to government to make it adequate, equitable and sustainable.
- Removing the \$450 per month pay threshold on the Superannuation Guarantee.
- Removing the ban on voluntary superannuation contributions for people aged 75 and over.
- Expanding the eligibility of the Commonwealth Seniors Health Card and associated concessions to a greater proportion of self-funded retirees on lower incomes

## **RENTAL ASSISTANCE**

A major challenge for many older people who are renting their home is being able to afford increasing costs for other essentials such as electricity, gas, food, medical and dental expenses. Moreover, economizing too far on these essentials can lead to increased health risk and social isolation. People living at this marginal level are at increased risk of homelessness.

We call on all parties to commit to:

- Increasing Commonwealth Rental Assistance (CRA) by 40%.
- Linking Commonwealth Rental Assistance support to median rents in state and territories, urban and regional areas, as there is considerable variation in the rents across these locations.

## **NEWSTART**

Many older Australians who are under the Age Pension age and who are without employment need to rely on a Newstart allowance to help meet costs of living. The current high cost of living means that many are drawing on savings, superannuation and other assets to meet living costs. Where older people do not have sufficient financial resources to meet the deficit gap between the high cost of living and the low Newstart allowance, there is a substantial risk of these older Australians living in poverty and sometimes becoming homeless.

We urge all parties to commit to:

- Increasing the Newstart allowance by \$75
- Review the Newstart means test for older people who are unemployed so that they do not have their Newstart allowance reduced so quickly when they have other income or assets.