

enkindle

OUTLOOK REPORT 2026

The reality of reform
for home care

Part 3 in a 5-part series:

Aged Care Act 2024
Transition Experience





We'd like to sincerely thank the 300+ in-home aged care leaders who generously shared their time and perspectives in our 2026 Home Care Provider Outlook Survey. Your insights have deepened our understanding of the sector's evolving challenges and opportunities in this critical reform period.

We hope this report reflects your voices and informs the decisions of policymakers and stakeholders working to build a stronger, more sustainable aged care system. Your ongoing leadership and commitment to shaping the future of home care are commendable; they are essential. We are grateful for your continued partnership in driving meaningful change and progress across the sector.



Enkindle Consulting acknowledges the Aboriginal and Torres Strait Islander peoples as the First Nations of Australia and the Traditional Custodians of the lands we live and work in. We honour their enduring connection to land, sea, country, kin, and community, and we pay our deepest respects to Elders past, present and emerging as the custodians of knowledge and lore.

Disclaimer: This research report is intended for informational purposes only and should not be construed as professional advice. The findings, opinions, and recommendations presented herein are based on our analysis and interpretation of available data and may not necessarily reflect the views of all stakeholders. Readers are encouraged to conduct their research and seek expert guidance before making any decisions based on the information provided in this report. This resource may not be reproduced or circulated without our prior written consent from Enkindle Consulting. © 2026 Enkindle Consulting Pty Ltd

Introduction

Each year, Enkindle Consulting's **Home Care Provider Outlook Survey** gives a voice to home care providers across Australia capturing what's really happening on the ground during times of change.

In 2026, that voice matters more than ever.

This report brings together the perspectives of over **300 home care leaders and professionals** from across the sector. Their insights reflect the lived experience of navigating one of the most significant periods of reform in aged care history, including the rollout of the new Aged Care Act, the introduction of the Support at Home program, and the pending transition of Commonwealth Home Support Program (CHSP).



Introduction

To make the findings easier to explore and more digestible, we are sharing the survey results as a **five-part series**, each focusing on a key area of reform and provider experience:

- **Part 1: The State of Home Care - Provider Experience and Outlook 2026**
- **Part 2: Support at Home Transition Experience**
- **Part 3: Aged Care Act 2024 Transition Experience**
- **Part 4: CHSP to Support at Home Transition Readiness**
- **Part 5: Technology & Digital Capability**

This publication represents Part 3 of the series focusing on providers' experience of transitioning to and embedding the new Aged Care Act in practice, and the realities of implementing change across organisations.

It explores the key challenges encountered so far, how governing bodies are engaging with new responsibilities, and how the associated provider model is operating in practice, including the pressures and risks emerging across provider networks.

Importantly, this year we are also doing something different.

Alongside the data, we are sharing an uncut view of provider commentary, presenting full and frank insights from providers, in their own words. These reflections highlight the real-world impacts of reform on organisations, workforce, and the older people they support.

Our aim is simple: to ensure the voices of providers are clearly heard, not filtered, softened, or summarised, but shared in a way that reflects the reality of the sector right now.

We hope this third release provides a clear and grounded view of how the sector is experiencing the transition to the new Aged Care Act.

What we're hearing

Across the responses, there are some really clear and consistent messages coming through about the transition to the new Aged Care Act. While most providers understand the intent of the reforms and what they're trying to achieve, the reality on the ground has been a lot more complex.

The transition is still very much a work in progress, with organisations navigating changing guidance, system issues, and increasing compliance requirements all at once. What we're hearing is that providers are putting in a huge amount of effort to make it work, while still trying to deliver day-to-day care, often without the level of clarity, time, or support they actually need.

There are growing questions about whether the new legislation is delivering better outcomes for older people

While the intent of the Act is widely supported, providers are not yet seeing clear improvements in care outcomes, with many questioning whether the current approach is shifting focus away from care and toward compliance.

“Paperwork is at the core, with no clear benefit for older people.”

Embedding the Aged Care Act is proving more complex and resource-intensive than anticipated

Providers are navigating evolving guidance, unclear requirements, and significant operational change, often with limited time and support.

“We were expected to interpret and prepare for substantial changes with minimal support.”

Governance expectations have increased significantly, but confidence is still developing

Boards and responsible persons are engaged, but are operating in an environment of uncertainty, increasing workload, and limited practical guidance.

“The onus on our volunteer board has been extreme.”

The associated provider model is under strain and not operating consistently across the sector

Unclear definitions, inconsistent expectations, and increased compliance burden are creating confusion, duplication, and tension across provider networks.

“We have over 40 agreements - everyone wants something different.”

Compliance requirements are creating significant administrative burden, often without clear benefit to care outcomes

Providers and associated providers are managing increased documentation, evidence gathering, and reporting requirements, diverting time and resources away from service delivery.

“The amount of documentation required far exceeds what is needed.”

Provider networks are changing, with some associated providers opting out and costs increasing

Increased compliance expectations are impacting participation, pricing, and availability of services, with flow-on effects for clients.

“We have had almost half of our associated providers opt out. Others have increased prices to cover their increased admin.”

PART 3

AGED CARE ACT 2024 TRANSITION EXPERIENCE

What we're hearing

The system is placing pressure on access to services, particularly in rural and thin markets

Loss of providers, increased costs, and complexity are creating additional challenges for service availability, especially in regional and remote areas.

“Loss of providers has a bigger impact in rural areas.”

Providers are calling for a period of stability, to embed what is already in place before introducing further reform

There is a strong and consistent message to slow down, clarify expectations, and allow time for the system to stabilise.

“Give us time to embed before introducing more change.”

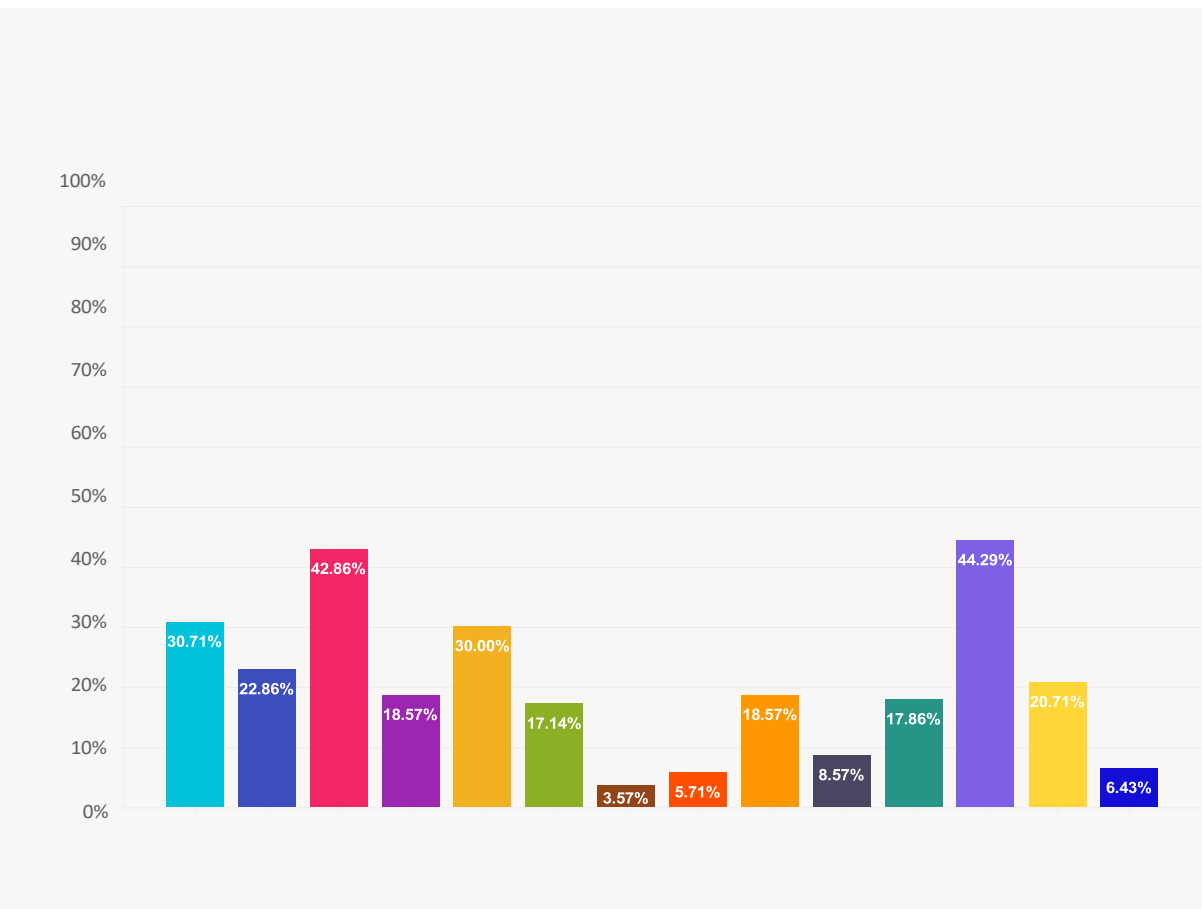
Clearer guidance, consistency, and practical support from government are critical to successful implementation

Providers are seeking clearer direction, aligned messaging across agencies, and practical tools to support compliance and delivery.

“Provide clear and consistent information. We need to know what ‘good’ looks like.”



What have been the biggest challenges so far?



- Managing the cost of delivering services and financial viability concerns
- The delayed provision of detailed information and guidance by the government, the department, and the commission
- Performance and quality of the new Single Assessment System
- The volume and timing of guidance released by the government, the department, and the commission
- Increased accountability on registered providers for associated providers
- Implementing a large amount of change without transition funding or grants
- Requirements for new client agreements and associated information provision
- Problems with government IT systems
- Change management and change fatigue
- Delays in receiving answers from the department and/or the commission on questions submitted
- Governing bodies' lack of understanding of new regulatory requirements
- Other (Please specify)
- Regulatory changes are not culturally appropriate or inclusive
- Lack of regular scheduled engagement by the department and/or commission

Providers are experiencing delays, lack of clarity, and difficulty engaging with the Commission and regulatory bodies:

- “Delays in receiving answers from the department and/or the commission.”
- “No resolution or significant time for resolution to occur.”
- “When you reach out for clarification, you are sent to the community of practice to ask the question.”
- “Even our funders and policy makers don’t know the answers.”

There is a lack of consistency and clarity around regulatory interpretation and expectations across the sector:

- “Each provider is interpreting the requirements differently.”
- “There are different expectations and ways of proving compliance.”
- “Uncertainty around enforcement approach and regulatory interpretation.”

Providers are struggling with the delayed, inconsistent, and evolving guidance from government:

- “Delayed and fragmented guidance has created confusion.”
- “Information was released late or updated multiple times.”

There is strong frustration with the volume and timing of change, particularly around key rollout periods:

- “The scale and timing of reform has been a major challenge.”
- “Major changes were released over the Christmas period with limited support available.”
- “We were expected to interpret and prepare for substantial changes with minimal access to assistance.”

Providers are experiencing significant administrative burden and compliance workload:

- “The extensive care management documentation required feels more like legal or billing compliance than care.”
- “Administrative burden is diverting time away from direct care.”
- “The system prioritises paperwork over meaningful client engagement.”

There is a clear theme of implementing large-scale change without adequate transition funding or support:

- “The reforms have required expanded reporting, governance, policy rewrites and training.”
- “The level of funding provided does not reflect the cost of reform.”
- “We have spent well over \$200,000 to implement changes.”

Financial pressure and viability concerns are closely linked to reform implementation:

- “Managing the cost of delivering services is a major challenge.”
- “Financial strain due to system upgrades and consultancy support.”

There are widespread issues with government IT systems and digital platforms:

- “Issues with portals, claiming platforms and integrations.”
- “Extensive time spent troubleshooting system-related problems.”
- “No resolution or long delays when issues are raised.”

The Single Assessment System is not working as intended:

- “Assessment delays are impacting access to care.”
- “System quality and outcomes are questionable.”
- “Clients are waiting extended periods for assessments.”

Providers are managing increased accountability for associated providers, creating additional burden:

- “Managing a large number of associated providers is complex.”
- “Different providers are interpreting requirements differently.”
- “This is creating inconsistent expectations and increased administration.”

There is a strong sense that implementation has been poorly executed:

- “The Department has wasted significant time and money for poor outcomes.”
- “The obvious lack of industry knowledge and lived experience has been demonstrated.”

Providers are experiencing change fatigue and workforce pressure:

- “Change fatigue is a very real issue.”
- “Staff are exhausted and under significant pressure.”
- “EAP support and stress leave are increasing.”

The scale of reform is impacting workforce capacity and service delivery:

- “Workforce capacity has been diverted away from direct care.”
- “Back-end resources are stretched managing implementation.”

Providers are struggling with lack of clarity and “grey areas” in requirements:

- “Ongoing grey areas and evolving guidance make compliance difficult.”
- “Frequent updates are forcing repeated changes to policies and processes.”

Client impacts are already emerging as a result of implementation challenges:

- “Slowed access to services and increased delays.”
- “Clients receiving incorrect information from government channels.”
- “Stress and confusion for clients and families.”

Providers feel the system is not designed with home care in mind:

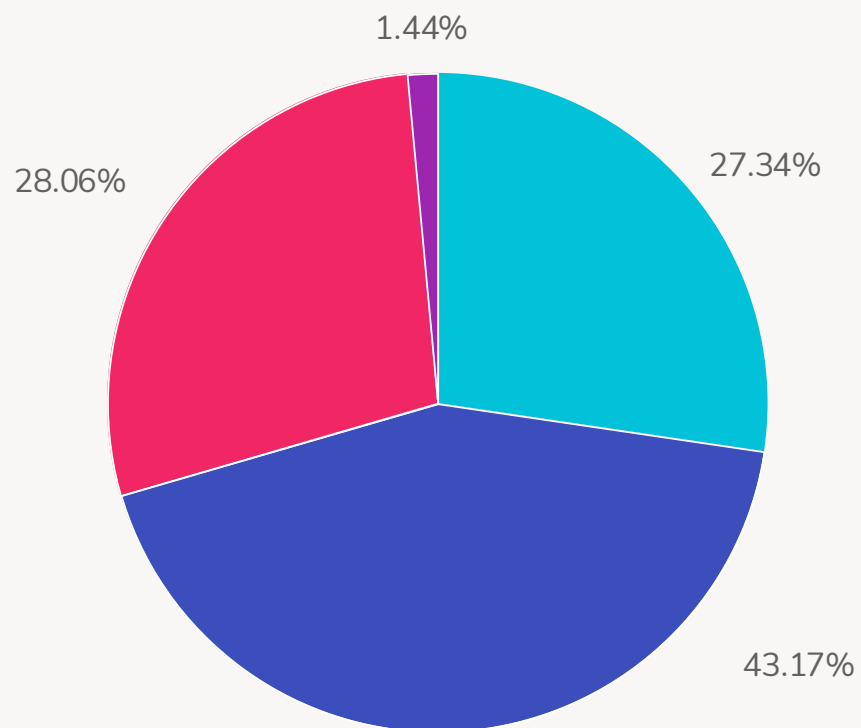
- “The system appears to have little provision for home care providers.”
- “There is a strong bias toward residential care models.”

There is a recurring theme that all challenges are interconnected and cumulative:

- “All of the above.”
- “It is impossible to limit this to just three challenges.”
- “Everything is connected and compounding.”



Has your organisation’s governing body engaged well with the changes required under the new Act?



- Mostly engaged
- Fully engaged
- Some engagement gaps
- Not engaged yet

The time and resource burden on governing bodies is significant, particularly for smaller or volunteer boards:

- “The onus on our volunteer board has been extreme.”
- “Time, resources and scope of work are significant challenges.”

There is a clear sense that engagement does not always equal confidence:

- “Engagement is strong in principle, but confidence is limited.”
- “It is difficult for governing bodies to feel assured that all expectations are being met.”

Governing bodies are navigating complex, evolving requirements with limited clarity:

- “Ongoing grey areas and evolving guidance.”
- “Frequent updates to compliance expectations.”
- “Uncertainty around regulatory interpretation.”

There is a lack of practical tools, training, and structured support for governance:

- “Limited availability of governance-specific training.”
- “Lack of practical tools to support implementation.”

Boards are overseeing significant organisational pressure and competing priorities, including:

- Increased compliance obligations
- Expanded reporting requirements
- Financial sustainability concerns
- Workforce fatigue and retention risks

Smaller providers are particularly impacted by limited internal capability to support governance requirements:

- “We are lucky to have a quality and governance team - how do small providers manage?”

Some organisations are dealing with structural governance challenges as a result of reform:

- “We had to let go of governing members due to conflict of interest.”
- “Engagement is difficult in certain organisational structures.”

There is ongoing pressure from multiple regulatory and quality frameworks, not just aged care reform:

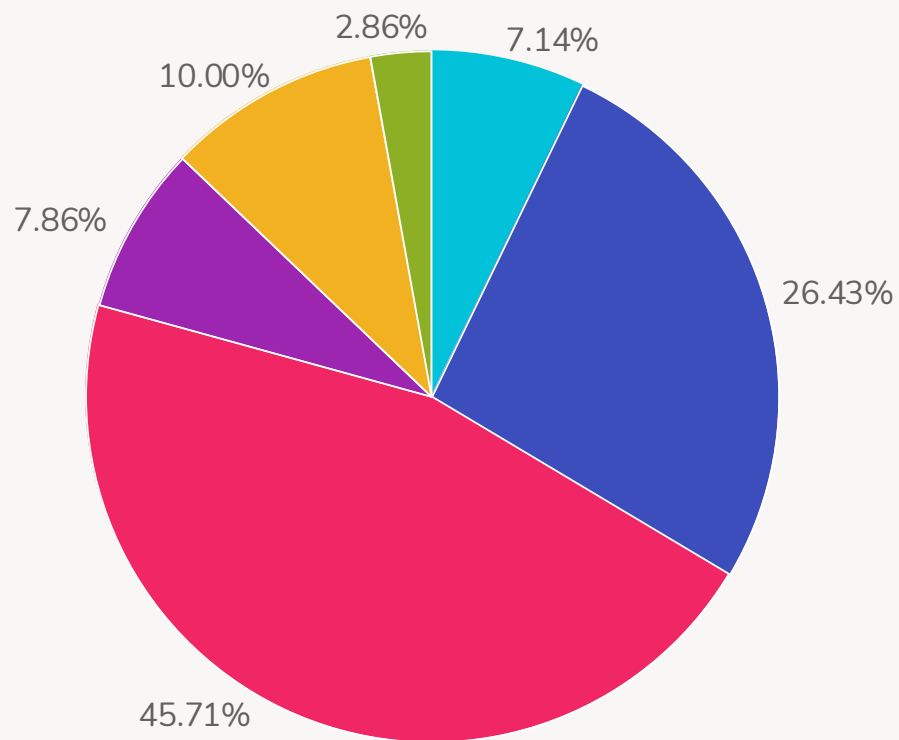
- “Boards are responsible for multiple quality regimes.”

There is a strong theme of reliance on management to interpret and translate reform requirements:

- “Boards are relying heavily on management to interpret shifting requirements.”
- “We have to spend our time educating them.”
- “This increases executive workload and pressure.”



Have your organisation's associated providers adapted to the new rules and expectations under the Aged Care Act 2024?



- Some have, some have not
- Mostly
- Not applicable
- Not yet
- Yes, fully
- Unsure

The definition and boundaries of ‘associated provider’ are unclear, creating widespread confusion:

- “Ambiguity around the definition is creating confusion.”
- “Information has been unclear and sometimes contradictory.”

The administrative and compliance burden particularly the effort required to support and follow up associated providers is significant and often disproportionate to the level of risk:

- “The amount of documentation required far exceeds what is needed to deliver safe services.”
- “Significant follow up is required to support providers through requirements.”
- “Paperwork is at the core with no clear benefit for older people.”
- “It has created double handling of paperwork.”

There is a lack of consistency across registered providers in how requirements are interpreted and applied, creating duplication and inefficiency:

- “Each provider is interpreting requirements differently.”
- “We are dealing with multiple providers all requiring different expectations.”
- “We have over 40 agreements everyone wants something different.”
- “This is unsustainable.”

The reforms are creating tension between providers and their associated provider networks:

- “Some associated providers feel requirements are excessive.”
- “There is pushback on compliance expectations.”
- “Providers are having to enforce requirements that are not well understood.”

There are concerns about privacy, risk, and insurance implications:

- “Requirements are putting organisations at risk with insurance.”
- “Concerns about staff privacy when providing information.”

The time, cost, and resource impact has been underestimated:

- “This has been a significant challenge and underestimated impact.”
- “It has required substantial time, funding, and resources.”

There is confusion about accountability boundaries between registered and associated providers:

- “Uncertainty around who is responsible for what.”
- “Blurred accountability is increasing risk and administrative effort.”

There is uneven readiness and capability across associated providers:

- “Some have, some have not.”
- “There is inconsistency across the sector.”

There is a growing trend of associated providers opting out of the system altogether:

- “We have had almost half of our associated providers opt out.”
- “Some are just deciding not to provide services under this system.”
- “We had to offboard some that would not comply.”

Providers are experiencing loss of services and reduced access for clients as a result:

- “Clients are losing access to their preferred providers.”
- “Consumers do not understand why services are being withdrawn.”

Associated providers are responding by increasing prices to cover administrative and compliance impacts:

- “Others have increased prices to cover their increased admin.”
- “Additional fees are being passed on to clients.”

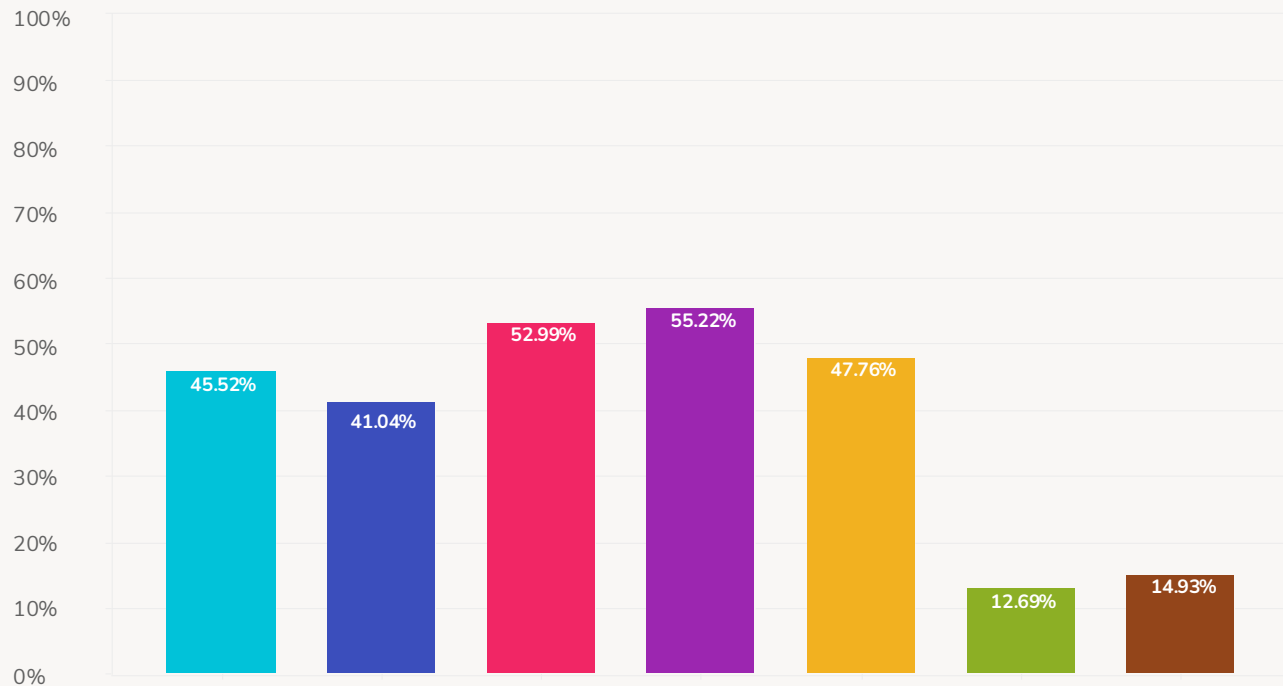
Providers are still working through implementation and are not confident it is fully embedded:

- “We are not 100% confident it is fully understood.”
- “This has been the most complex area to navigate and we still don’t have it right.”

There is a growing concern that the model is creating barriers to service delivery rather than enabling it:

- “Compliance requirements are a deterrent for external providers.”
- “This is reducing provider participation and flexibility.”

What have been the key issues with associated provider compliance adapting to changes?



- Reluctance to continue due to increased compliance expectations
- Increased hourly rates that make use of the associate provider unviable
- Pricing and/or invoices are not in sufficient format to meet claiming requirements
- Unwillingness to sign new associated provider agreements
- Not providing evidence of service delivery to support their invoices
- Other
- Associate provider registering under Support at Home to compete in the market

Associated providers are not consistently providing the evidence required to support compliant claiming:

- “Constant follow up is required to obtain evidence.”
- “Not providing evidence to support invoices.”

There are widespread issues with invoicing formats and documentation requirements:

- “Invoices are not in the required format to meet claiming rules.”
- “Different providers require different layouts and information.”

There are challenges with meeting contractual and onboarding compliance requirements:

- “Associated providers not meeting agreement requirements.”
- “Difficulty ensuring all compliance obligations are understood and met.”

There is limited understanding of compliance requirements among associated providers, despite communication efforts:

- “Many do not understand the new requirements.”
- “Some do not believe the rules apply to them.”

Smaller providers and sole traders are particularly impacted by lack of administrative capacity to meet compliance expectations:

- “The compliance uplift is too resource-intensive.”
- “They do not have the systems or resources to meet requirements.”

The compliance model is creating duplication across provider networks:

- “Multiple contracts, multiple training requirements, multiple expectations.”
- “We are having to collect the same information in different formats.”

Systems and processes are not aligned with compliance requirements, creating ongoing friction:

- “Systems are not able to meet all requirements.”
- “Significant manual workarounds are required.”

Providers are carrying the ongoing burden of managing, monitoring, and enforcing compliance:

- “Significant time is spent following up and supporting compliance.”
- “This falls back on providers again.”

There are ongoing issues with delays in invoicing, reconciliation, and claiming processes:

- “Delays in invoicing and reconciliation.”
- “Significant follow-up is required to meet claiming rules.”

What is the single most important action the government or department could take in 2026 to stabilise the embedding of the new Aged Care Act?

There is a clear expectation that government should refocus on outcomes for older people, not just compliance:

- “Refocus on care, not paperwork.”
- “Make sure the system is working for clients.”

There is a strong and consistent call for clear, timely, and practical guidance from government:

- “Provide clear and consistent information.”
- “We need guidance that is practical and usable.”
- “Too much is still unclear.”

Providers are asking for greater clarity, consistency, and stability in expectations under the Act:

- “Stop changing the rules.”
- “Provide certainty so we can embed what is required.”
- “We need consistency in interpretation.”

There is a clear message to slow down further reform and allow time to embed the Aged Care Act and Support at Home:

- “Pause and let providers catch up.”
- “Give us time to embed before introducing more change.”
- “No further major changes until the current system is stable.”

What is the single most important action the government or department could take in 2026 to stabilise the embedding of the new Aged Care Act?

Providers are calling for a pause on additional reform elements including price caps and CHSP transition until the system is embedded and stable:

- “Do not introduce price caps yet.”
- “Delay CHSP transition until the system is working.”
- “Stabilise before adding more reform.”

There is a strong call to reduce and rationalise ongoing reporting and administrative requirements:

- “The level of reporting is too high.”
- “Reduce duplication and unnecessary reporting.”
- “Allow providers to focus on care, not constant reporting.”

Providers want alignment and consistency across government, the Commission, and the Department:

- “Different interpretations across agencies are creating confusion.”
- “We need one consistent message.”

There is a strong call to simplify requirements and reduce unnecessary administrative burden:

- “Reduce duplication and unnecessary paperwork.”
- “Focus on what actually improves care.”

Providers are asking for clearer definition of compliance expectations under the Act:

- “Be clear on what ‘good’ looks like.”
- “Define what is actually required to be compliant.”

What is the single most important action the government or department could take in 2026 to stabilise the embedding of the new Aged Care Act?

There is a need for improved training and capability building for governing bodies and responsible persons:

- “Provide detailed training for boards and leadership.”
- “Support responsible persons to understand their obligations under the Act.”

There is a need for better engagement with providers and frontline experience in refining the system:

- “Listen to providers on what is working and what is not.”
- “Involve the sector in practical solutions.”

Providers are seeking investment and support to enable implementation:

- “Fund the real cost of reform.”
- “Provide support for implementation, not just policy.”

There is a need to build capability across the sector, including associated providers:

- “Support smaller providers to meet requirements.”
- “Provide education and tools for associated providers.”

Providers are calling for improvements to systems, processes, and infrastructure:

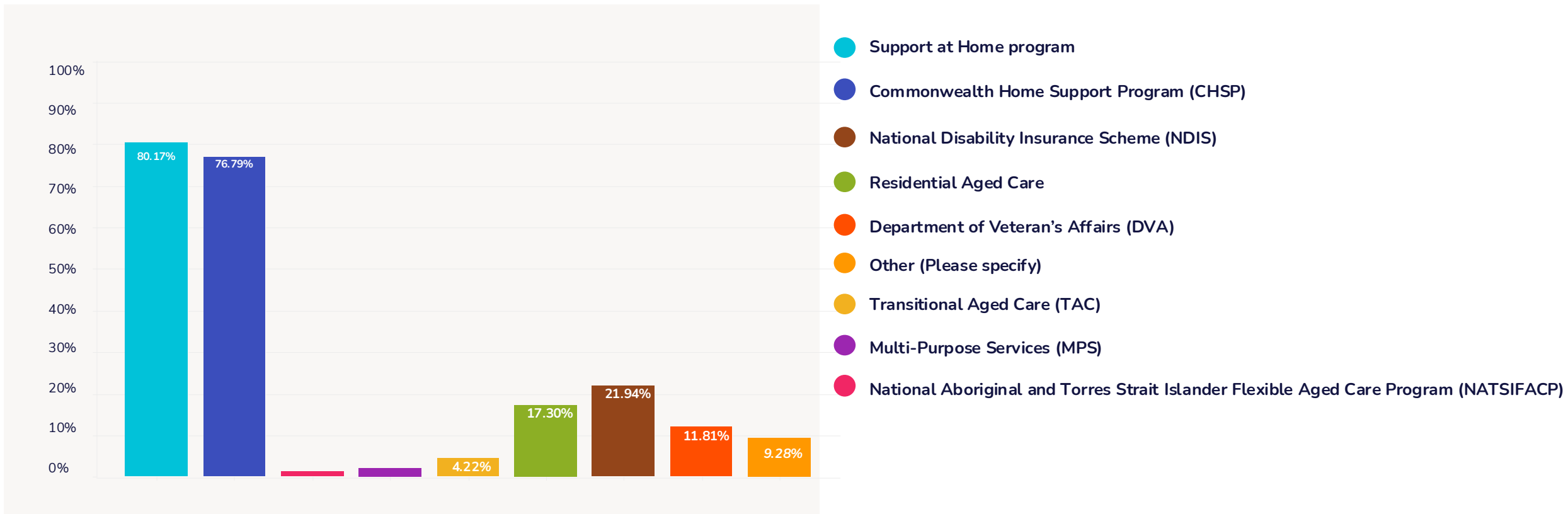
- “Fix the systems that don’t work.”
- “Ensure platforms are fit for purpose.”

There are specific concerns about the impact of reform in rural and remote areas, where workforce and provider availability is already limited:

- “Reform needs to consider rural and remote realities.”
- “Access challenges are greater in regional areas.”
- “Loss of providers has a bigger impact in thin markets.”

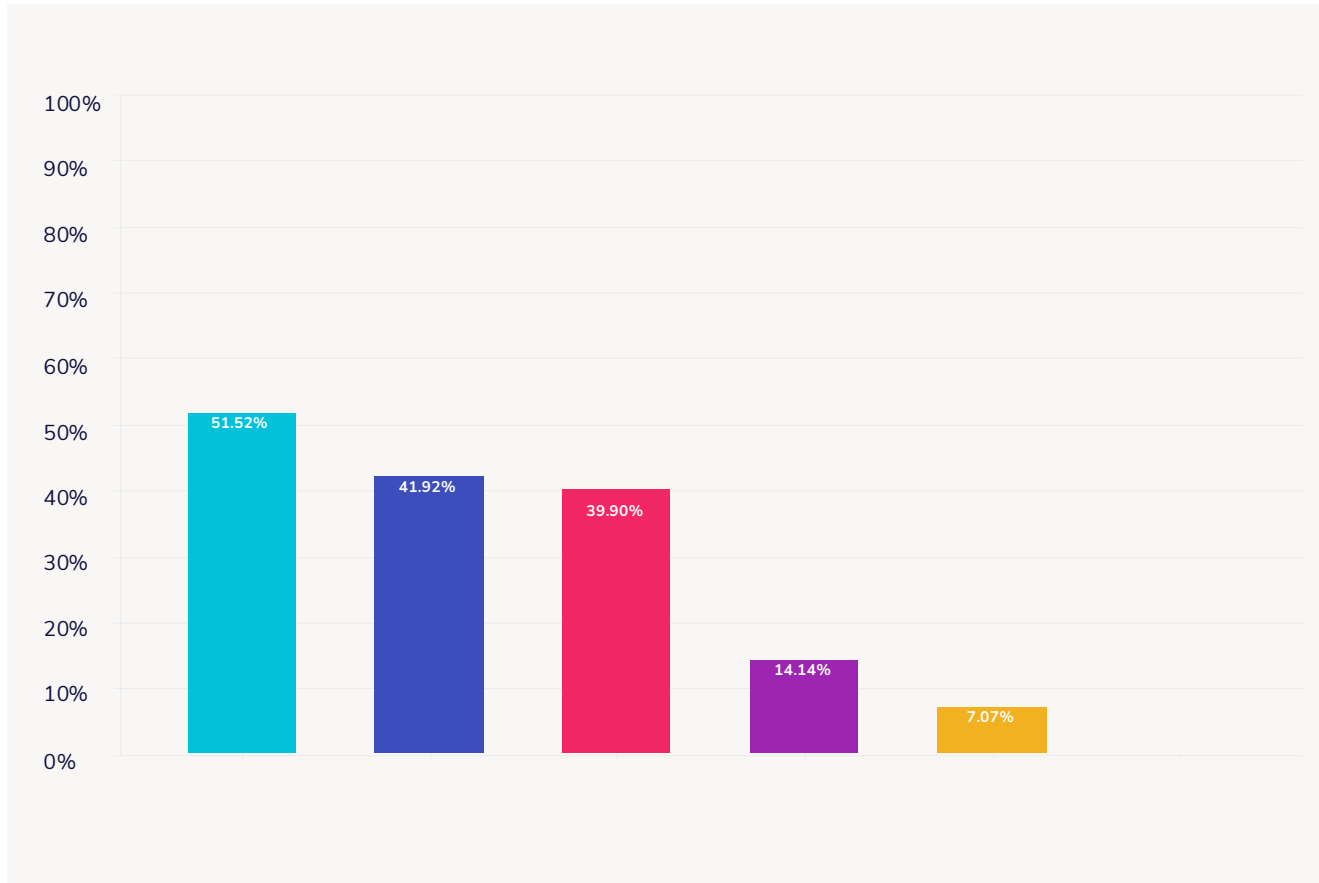
PROFILE OF SURVEY RESPONDANTS

Which funded programs does your organisation currently operate?



PROFILE OF SURVEY RESPONDANTS

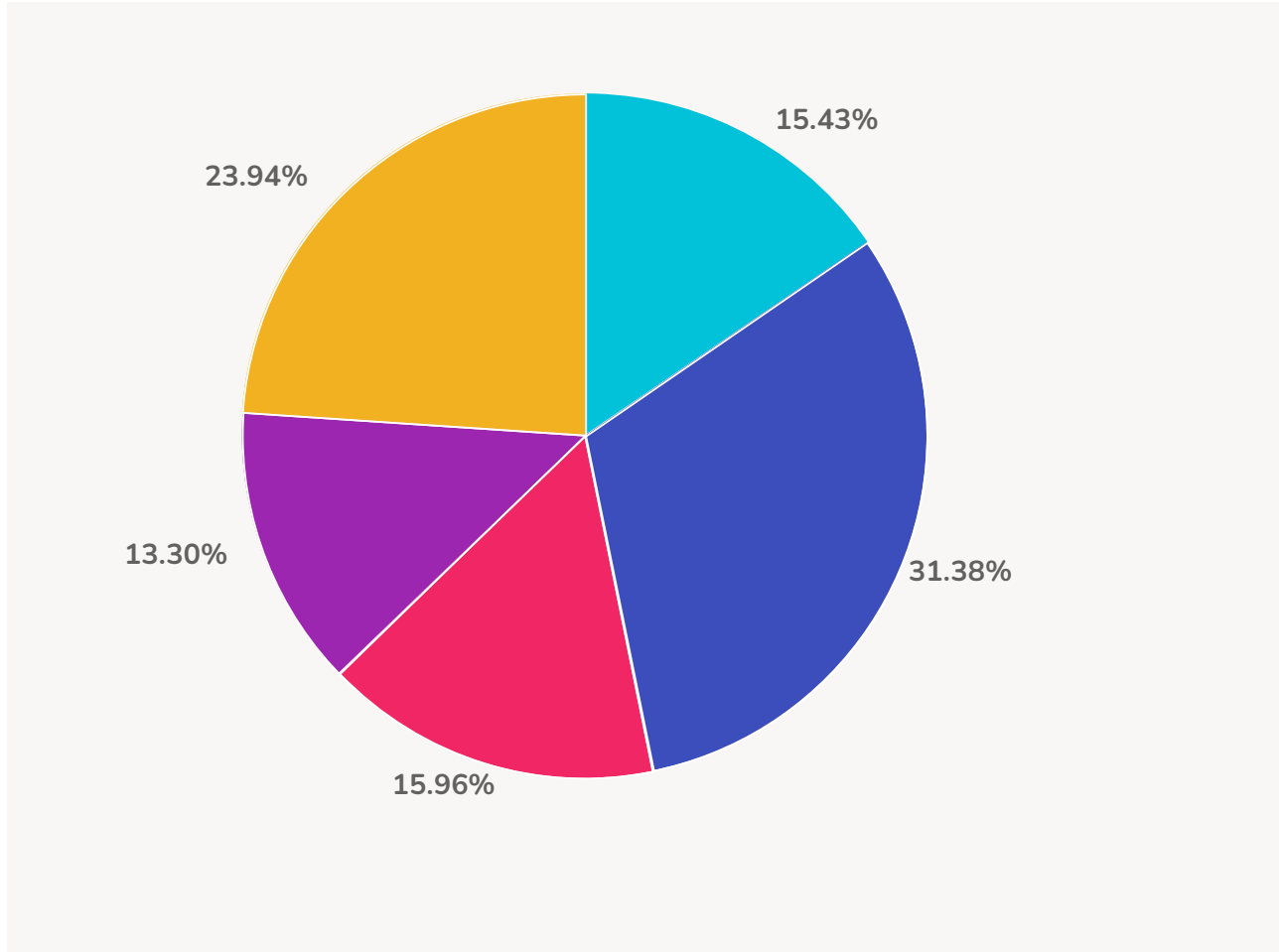
Which location(s) does your organisations primarily operate in?



- Metro (MMM1)
- Regional (MMM 2-3)
- Rural (MMM 4-5)
- Rural (MMM 4-5)
- Multi-State

PROFILE OF SURVEY RESPONDANTS

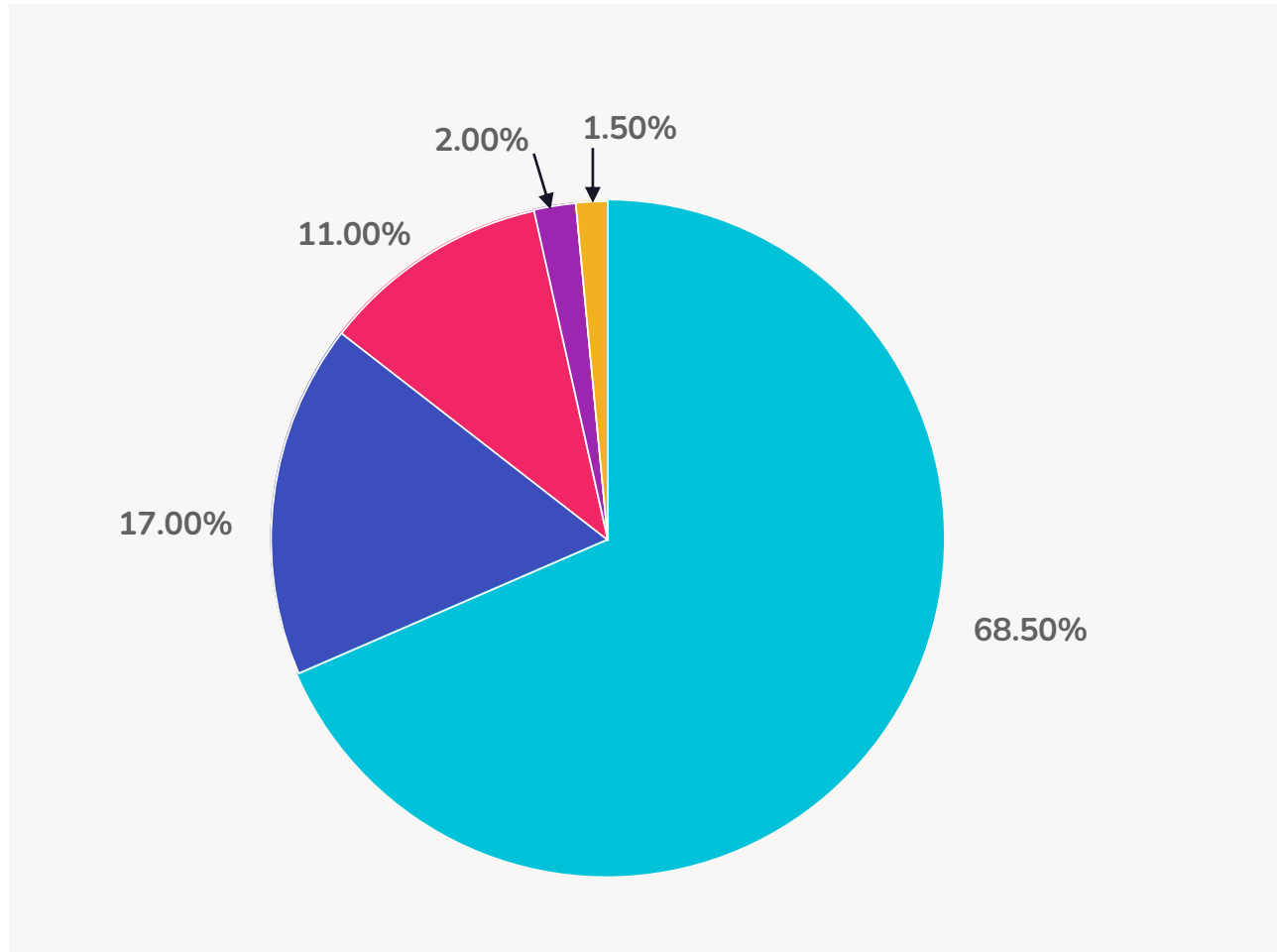
Your organisation's approximate total annual turnover is?



- Between \$1 - \$5 million
- Above \$20 million
- Between \$5 million - \$10 million
- Under \$1 million
- Between \$10 million - \$20 million

PROFILE OF SURVEY RESPONDANTS

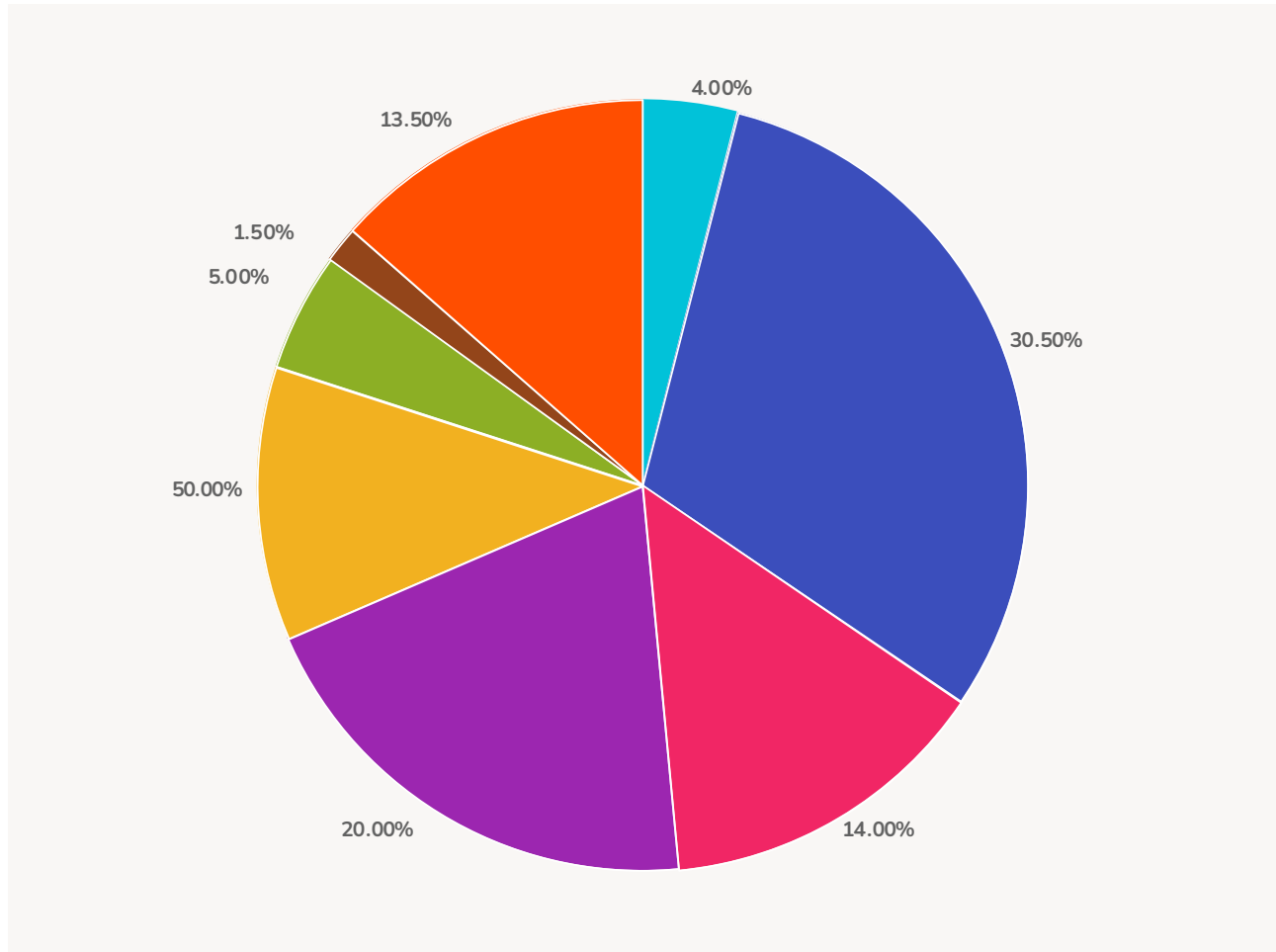
Your organisation's type is?



- Not-for-profit
- For-profit
- Government/Council
- Aboriginal Community Controlled
- Other (Please specify)

PROFILE OF SURVEY RESPONDANTS

What role do you hold within your organisation?



- Executive Manager
- Home Care Program Manager/Coordinator
- Other
- Corporate Services/Administration
- Care Manager/Care Partner
- Clinical Team Member
- Board Director
- Client Services/Call Centre

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