

## **Budget Priorities Statement 2016-2017**

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#### 1. What is MOD.A?

Home Modifications Australia (MOD.A) is the industry and peak body representing home modifications nationally. With the national reforms to disability and aged care programmes, MOD.A evolved from a NSW-based council into a national organisation to meet the challenges of a dynamic community care system. MOD.A's Board and membership has widened to cover home modifications and home maintenance providers across all Australian jurisdictions.

MOD.A's vision is to enable all older Australians and people with disability to live independently and safely in their own homes through the provision of home modifications where required. 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.

MOD.A's work is bolstered by ongoing partnerships with people who are ageing, people with disability and their families, home care workers, designers and builders, and other industry and professional bodies. This policy statement is informed by the knowledge and experience of MOD.A members, evidence based research and the lived experiences and knowledge of people who are ageing and/or live with a disability.

### 2. Reading this document

The document has been written with the proposal for budget measures and then the specific budget measures placed at the front of the document (Section 3) with hyperlinks to background (Section 4) that includes the evidence and opinion which informs the proposal.

### 3. Proposal

Home Modifications Australia proposes that a number of budget measures be made to:

- provide incentives for home and property owners to build and to renovate to an accessible standard to mitigate the costs of customised home modifications later on; and
- improve access to subsidised home modifications for older people and people with disability in Australia, equitably and across a range of housing types and tenures

Details of these measures will be provided at 3.1 below, but they fit into two broad categories:

- 1) Funding and policy initiatives and streams which target individual home and property owners (such as private investors) and incentivise them to undertake structural renovations to a standard where their homes become more accessible and thus more suitable for ageing in place or accommodating people with disability. Measures would include specific taxation benefits for individual home and property owners, and increased financial and insurance products which could assist and reward people who renovate their homes to an accessible standard.
- 2) Consideration of how government dollars for home modifications are provided through programme and other measures. The purpose of these measures would be to better identify the quantum of funds which could

beneficially be spent by government and potentially save costs in other areas, such as aged care and health, what those funds should be spent on, and how those funds are most effectively introduced and allocated to maximise the benefit to consumers. Measures would also include specific projects undertaken by MOD.A to redress the fractured nature of the home modification sector and implement robust quality assurance mechanisms across the industry.

If the measures are not implemented the housing demands generated by the current reforms in disability and aged care will continue to be addressed separately and without reference to their commonality, with little opportunity for consolidation in the home modification sector and the benefits which flow from that. In particular:

- A quality standard is required to provide safeguards to consumers of home modifications, and to the funding bodies which subsidise them, and to drive quality in existing home modifications as well as identify future challenges and build quality frameworks around these. If standards vary across funding streams it will be very hard to establish a benchmark not only for subsidised home modifications but also for those undertaken privately, which will perpetuate the legacy of poorly designed and built housing which has to accommodate people with a range of mobility capabilities.
- There is work to do within aged care policy, with a cap on CHSP subsidies for home modifications possibly creating barriers to embarking on major home modifications which may be needed to maintain an older person in their home. More problematic from the perspective of the home modification providers is access to home modifications through Home Care Packages (HCP) with choices about high one-off costs for home modifications having to be made alongside allocation for necessary ongoing support services. As the aged care sector moves toward a single home-based program in 2018 work needs to be done to create a funding and administrative model for older Australians which is equitable, encourages sensible client contributions, and which ensures that older Australians who may be financially disadvantaged and/or renting rather than owning their homes are not more at risk at premature admission to residential care than are home owners.
- The disparate nature of the sector currently, organized by funding streams, is ultimately inefficient and costly to the government. These costs are diffused across various departmental programs and levels of government, and require a centralized approach, working with disability and aged care departments, health and housing, to achieve a consistency of approach and a common understanding of costs and quality in home modifications. The reforms taking place now represent a timely opportunity to do this, and MOD.A is well placed to lead this work.

### 3.1 Specific Budget Measures

The following budget measures are proposed by MOD.A to facilitate greater consumer awareness and buy-in to renovating to accessible standards, to better target government subsidies to those who require home modifications to enable them to remain in regular housing, and to coordinate the home modifications sector to deliver higher quality and more cost effective home modifications to people across Australia.

# Measure 1. Provide an opportunity for home owners to invest funds at a favourable tax rate for the purpose of undertaking home renovations to an accessible standard.

Tax incentives should be provided to individuals to encourage the building or renovation of their own homes to an accessible standard, which would in future render the cost of home modifications less. These incentives could build on the current ability to contribute voluntarily to superannuation before tax by enabling further contributions for accessible renovations to be included within the same concession up to the existing caps (\$30,000 per annum for people under 50 and \$35,000 for those over 50). Funds contributed for this purpose could be invested into a dedicated fund (either account or an annuity-style product) that can be redrawn for the specific purpose of home modifications. The fund could receive special treatment under current superannuation arrangement, taxed at the same rate but not restricted by preservation age limits.

## *Measure* 2. Direct tax rebates, similar to negative gearing, should be available to home owners who are ineligible for government subsidies, and who undertake accessible renovations.

Significant amounts of funds are spent by home owners on renovations, and this type of incentive could help to orient people toward planning for living in their homes as they age.

#### **Benefits**

There are significant benefits to individuals, to business and to government through the encouragement of private wealth into home modifications. For individuals:

- Those people who are affected and require homes to be modified in order to
  access mainstream housing or to remain at home as they age, will benefit from
  a broader application of grants and subsidies which will enable them to function
  with greater independence than without.
- In addition to benefits to health and wellbeing, home owners who receive
  subsidies for (and contribute to) quality home modifications are likely to see the
  value of their homes at least retained or increased, maintaining the equity in the
  home which provides a source of wealth for people as they age in place
- Home modifications done well and to specifications which directly address the functional needs of an individual can reduce the cost of their ongoing aged care due to the potential for reduced support services, in the form of client contributions;
- All of those who receive home modifications can expect a significant boost to their wellbeing, in terms of their autonomy and sense of belonging in a familiar environment, as well as their ongoing capacity to exercise control over their daily activities<sup>1</sup>.

There are a number of benefits to the business sector, and to home modification providers:

<sup>&</sup>lt;sup>1</sup> See Carnemolla, P. and Bridge, C. (2015), *Systematic Review: Evidence on Home Modifications*, Home Modifications Information Clearing House, UNSW, available at <a href="https://www.moda.org.au">www.moda.org.au</a>

- The demand generated by the NDIS for accessible housing, together with the scheme's high public profile, has the potential to increase general awareness about the benefits of accessible design. Actively promoting these design guidelines for both newbuild housing and renovations could expand demand for this work, particularly when myths about high costs attached to accessibility are dispelled.
- It is estimated that currently only 30% of home modifications are done using government subsidies and funded service providers, with 70% being done outside of any subsidised programme<sup>2</sup>. Encouraging more home and property owners to renovate to this standard will increase an already large and untapped market.

#### There are a number of benefits to government:

- The application of home modifications offers savings to ongoing aged care
  costs, given that well targeted and executed work can either negate or reduce
  the need for ongoing support either through CHSP or in HCP<sup>3</sup>. The Productivity
  Commission<sup>4</sup> has identified that interventions on the home environment done to
  universal housing design standards will minimize the need for home
  modifications.
- In aged care, in addition to the positive wellbeing and reablement outcomes to individuals home modifications deliver cost savings to government by keeping people connected to community and family and out of expensive residential care, and to individuals in respect of lower contributions to ongoing services.
- There are cost savings across departments within government and across levels of government if home modifications are provided and done well. In particular there are potential savings to Health budgets, with the prevention of falls and other injuries if modifications are applied as a preventative measure. The complexity of the Australian governmental system prevents easy analysis of the quantifiable costs, although in the UK there is evidence that agreements such as MoUs have led to cooperative arrangement amongst health, social service and local government agencies resulting in initiatives such as preventative adaptations to reduce the potential of falls and subsequent hospitalisation<sup>5</sup>.
- Availability of efficiently completed home modifications can enable hospital
  patients who have experienced falls to be discharged more quickly and into a
  safe environment.
- A commitment to accessible housing, and the requisite skills for home modifications, works toward the provision of an "intentional market" in a crucial area which could either progress or significantly hinder initiatives such as the

<sup>3</sup> Phillippa Carnemolla and Catherine Bridge (2011), *Home Modifications and their impact on waged care substitution* 1st ed. Sydney: Home Modification Information Clearinghouse, University of New South Wales. (July) [online]. Available from <a href="http://homemods.info">http://homemods.info</a>

<sup>4</sup> Productivity Commission 2015, *Housing Decisions of Older Australians*, Commission Research Paper, Canberra, p.89.

<sup>5</sup> See, for example http://foundationsweb.s3.amazonaws.com/4225/mou-project-final-dec-14-1.pdf

<sup>&</sup>lt;sup>2</sup> These are estimates only, yet to be adequately tested. See Bleasdale, M., McNamara, N., Zmudski, F. And Bridge, C. 2014, *Positioning Paper: DIY Home Modifications: Point-of-Sale Support for People With Disability and their Carers*. Sydney: Home Modification Information Clearinghouse, UNSW Australia. July [online], available: <a href="http://homemods.info/publications-by-hminfo/summary/diy-home-modifications-point-of-sale-support-for-people-with-disability-and-their-carers-positioning-paper#main-content">http://homemods.info/publications-by-hminfo/summary/diy-home-modifications-point-of-sale-support-for-people-with-disability-and-their-carers-positioning-paper#main-content</a>

NDIS and aged care reform. An all of government (joined up) approach<sup>6</sup>, and the consistent application of minimum standards <u>across a range of programs</u> could provide efficiency dividends. Greater efficiency and cost savings could also free up resources to enable investment in innovation, to address future demand and more streamlined delivery of home modifications.

# Measure 3. Provide tax concessions to investment property owners who make residential properties accessible and available to older people and people with disability.

To address the growing need for private rental properties which will service people with disability and older people who wish to age in place in the community, landlords should be provided with incentives over and above those available to owners if investment properties. In addition, the value of the accessible renovation should be excluded from any capital gains tax when the property is sold. This could either be achieved by proportionally valuing the accessible renovation against the total value of the property at the time of the renovation, and applying the same proportion at the point of sale. Alternatively a series of notional values for common accessible renovations (eg kitchens, bathrooms, door-widening etc) could be applied regardless of the property's value. Responsibility for the development and maintenance of this register could be a function of MOD.A, subject to Measure 4 (below).

# Measure 4. Provide tax concessions to investment property owners who fund the contributions made toward home modifications for existing tenants in their properties.

The same tax benefits as detailed in Measure 3 should be available to landlords who pay or contribute toward the client contribution for prescribed home modifications under funded government schemes. This would be calculated on the direct \$ value paid on the client's behalf for the modification.

#### **Benefits**

These measures add to the health and financial wellbeing benefits to individuals, to business and government as articulated in Measures 1 and 2, particularly extending the health benefits to individuals who are not home owners. In addition:

Greater access to a wider variety of private rental properties to people with a
diversity of abilities and needs will be achieved through incentives to landlords
to renovate properties to an accessible standard, and also to bear contribution
costs associated with home modifications for existing tenants. The expansion of
the market and the capacity for real estate professionals to increasingly specify
properties available to people who require accessible housing will broaden and
strengthen the market as a whole.

<sup>&</sup>lt;sup>6</sup> See Jones, A., de Jonge, D., & Phillips, R. (2008). The role of home maintenance and modification services in achieving health, community care and housing outcomes in later life. (123). Retrieved from <a href="http://ahuri.ddsn.net/publications/p20335/">http://ahuri.ddsn.net/publications/p20335/</a>

Measure 5. Provide funding to Home Modifications Australia (MOD.A) to develop, administer and resource a quality standard which will improve the quality of home modifications across all programmes and funding stream and in the private market, and drive innovation in the sector through an active programme of skills and best practice development.

Currently there is little expertise in designing and building to accessible standards, with the exception of those home modification providers funded (in the main) through the Commonwealth Home Support Programme (CHSP), state-based disability home modification programs and accident compensation schemes, and a small number of specialist building companies across the country involved in constructing and renovating homes. A stronger focus on improving the housing stock to a suitably accessible standard, ideally supported by changes in the NCC, would create an impetus to learn skills in building techniques and in working with clients who are vulnerable<sup>7</sup>. In future demand for building to accessible standards and working with vulnerable clients could increase, and the requirement for builders and tradespeople to be suitably trained and accredited could be incorporated into the professional development requirements attached to licenses and registration.

MOD.A is well placed, though its membership and its relationship with government departments and industry bodies, to consolidate the sector across funding streams, and to address quality issues and future demands. This would be achieved primarily through the development a quality standard for home modifications, applicable to this work wherever it is done and by whomever, and a range of supports, including training, to be provided by MOD.A as the body which takes responsibility for quality in the sector. This would necessitate funding for MOD.A to develop, monitor and review the quality standard, and to be able to provide advice and training to home modifications providers in a range of areas, including Occupational Therapy and building, and continue to work with governments and departments to ensure future programs which include home modifications are delivered in ways which ensure quality and efficiency.

MOD.A in this capacity would also be well placed to initiate and coordinate projects which stimulate investment by individuals and corporate entities into accessible renovations and home modifications.

# *Measure 6.* Develop within the Commonwealth Aged Care programme a specific programme to administer and fund home modifications and home maintenance work.

As part of the reforms working toward a single home-based aged care programme in 2018 a new administrative and funding initiative should be established which addresses the suitability of the home environment for older Australians who wish to remain in their own homes and provides funding for home modifications from within. This initiative would draw on the principles behind the Short Term Restorative Care (STRC) Programme, and would assess the suitability of the home environment in the context of

<sup>&</sup>lt;sup>7</sup> MOD.A is currently working on the development of a Quality Standard for Home Modifications, to be an effective safeguards and quality assurance tool for the delivery of home modifications to older people and people with disability.

the needs of the person, but be able to address the environmental issues prior to committing to ongoing support for the individual.

#### **Benefits**

There are potential benefits to government, specifically within aged care and across portfolios, in a specialised programme targeted at the quality of the home environment in which Australians will age in place, including:

- An ability to better identify the ongoing support needs of older people in environments which have already been modified to provide greater functional wellness, with potential cost savings on ongoing support services.
- Better targeted subsidies, together with incentives for owners of investor properties, will give greater access to home modifications to older people and people with disability who are financially disadvantaged and/or need to lease from the private rental market.
- A greater capacity to focus and develop responses to the diversity of need regarding home modifications, for example in assisting people with dementia to remain at home, and supporting people with vision impairment and other specific mobility impairments.

### 4. Background

Home modifications are defined as:

... changes to the home environment to help people to be more independent and safe in their own home and reduce any risk of injury to their carers and careworkers. Modifications to the home include changes to the structure of the dwelling e.g. widening doors, adding ramps, providing better accessibility etc, and the installation of assistive devices inside or outside the dwelling, e.g. grabrails, handrails, lifts etc (McNamara et al <sup>8</sup>)

In Australia home modifications for older people and people with disability have mainly been funded by the Commonwealth and state governments through the Home and Community Care Program. Services were provided with grants to undertake home modifications for eligible clients and to subsidise their costs. Home modifications for older people are now funded and subsidised under the Commonwealth Home Support Programme (CHSP), while people who receive Home Care Packages (HCP) are able to allocate funds from these and contribute to the cost of home modifications. Younger people with disability (under 65) are still able to have access to home modifications through state-funded schemes, which are likely to come to an end once the National Disability Insurance Scheme (NDIS) is fully implemented across Australia. Home modifications are paid for and provided on a full-cost recovery basis under the NDIS, as long as they, like other funded supports, meet the criteria of reasonable and necessary for the client.

Home modifications are also delivered through health services, to enable people who have been hospitalised and may remain mobility impaired to move back into their homes. Across Australia accident compensation schemes, such as the Transport Accident Commission in Victoria and the Lifetime Support Authority in South Australia, undertake home modifications for clients to enable then to live at home after they have experienced catastrophic injury. Eligible clients of the Department of Veterans Affairs (DVA) are also able to get modifications done to their homes.

Calculating the quantum of government funds spent on home modifications is dependent upon the data available. The HACC program Minimum Data Set (MDS indicates that in 2012-2013 a total of \$31.4 million was spent on home modifications for older people and younger people with disability across Australia. This figure does not include the subsidised modifications done in Health and DVA, In state-funded disability service programs and the NDIS, and under the various accident compensation and WorkCover schemes. It is estimated that these government-subsidised schemes constitute about 30% of the total home modifications market. The other 70% is done by home owners themselves, either DIY or through using tradespeople they have sourced independently, or a combination of both. There is no reliable data collected on the money spent on doing home modifications DIY or independently, although recent research has found that till receipts on common home modifications items from one major retail home improvement outlet in NSW outstrips the amount spent by both levels

<sup>8</sup> McNamara NK; Adams T; Bridge C; Carnemolla P; Quinn J, 2014, Consumer Factsheet: Arranging Home Modifications, Home Modification Information Clearinghouse, Sydney, University of New South Wales, <a href="https://www.homemods.info/publications-by-hminfo/consumer/consumer-factsheet-arranging-home-modifications#main-content">https://www.homemods.info/publications-by-hminfo/consumer/consumer-factsheet-arranging-home-modifications#main-content</a>

of government (NSW and Commonwealth) in that State on home modifications (through the Community Care Support Programme and CHSP respectively).

Home modifications are largely done on housing which belongs to the client and end user, or to their family. Increasingly older Australians will be living in rental properties (AHURI research), and whilst home modifications are able to be done in private rental properties the uncertainty over continuity of tenure, and the requirement for landlord permission, has the potential to make decisions about them more problematic. Public housing tenants can apply for home modifications, but these are generally done outside of the CHSP or equivalent disability program and undertaken by contractors engaged to do a variety of home maintenance and building work. Community housing organisations tend to operate on a similar model to public housing. Again, no data is available for this, and MOD.A views the use of regular building contractors, with no specific expertise in home modifications in these properties as problematic.

#### Why are home modifications needed?

Home modifications are closely associated with home support programs for older people and people with disability. The support needs of a person are assessed in the environment in which they wish to live, and with a stronger emphasis<sup>9</sup> on improving the capacity for people to be as independent as possible within their homes this increases the focus on the functional accessibility of the home and upon assistive devices which can be used by the client and/or their support workers. Utilising home modifications to customise the home environment to enable a person to age in place, or to facilitate access to regular housing for a person with disability, is in line with the operational principles of both the NDIS and all programs associated with aged care reform.

Many home modifications are required not only because a person's functional capacity has changed or declined, but because the environment they are living in is not suitable, either through poor design and building, or through a lack of maintenance over time. Older housing in particular has features which make it difficult for people with mobility impairments to access and navigate, such as baths, showers with hobs, stairs and narrow doorways (which impede use of wheelchairs, scooters etc). Home modifications are necessary in many cases due to these structural deficiencies which hinder the ability of people with disability to live in a variety of regular housing, and of older people to age in place. Despite there being an agreement<sup>10</sup> and commitment in place to build all new housing in Australia to a universal housing standard<sup>11</sup>, there has been little evidence presented that new building has adopted this standard at the expected rate, nor any strategy or commitment presented that the 2020 target will be reached<sup>12</sup>. A current proposal is in place to review an existing standard for adaptable housing,

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<sup>&</sup>lt;sup>9</sup> See Department of Social Services 2015, *Living well at home: CHSP Good Practice Guide*, available at: <a href="https://www.dss.gov.au/sites/default/files/documents/06/2015/good practice guide version web accessible pdf.pdf">https://www.dss.gov.au/sites/default/files/documents/06/2015/good practice guide version web accessible pdf.pdf</a>

The agreement, known as the 2020 Agreement, is represented (specifically p.34) in the 2010-2020 National Disability Strategy: An initiative of the Council of Australian Governments. 2011: Commonwealth of Australia: Canberra. Livable Housing Australia was established to achieve this initative and its guidelines can be viewed at: <a href="http://www.livablehousingaustralia.org.au/library/SLLHA">http://www.livablehousingaustralia.org.au/library/SLLHA</a> GuidelinesJuly2015-3.pdf

Australian Network for Universal Housing Design and Rights & Inclusion Australia, Report on the progress of the National Dialogue on Universal Housing Design 2010-2014. 2014: Sydney. Available [online] at: <a href="http://www.anuhd.org/wp-content/uploads/2014/NDUHD-Report-2014.pdf">http://www.anuhd.org/wp-content/uploads/2014/NDUHD-Report-2014.pdf</a>
12 Ibid pp. 3-5.

AS4299<sup>13</sup>, to adopt the expectations of the 2020 agreement and to respond to the housing priorities which aged care and disability policy require<sup>14</sup>. If this standard was reviewed in line with the proposal and in turn became a requirement to build or renovate to under the National Construction Code<sup>15</sup>, it would have the effect of rendering all new built housing much more structurally accessible, requiring only relatively minor modifications in future to customise features within the house to a person's individual need. It would also have the effect of requiring that major renovations would need to be done to the same standard, thus decreasing over time the need to incorporate large-scale structural rectification when home modifications are undertaken for the individual.

As home-based aged care takes over from residential care as the primary form of support to older people, and as the NDIS increases opportunities for people with disability to live with more independence in community settings, so the need for functional housing will increase. Alongside this will be an increased requirement to provide safe and healthy workplaces for the staff of services which provide ongoing, often physical and personal support to people in their homes. Modifications and structural renovations done to a specific standard, and certified, are likely to become the minimum standard in homes where support of this nature is provided.

#### What is best practice in home modifications?

Home modifications have been provided in countries across the world for several decades, and there is growing evidence internationally of a commonality of best standards in this area.

There is currently a conceptual and policy gap between the growing body of evidence presented to government about the utility of accessible housing, and the adoption of this logic when considering home modifications as a subset of home-based aged care programs. Whilst national disability policy, in the form of the NDIS, does not necessarily focus on cost/benefit arguments about housing and is concerned solely with supports and interventions which are of benefit to the individual participant, the insurance approach adopted validates home modifications as an early intervention which is not only beneficial to the wellbeing and functioning of the participant but which also has great potential to reduce the need for ongoing support (and costs attached) in the future.

Much more needs to be done to persuade home owners of the value to them of accessible design, and the way in which associated costs for this design can be absorbed into the cost of renovations. There are negligible additional costs to building to Livable Housing Australia (LHA) guidelines<sup>16</sup>, with estimates of between +0.1% and +0.3% to the total cost of new-build properties<sup>17</sup>. These would be further minimised if the National Construction Code (NCC) required all building to conform to these standards.

15 Details of NCC are available free via subscription at

http://www.livablehousingaustralia.org.au/library/SLLHA GuidelinesJuly2015-3.pdf

<sup>&</sup>lt;sup>13</sup> For details of the standard go to <a href="http://connectability.com.au/upload/AS%204299-">http://connectability.com.au/upload/AS%204299-</a> 1995%20Adaptable%20Housing.pdf

Available at: www.anuhd.org

https://services.abcb.gov.au/NCCOnline/Publications/Publications?year=NCCOnline.Web.Models.Publicati on Year

The LHA guidelines can be viewed at:

Visitable and Adaptable Features in Housing (Victoria RIS) 2009 p 68 http://www.scopevic.org.au/wpcontent/uploads/2015/01/Visitable and Adaptable Features in Housing.pdf

#### What is needed to improve the availability of home modifications?

Home modifications are essentially building works done to homes to improve their functionality for the person(s) living there. The work is impacted not only by government program policy and funding, but also by building regulations, licensing and, increasingly, strata legislation and rules<sup>18</sup>. Many of these vary state to state, with differing levels of involvement by local government in the certification of work done, as well as variations to the NCC based on climatic, topographical and other environmental considerations. It is currently MOD.A's role to interpret the various regulatory regimes which apply to both home modification and home maintenance work, and inform clients, providers and departments about the safeguards and assurance mechanisms which exist to protect consumers. It is also our role to identify gaps in these safeguards and to recommend how they can be addressed.

There is a need to increase consumer awareness and ultimately demand for new housing and renovations done to an accessible standard. MOD.A's role as a peak body is to raise awareness of the value of home modifications and accessible home renovations to home and property owners. We also continue to work constructively with parties to develop a workable set of accessible standards<sup>19</sup> and processes for their reasonable implementation on significant structural renovation.

Because structural renovations and home modifications can be costly, and represent a one-off cost to the property owner, there is a growing need to increase the range of options to both incentivise people to make this contribution, and of products to be available to affray the immediate costs and enable easy and inexpensive methods of repayment for loans which may be required. MOD.A has commenced working with providers such as Good Shepherd Microfinance to encourage the use of No Interest Loans Service (NILS) and low-interest loan products by home modification providers as a means of assuring client contributions can be made on low- to medium-level modifications. More work will be done by MOD.A in the future to expand the market for suitable products (with appropriate safeguards) for those who require higher-level, more costly modifications.

There are particular problems to overcome regarding equity of access and cost of home modifications in rural and remote locations, and in parts of Australia (particularly the Top End) where the costs of building is high due to scarcity of materials and high labour costs. Taking a national and cross-program perspective MOD.A is well placed to recommend solutions to the problems of supply which result in significant cost variations, and to also impact positively on supply by bringing the industry together and be more generally available.

Financial hardship currently impacts on the ability of older people to make client contributions for home modifications, and can impact on the decision to go ahead or not. The CHSP continues to espouse the principle from HACC that no client should be denied service on the basis of an inability to pay, and previously clients with no capacity to pay have been further subsidised out of block grant funds held by service providers.

<sup>&</sup>lt;sup>18</sup> Easthope H., van den Nouwelant R., 2013, *Home Modifications in Strata: Final Report*, City Futures Research Centre, Sydney, <a href="http://www.cityfutures.net.au/">http://www.cityfutures.net.au/</a>

<sup>&</sup>lt;sup>19</sup> See Australian Network on Universal Housing Design 2016, Proposal for Standards Development Project to Review AS4299 Adaptable Housing (1995) to align with the National Disability Strategy 2010-2020 (Livable Housing Design), available <a href="https://www.anuhd.org">www.anuhd.org</a>

The one-off high level nature of the client contribution for home modifications differs markedly from that provided for ongoing services, and represents a challenge for services to effectively "write off" funds for this purpose which should be used for future clients. This is particularly problematic for larger modifications where the net subsidy, should additional assistance be given for financial hardship, may exceed the \$10,000 cap on subsidy, which is disallowed by the CHSP guidelines. Without some clear mechanism, and potentially an administered fund specifically targeting financial hardship, there is the risk that people in this situation will simply not have access to home modifications, and therefore be more vulnerable to premature admission to residential care. Given the systemic barriers to home modifications in private rental accommodation a similar risk of admission presents itself, leaving the possibility that people who are financially disadvantaged and/or do not live in their own homes, may be more susceptible to admission to residential care than better off home owners.