



# Social, emotional and spiritual care

The Royal Commission declared that it is crucial for older people to ‘live a self-determined and meaningful life through expert clinical and personal care services, provided in a safe and caring environment’. The new *Aged Care Act 2024* (new Act) codifies this right in aged care.

However, efforts to implement this recommendation of the Royal Commission have fallen short of ensuring access to the social, emotional and spiritual care essential to many people’s wellbeing and their ability to age with dignity.

## Why is social, emotional and spiritual care important?

Older people consistently tell the Inspector-General that what matters to them most as they age is maintaining their social, cultural, emotional and spiritual connections. While people want good clinical care, it’s typically not their first priority; they want the independence to maintain these connections and the support to fulfill these critical aspects of their quality of life.

The definition of high quality care in the new Act recognises the need for holistic, person-centred care that encompasses broader wellbeing – social and cultural connection, spirituality and ties to place.

However, the government’s funding mechanisms to support the new Act only *fully* fund clinical (and some elements of restorative) care. The aspects of holistic, person-centred care, prioritised by older people, and indeed the Royal Commission, will either attract a co-contribution or fail to attract any funding support at all. This undermines the legislated ambition that these aspects of care are core to aged care service delivery.

## What needs to change?

- In residential care, funding attached to ‘care minutes’ is predominantly focused on the delivery of clinical care. The existing funding model does not provide equivalent support for the provision of lifestyle activities or allied health. Greater emphasis on resident social, emotional and spiritual wellbeing could be achieved by amending existing funding streams.
- With respect to Support at Home, the introduction of co-payments for personal care has the potential to limit people’s access to services and activities that support broader wellbeing. While it may be considered appropriate that people who can afford to do so contribute to the cost of their care where they can, the Inspector-General is concerned that some older people will forego important aspects of care that are vital to their social and emotional wellbeing if they cannot afford the cost and/or are unable to negotiate hardship provisions. This could see people miss out on critical services that enable social and community connection.
- For Aboriginal and Torres Strait Islander people, the ‘mainstreaming’ of aged care services will reduce access to critical, culturally embedded dimensions of care, including the social, emotional and spiritual care that are central to the delivery models of Aboriginal Community-Controlled Organisations.



Many older people believe living a fulfilled, self-determined life is far more important than their clinical care.  
In the context of person-centred care, government funding mechanisms must embed this.