

Senate Community Affairs References Committee

Inquiry into the Support at Home Program

Support at Home: A System That Has Departed from the Vision of the Royal Commission

Submission from Council on the Ageing NSW

The Royal Commission into Aged Care Quality and Safety envisioned a rights-based aged care system that would enable older Australians to live safely, independently and with dignity in their own homes.

The Support at Home program is not the system envisaged by the Royal Commission.

Rather than delivering timely, accessible and equitable care, the current system has created longer waiting times, increased costs for older people, reduced access to essential services and growing pressure on Australia's hospitals. The burden of these failures is being borne by older Australians and their families.

Council on the Ageing NSW submits that the Support at Home program has failed older Australians in five fundamental ways.

1. Older Australians are waiting almost a year for care.

The Department of Health, Disability and Ageing reports that the average time between applying for assistance through My Aged Care and commencing ongoing Support at Home services is 364 days. As at 31 March 2026, 100,191 older Australians were waiting for an ongoing Support at Home place. These figures are inconsistent with a system intended to provide timely access to essential care.¹

A rights-based aged care system cannot exist where older Australians wait almost twelve months for services that are fundamental to their health, independence and safety.

2. Older Australians continue to die while waiting for care.

Long waiting times are not simply an administrative failure—they have devastating human consequences.

The Senate Community Affairs References Committee has previously concluded that older Australians "continue to die before receiving the help they deserve, and to which they are entitled to receive."²

¹ Senate Community Affairs References Committee, *The Transition of the Commonwealth Home Support Programme to the Support at Home Program*, Chapter 5, citing the Department of Health, Disability and Ageing *Aged Care Act 2024 Wait Times Report* (average wait of 364 days from application to commencement and 100,191 people waiting as at 31 March 2026).

² Senate Community Affairs References Committee, *The Transition of the Commonwealth Home Support Programme to the Support at Home Program*, Chapters 1 and 5, evidence

No aged care system can be considered successful when people die before receiving care that has already been identified as necessary.

3. Older Australians are paying more while receiving less.

The Royal Commission did not recommend a system that shifts an increasing share of the cost of essential aged care onto older Australians.

Council on the Ageing NSW considers it fundamentally unacceptable that pensioners and Commonwealth Seniors Health Card holders are expected to make co-payments for essential aged care services.

These Australians have already been assessed as requiring support to remain safely at home. A pension is intended to provide a basic standard of living, not to fund essential aged care.

Access to essential care should be determined by need, not by an older person's financial capacity. Older Australians should not face an additional financial penalty simply because they have grown older and require care.

4. The failure of Support at Home is driving the hospital crisis.

The consequences of Support at Home now extend well beyond the aged care sector.

Older Australians who no longer require acute hospital treatment remain in hospital because appropriate home care is unavailable or delayed. This contributes to avoidable stranded patients, delays access to hospital care for others and places unnecessary pressure on the health system.

The Parliament has already recognised the connection between delayed access to home care and increasing numbers of older people remaining in hospital because they cannot safely return home.³

This is not simply a hospital issue. It is a direct consequence of a home care system that is failing to provide timely support.

5. CHSP should be strengthened, not folded into a failing system.

The Commonwealth Home Support Programme (CHSP) remains Australia's principal preventative aged care program.

It provides timely, low-level support that helps older Australians maintain their independence, reduces avoidable hospital admissions and delays entry into residential aged care.

regarding delayed discharge from hospital associated with insufficient access to in-home aged care.

³ Senate Community Affairs References Committee, *The Transition of the Commonwealth Home Support Programme to the Support at Home Program*, Chapter 7, Committee View and Recommendations.

The Senate Community Affairs References Committee has already recognised that proposed changes to CHSP are occurring within "a system already characterised by lengthy assessment delays and extended waits for service commencement."⁴

It would be a profound mistake to absorb CHSP into a system that is already failing to meet demand.

Instead, the Australian Government should strengthen, modernise and expand CHSP as Australia's primary early intervention program.

Conclusion

The Support at Home program has departed fundamentally from the vision established by the Royal Commission.

A rights-based aged care system cannot be one where older Australians wait almost a year for care, continue to die before receiving support, pensioners and Commonwealth Seniors Health Card holders are expected to contribute towards essential services, hospitals become increasingly blocked because home care is unavailable, and Australia's principal preventative aged care program is at risk of being weakened rather than strengthened.

The Royal Commission promised older Australians a rights-based aged care system. Support at Home has delivered something fundamentally different.

This Committee now has an opportunity—and an obligation—to restore the original vision of aged care reform.

⁴ Senate Community Affairs References Committee, *The Transition of the Commonwealth Home Support Programme to the Support at Home Program*, Chapters 1 and 5, evidence