

# Audit into the Effectiveness of CHSP

# Meals on Wheels Australia Submission

# 24 October 2025

### Who Are We?

Meals on Wheels<sup>™</sup> Australia Ltd (MoWA) is the national peak body representing over 590 individual Meals on Wheels (MoW) outlets that provide meals to around 200,000 older Australians. MoW services represent one of Australia's largest users of voluntary labour, with over 35,000 active volunteers involved in meal delivery and social engagement with older people. The core funding for MoW services comes from the Commonwealth Home Support Program (CHSP) with some services receiving up to one third of their revenue from Home Care Packages (HCP).

Some of our State Association members such as Queensland and jointly NSW and Victoria have made separate submissions either in writing or via the online form.

Our submission addresses the three key questions posed by the ANAO regarding the effectiveness of the CHSP, drawing on both qualitative and quantitative evidence.

MoWA is also a member of the National CHSP Alliance and supports their submission, which includes 10 design principles for the future of entry-level aged care.

### 1. Does the Commonwealth Home Support Program meet community need?

### Assessment

CHSP largely meets community need as Australia's entry-level, prevention-focused aged care program. However, capped funding and demographic growth mean **demand exceeds capacity**, particularly in **regional**, **rural**, **and remote (RRR)** areas.

# **What Works**

- **Timely access:** CHSP meals are often the first and only service available to older people living alone or isolated.
- **Local trust:** Community-based, volunteer models foster cultural safety and trust across CALD and Aboriginal communities.
- **Health impact:** Regular nutrition and welfare checks prevent deterioration and delay entry into costly home or residential care.

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• **Social benefit:** Each delivery creates contact and connection, directly reducing loneliness and anxiety.

### Where Need Is Unmet

- Funding levels have **not been rebased to population ageing**, forcing some providers to turn clients away or operate beyond allocation.
- No national waitlist conceals unmet demand; local services maintain shadow lists or close books. A recent survey of MoW services nationally found that 6% of services currently have a waiting list in place and 12% have closed their books to new clients at some time over the past 2 years. The capacity of many other services to expand is constrained by CHSP funding limitations and workforce shortages (especially of volunteers in our case).
- **Data blind spots** in DEX obscure outputs—e.g., meals provided under HCPs are not recorded as CHSP activity.
- **Providers in RRR thin markets** struggle to sustain operations due to transport costs, low density, and volunteer shortages.

### **Conclusion**

CHSP meets need where accessible but is **rationed by funding** rather than assessed need. Underfunding prevention undermines fiscal efficiency and accelerates entry into higher-cost care.

### 2. Are Commonwealth Home Support Program services delivered effectively?

# Frontline Effectiveness

Meals on Wheels providers deliver services that are **fast, flexible, safe, and relational**. Volunteers perform informal welfare checks with each meal delivery—an unpriced but vital safety function. Client satisfaction is high, complaint rates are low, and retention is strong. Effectiveness is demonstrated through:

- Reliable, safe, and timely meal delivery.
- Escalation of concerns through welfare checks.
- Partnerships with hospitals, GPs, and local councils enabling safe discharge and continuity of care.
- Community collaboration with schools, universities, and service clubs that build intergenerational cohesion.

# Value for Money

Volunteer-enabled delivery keeps **unit costs low** while achieving **preventive outcomes**. This is confirmed by the results of Huber Social research commissioned by MoWA – see <a href="https://mealsonwheels.org.au/wp-content/uploads/2023/05/HS">https://mealsonwheels.org.au/wp-content/uploads/2023/05/HS</a> MoWA-Social-Impact-Report-2023.pdf .

Every meal delivered by MoW combines nutrition, safety monitoring, and human contact—a low-cost intervention that prevents costly hospitalisation and residential care admission.

# **System Constraints**

- Short funding cycles impede investment in kitchens, vehicles, IT, and workforce.
- Workforce and volunteer strain and shortages threaten sustainability, particularly in RRR areas.
- **Fragmented IT and data systems** prevent accurate forecasting and coordination with HCP transitions.
- The Future Fit Program (a \$8.74m governance failure) highlighted poor oversight, weak procurement rules, and a lost opportunity to deliver fit-for-purpose digital tools to the sector.

### Conclusion

Service delivery at the frontline is **highly effective and efficient**. System-level effectiveness is constrained by governance failures, short-term funding, and poor data infrastructure—issues within Commonwealth control, not generally provider performance.

# 3. Is the Commonwealth Home Support Program meeting its objectives?

# **Performance Against Objectives**

CHSP demonstrably supports older Australians to:

- Remain at home longer.
- Maintain social and emotional wellbeing.
- Access culturally appropriate, locally trusted services.
- Engage with community and volunteers.

# **Shortfalls**

- Funding has not kept pace with demographic and inflationary pressures.
- Inconsistent unit pricing across providers undermines equity and sustainability.
- **Data invisibility** (e.g. HCP-related meals) masks the true contribution of CHSP providers.
- Policy uncertainty beyond 2027 deters workforce and capital investment.
- The shortcomings of the existing CHSP grant model include short term contracts, inconsistent and baseless unit pricing, inadequate indexation, lack of a clear and consistent definition of a meal unit, lack of growth funding (or redistribution of funding) where community needs shift, and inflexibility of service delivery within and across service types.

### **Conclusion**

CHSP meets its objectives where stable funding and access exist. Structural and governance weaknesses—not service design—limit consistency and reach.

# 4. Future Arrangements: Support at Home (from July 2027)

Meals on Wheels services express **serious concern** that merging CHSP into Support at Home without:

- A sustainable unit price,
- A fixed + variable funding model, and
- Proportionate administrative design will render many services non-viable, especially in thin markets.

The absence of clear policy direction beyond 2027 is **blocking multi-year planning** for workforce, fleet, and kitchen investment.

Transition risk is evident: clients approved for HCPs often wait up to **18 months** for package activation, losing CHSP access in the interim. This creates dangerous service gaps and underscores the need for a **demand-led prevention buffer** within CHSP.

### 5. Recommendations

### 1. Ease rationing and invest in prevention.

- o Expand CHSP capacity in line with assessed need and demographic growth.
- Allow CHSP access irrespective of HCP status.

## 2. Fix forecasting blind spots.

- Provide CHSP providers with real-time visibility of assessments and HCP transitions.
- Implement event-based notifications and dashboards within My Aged Care.

### 3. Rebase pricing on real costs.

 Establish transparent, equitable per-meal pricing, recognising regional cost drivers and welfare checks.

## 4. Guarantee stability.

• Move to five-year contracts to enable workforce and capital investment.

### 5. Correct visibility and measurement.

- o Count HCP-associated meals in DEX for accurate planning and accountability.
- Support development of national minimum data set for meals and other CHSP services.

### 6. Fund the welfare check.

 Recognise social contact and safety monitoring as a funded output linked to wellbeing and prevention outcomes.

# 7. Strengthen governance and probity.

 Apply ANAO's Future Fit audit lessons to ensure transparent procurement and deliver sector-ready digital tools.

# 8. Confirm CHSP's policy role beyond 2027.

 Define CHSP's ongoing role in Support at Home and establish a sustainable future funding model (including base funding to maintain capacity and variable funding based on older people's assessed needs).

# 9. Maintain and fund peak-body capability.

 Resource MoWA and State Associations to provide surge coordination, governance support, and innovation tools.

### 6. Conclusion

The Commonwealth Home Support Program remains one of the most effective and socially valuable aged-care investments in Australia. Meals on Wheels and other CHSP providers deliver consistent, trusted, prevention-focused outcomes at scale.

The challenge lies not in frontline performance but in system design: funding adequacy, policy certainty, governance, and data transparency.

With pragmatic adjustments now—rebased pricing, five-year stability, and visibility reforms—CHSP can continue to safeguard independence, prevent premature institutionalisation, and sustain community resilience for decades to come.

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