



**SUBMISSION ON
PRIORITIES FOR THE FEDERAL BUDGET 2013-14**

**Prepared by
COTA National Policy Office**

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COTA Australia

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COTA is recommending action in the 2013-2014 Budget in five key areas:

1. aged support and care
2. housing
3. health
4. income support and
5. superannuation.

We are urging the Government to use this Budget to address some major and urgent inequities in our society. Some initiatives we have asked for previously. These include an increase in Commonwealth Rent Assistance and improvements to Newstart and other allowances. These are again included in this submission because we believe that the case for these improvements is stronger and the need even greater than last year. Other proposals, including improvements to palliative care and changes to superannuation, are new recommendations emerging from work we have done in 2012.

Aged Support and Care

The *Living Longer. Living Better (LLLBB)* reform package represents a substantial start to reforming aged care. However, more needs to be done to ensure Australia's aged care system is fair and equitable for consumers and is sustainable in the longer term. COTA is asking for a move to an entitlement system, improvements to The Gateway and measures to ensure consumers get maximum benefits from the reforms (***Recommendations 1 – 5***).

Housing

The shortage of affordable housing is affecting older people, particularly those in the private rental market. COTA is calling for an immediate increase in Commonwealth Rent Assistance and long term investment in social housing (***Recommendations 6 - 8***).

Health

Older people consistently identify two areas of health care needing more attention, namely palliative care and preventative health. The recommendations on palliative care improve consumers' knowledge of and access to palliative care. On preventative health COTA is seeking a dedicated Older Person's Preventative Health Strategy (***Recommendations 9-13***).

Income Support

The gap between pensions and allowances has widened too far, particularly for single people. Single people who rely on allowances are living in poverty. These include many older unemployed people. COTA is calling for an immediate increase of \$50 per week for single people on allowances and improved indexation of allowances (***Recommendations 14-15***).

Superannuation

Voluntary contributions are one of the key components of the retirement income system. COTA is asking for the cap on concessional contributions to be restored to \$50,000 a year (***Recommendations 16-17***).

COTA Australia is the national policy vehicle of the eight State and Territory Councils on the Ageing (COTA) in NSW, Queensland, Tasmania, South Australia, Victoria, Western Australia, ACT and the Northern Territory.

COTA Australia has a focus on national policy issues from the perspective of older people as citizens and consumers and it seeks to promote, improve and protect the circumstances and wellbeing of older people in Australia. This submission incorporates the views of our members developed through various consultation mechanisms and agreed by the National Policy Council.

COTA's policy work is guided by five policy principles:

- maximising the social, economic and political participation of older Australians;
- promoting positive views of ageing, rejecting ageism and challenging negative stereotypes;
- promoting sustainable, fair and responsible policies;
- focusing on protecting against and redressing disadvantage; and
- protecting and extending services and programs that are used and valued by older Australians.

Australia's ageing population presents many opportunities for a better society but poses some challenges related to the provision of aged care for which we are currently under prepared.

Older people have managed their own lives and made choices about the services and supports they need for a lifetime. Older people want to continue this even when they need aged care services.

The *Living Longer. Living Better (LLLB)* reform package represents a substantial start to reforming aged care and moving the system from being provider oriented to consumer directed. COTA congratulated the government on the LLLB reform package and is working constructively with Government to ensure its successful implementation, while at the same time expressing concern at its shortcomings.

More needs to be done to ensure Australia's aged care system is fair and equitable for consumers and is sustainable in the longer term. COTA is a sponsor member of the National Aged Care Alliance (NACA) who's *Blueprint for Aged Care Reform* set out an agenda for reform that LLLB partially implements. COTA's budget submission is reflective of some of the initiatives from the Blueprint that were left undone as well as some proposals that are specific to COTA.

For the 2013-2014 Federal Budget COTA recommends:

1. *Preparation for replacing the current rationed aged care system with an entitlement model*

Even with the welcome increase in the number of home care packages, the rationing of aged care (providing a set number of places - currently 113, rising through LLLB to 125 - per 1,000 of the 70+ population) is an arbitrary system that caps supply. This both limits access to much needed services and results in the maldistribution of places.

Replacing rationing with an entitlement model, which directs service funding to the consumer rather than to the service provider, will ensure that:

- every older person can get the care they need;
- to attract consumers, aged care providers will have to deliver services and support that reflect community demand; and
- services are provided in the geographic areas where there is need.

COTA understands that the reasons for not moving to an entitlement model in the LLLB reform package included concern that the level of unmet need for services is not known, creating fiscal uncertainty in a tight budget period, and also that the industry was not yet ready to operate in a more market-oriented way.. The LLLB package proposes that this be revisited in the five year review. COTA believes that funding is needed now to enable work to commence in 2013 to understand the nature and amount of unmet demand and identify what needs to be done to prepare the system to operate under an entitlement model.

2. *Adopting a wellness and re-enablement approach in aged care assessment*

The new aged care system should be built upon a re-enablement/wellness approach that focuses on and enhances individuals' capabilities to achieve personal goals. This approach recognises that older people:

- can (and do) recover from illness and injury; and
- continue to have aspirations and goals throughout their lives.

The current system focuses on a person's deficits and assumes a continual decline in functioning. This assumption then drives the planning and delivery of services and reinforces stereotypical views of all older people as requiring ongoing and increasing amounts of support.

LLLB also introduces Consumer Directed Care (CDC) as the new norm for in home care initially, and in time for residential care. The principles of CDC require that the consumer is allocated resources based on assessed needs and decides what supports and services where these should be provided, and by whom.

While LLLB supports the re-enablement and CDC approaches, there is little to no practical initiative to ensure their effective introduction. COTA recommends that funding is allocated to develop the proposed aged care assessment framework and tools with a re-enablement approach within the principles of consumer directed care.

Adoption of the re-enablement / CDC approach will also allow more cost-effective usage of limited resources as the need for higher-cost services such as residential or acute care is deferred or averted altogether.

3. *Exploring the creation of a physical presence as part of the Aged Care Gateway*

Through the years that COTA has advocated for older people's interests, it has been clear that many consumers prefer to talk face to face about their issues and options in aged care. This view was reiterated during the *Conversations on Ageing* in which COTA supported the Minister for Ageing, Mark Butler, to talk to more than 3,500 older Australians. At the Conversations older people clearly articulated wanting one easily identifiable physical location in their community where they could talk face to face.

The LLLB package introduces the Aged Care Gateway comprising a national call centre and a web based information portal, supported by a national assessment service. These will be very useful but fall short of people's expectations and demand for assistance to navigate the aged care system.

Within the implementation of The Gateway, resources should be allocated to the task of exploring how a local presence can be achieved, including if appropriate through existing community infrastructure which older people already regularly use (such as pharmacies, some community information services, etc.).

4. *The provision of support and flexibility for consumers to assist them in contributing towards their care costs*

In its *Caring for Older Australians* report the Productivity Commission recommended the establishment of **The Australian Aged Care Home Credit Scheme** and **The Australian Age Pensioners Saving Account**. These initiatives were designed to provide flexibility and choice for older Australians about how they make the required financial contribution to the cost of their accommodation and/or care needs.

COTA believes that these initiatives, or alternatives designed to meet the same needs, are still required. In addition, there needs to be Government support, and removal of financial disincentives, for those who wish to 'right-size' by moving to accommodation that better meets their late life needs. Establishment of these two innovative financial products should be a budget commitment.

5. Support for System Transformation

Both consumers and providers will need support to ensure the transformation to a consumer directed system is successful.

Consumers will need assistance in order to be confident in voicing their needs and preferences in the face of a long history of a system that was organised on a different operating principle. There are no role models or protocols for a CDC based aged care sector.

Funding should be made available as part of an enhanced LLLB to enable the development of consumer empowering information along with peer education and support services to provide them with knowledge, skills and confidence. The COTA network is well placed to develop and roll out such supports for consumers based on its current suite of outreach programs.

In the longer term, the National Aged Care Advocacy Program (NACAP) needs to be reviewed and expanded. The LLLB package recognises this but implementation should be brought forward to ensure the development of a comprehensive strategy for ongoing support for older people who require assistance in advocating for their own needs.

Providers will need assistance to relate to consumers in ways that elicit consumers goals and needs, delivers those services, and to adapt their systems and procedures to support this. Funding should be made available to ensure that providers understand consumer needs and what is required to deliver consumer directed services. COTA, in partnership with the two aged care provider peak bodies ACSA and LASA, is well placed to develop a program to support providers make this fundamental shift. Over the initial three years of converting to CDC substantial inroads could be made to ensure providers are able to deliver quality consumer directed services and support.

COTA supports the responsible and sensible decision to relax commitment to a federal surplus, and the additional fiscal flexibility this brings. Given that Government has made a significant commitment to reform in aged care, it is both responsible and practical to get the details right now in order to prevent the need for another major reform process, use of expensive makeshift measures and escalation of costs in the future.

Access to affordable and appropriate housing has recently been recognised by government inquiries as a key issue for older people, influencing their wellbeing, their capacity to continue to contribute and their choices about support and care as they age. COTA has long pointed this out.

COTA is very concerned about the increase in homelessness amongst older people, particularly older women, and the increase in older people suffering from housing stress. Older people's housing requirements need to be seen in the context of the broader state of housing in Australia and this is why we are not asking for special measures just for older people. COTA supports the aims and objectives of the Australians for Affordable Housing campaign and has been working with many other organisations to promote the need for a coherent long term national housing policy.

For the 2013-14 Budget COTA has three key recommendations to improve housing affordability:

6. *Increase the maximum rate of Commonwealth Rent Assistance (CRA) by 30%.*

It is clear that older people on the Age or Disability Support Pension struggle to meet the cost of renting in the private rental market., For older unemployed people living on Newstart Allowance the private rental market is effectively unaffordable. Often the private rental market is the only option as there is a drastic shortage of public and social housing in Australia and while older people are still a significant proportion of current tenants they are not usually rated as a priority for new entry to social housing.

Rents in the private sector have risen at rates much higher than wages and income support payments, reducing the choices for many people and meaning they spend an ever increasing proportion of their incomes on housing. The snapshot of private rental vacancies undertaken by Anglicare agencies across Australia in April 2012 clearly demonstrates this and the report from the COAG Reform Council on the National Affordable Housing Agreement also shows rental affordability has worsened.

In the long term there must be supply driven solutions to the issue of affordability but there is an urgent need to do something in the short term to help those who are struggling to meet their housing costs. The Commonwealth Rental Assistance scheme should be reviewed (the Harmer pension review effectively assigned this to the 'too hard' basket) to ensure it better meets the needs of people on low incomes and aligns the level of subsidies received through the scheme with those for people in public housing. An interim measure would be an immediate 30 per cent increase in the maximum rate.

7. *Establish an Affordable Housing Growth Fund to provide 20,000 new low-income rental properties each year.*

There is a drastic shortage of affordable rental properties. One reason for this is the decline in funding for social housing over the last 15 years which has decreased the stock, forcing more people into the private rental market. The lack of investment has also

meant that state housing authorities have not been able to replace ageing stock with housing that better meets the changing needs of the population. Older people are more likely to be single or in smaller households and there simply are not the properties available for them.

Social housing forms an essential part of the housing stock by providing low income people, and people who are homeless or at risk of homelessness, with a pathway to secure long term accommodation. It is the long term tenure as well as the low rent which make it particularly valuable to older people so they do not have to move around, can maintain links to a community and feel confident about accessing services if they need them.

There needs to be renewed investment in social housing to increase the stock of housing for low income households. COTA supports the call from the Australians for Affordable Housing for a dedicated Affordable Housing Growth Fund which could be financed by the use of a Housing Supply Bond which could leverage private investment into affordable housing. The review of the Government's Social Housing Initiative showed that it delivered both economic and social benefits and the proposed Growth Fund would do the same.

8. *Expand the National Rental Affordability Scheme by 50,000 places*

The National Rental Affordability Scheme (NRAS) was part of the economic stimulus package. NRAS provides incentives to institutional investors to build and rent affordable housing and so is a critical component of the increase in supply of housing. There is interest in the market in these incentives and a consensus that this model has potential to significantly increase the supply of affordable rental accommodation. However, lack of certainty over the future of the scheme has made investors cautious and if there is to be continued interest there needs to be a commitment to more incentives being available.

COTA is supporting the proposal from Australians for Affordable Housing for an additional 50,000 incentives to be made available over five years. This should result in around 10,000 new affordable rental properties coming onto the market. This potentially benefits people on lower incomes in two ways, first by giving them the opportunity to access a NRAS property and secondly by taking some of the heat off the private rental market in locations where there are NRAS developments.

As well as affordable housing it is important that older people have access to appropriate housing that will allow them to age in place. There is a shortage of housing that meets the requirements of people with reduced mobility and other special needs. For this reason we think it is imperative that both the new NRAS incentives and the funding from the growth fund are directed towards housing that will meet the design standards developed by Livable Housing Australia (see www.livablehousingaustralia.org.au).

The health of individuals and societies is directly related to social inclusion / exclusion.

Healthy Ageing involves the three components of health, participation and security. It requires:

- Inclusive communities that foster and value the participation of all people
- Age friendly environments
- Positive attitudes and behaviours that prevent disease and promote well being

There is a strong correlation between socio-economic status, wellbeing and health status across all age groups, no less for seniors. Underemployment and unemployment also result in a lack of wellbeing and deteriorating health status.

COTA is focussing attention on two areas of need- palliative care and preventative health.

Older people consistently raise the need for better palliative care services and it was a recurring theme in Minister Butler's national Conversations on Ageing in 2011. People want services to be provided in a way that gives them a real choice about the type of service, where it is delivered, how it is delivered, and by whom. They want some control over where they die and the nature of that death.

COTA made a submission to the Senate Inquiry into Palliative Care in 2012 and welcomed the recommendations of that Inquiry. The Government has yet to respond to the report.

9. Funding for a five year public education campaign around dying and palliative care

COTA is highlighting three key recommendations that look at consumer choice and control.

One of the key recommendations from the Senate Community Affairs Committee report on Palliative Care in Australia is the need to have a national conversation about death and dying. Whilst Palliative Care Australia does receive funding for National Palliative Care week activities and undertakes national awareness as part of its role there is a need to have a broader ongoing national conversation about what makes a good death and the role that good palliative care and other initiatives could and should play in that process.

There should be a five year program which is truly national, getting out to rural and remote communities and across all communities including those from culturally linguistically diverse backgrounds and Aboriginal and Torres Strait Islander peoples. There needs to be a multi-pronged approach with the materials and method of engagement varying depending on the particular population group being targeted. Palliative Care Australia would be the obvious national coordinator for such a program but there would be advantages in using other organisations to target specific groups. There is a growing body of evidence that older people are most likely to pay attention to information from their peers. This can be through informal discussions with friends, informal discussion groups and through more formal and structured peer education.

COTA runs national peer education for older people around mental health issues

through the *beyondmaturityblues* program with *beyond blue*, and Quality Use of Medicines for the National Prescribing Service. There would be merit in running a similar peer education program to engage a broad cross section of the older population in the discussion about palliative care. Such a program could also include discussion about advance care directives, encouraging people to think about what treatment and care they want.

10. Provide funding to improve the provision and timeliness of information to palliative care patients, their carers and families.

Having the right information at the right time is critical to making the right decision about treatment and care. It is clear that people find it difficult to access the information they need at what is usually a time of stress and prior unfamiliarity with the system.

The Federal Government would need to work through the Council of Australian Governments to implement any new information processes and materials as the States and Territories are responsible for delivering palliative care. As discussed above, people get their information from a range of sources and there needs to be greater effort to ensure the information is accessible through a variety of channels and that there is support provided to assist them with understanding the material and making decisions about their care.

Palliative Care Australia produces a wide range of consumer information products but receives no ongoing funding for their publication, distribution or to update them as services change.

11. Increase the level of funding for the Respecting Patient Choices program

The Respecting Patient Choices program is an important initiative that works to encourage people to think about and document their wishes with regard to future treatment. Although the program is rolled out differently in different jurisdictions, the basic model of having facilitators who discuss the options with people and help them prepare the necessary documentation to put those wishes into effect appears to be working well.

However more could be done to actively promote the program and to educate the broader community about the benefits of advance care planning. There needs to be a more systematic approach through hospitals, residential aged care and community aged care services all taking a more active approach to raising advance care directives with their patients or at least encouraging them to have a conversation with the respecting Patient Choices facilitator, if there is one.

The Senate Committee recommended that funding should be targeted to expanding the reach of the program into residential aged care and COTA supports that approach.

12. Funding to improve the provision of palliative care to people receiving residential and community based aged care services

As mentioned above the need for improved palliative care was a recurring theme in the Minister for Ageing 's Conversations around aged care in 2011. In its Blueprint for Aged Care Reform the National Aged Care Alliance identified the following areas for action to help older people die with dignity:

- Executing a COAG agreement to make palliative care and support in residential and community aged care services a funding priority. This will limit unnecessary, undesirable and costly hospital admissions and usage.
- Providing Federal Government funding (supporting state action in this area) to create systemic linkages between residential and community aged care providers and local specialist palliative care services.
- Removing existing barriers to an individual's ability to simultaneously access community aged care services (HACC and packaged care) and specialist palliative care services. This will require having clearer Federal, State and Territory policy and funding guidelines.
- Changes to palliative care ACFI requirements. It must be recognised that not all older people dying in residential care experience pain (this is often the case for people with dementia). Thus, appropriately qualified staff in the residential facility (not just GPs and specialist nurses) should be able to direct palliative care provision.
- Ensuring the Gateway provides information and support to access advance care planning and palliative care services at points along the care continuum.

The funding should be identified and allocated to address each of these areas of reform.

COTA has highlighted the need for health promotion and prevention to include older people as the evidence shows there can be significant health and wellbeing benefits if older people make some lifestyle changes. The COTA National Policy Forum in 2012 addressed this issue and the State and Territory COTAs are active in running a range of health promotion and illness prevention programs.

13. Establish an Older Persons Preventative Health Strategy

The aim of the Strategy would be to decrease risk factors and increase protective factors for chronic disease and functional decline.

COTA is keen to ensure that older people do not continue to be forgotten in health promotion as the evidence is clear that there are significant benefits from prevention measures for older people – for individuals in terms of improved quality of life, and for society in terms of reduced pressure on treatment services and increased socio-economic productivity.

An important part of any such strategy is measures to encourage physical activity amongst older people. The National Physical Activity Guidelines for Australia recommend exercise

at a moderate level of at least 30 minutes a day on most days of the week for older adults. However, all available data indicates that many older people do not meet that benchmark.

It has been shown that time spent in physical activity of even 30 minutes a day can reduce mortality risk between 15% and 35%. This association between physical activity and reduced mortality shows that involvement in activities requiring moderate exertion is important.

It is also clear that moderate intensity physical activity in older adults is directly related to reducing the risk of chronic diseases such as certain types of cardiovascular disease, musculoskeletal disease and some forms of cancer.

As well as physical health benefits, keeping active also helps with psychological disorders such as depression. People with depression are less likely to be physically fit. Studies have found that exercise is useful in treating or preventing mild to moderate depression.

COTA helped to create and provides ongoing support to the Fair Go for Pensioners Coalition to push for reforms in the pension system. COTA was a participant in the Harmer Review of pensions and supported the increase in pensions and associated reforms introduced in 2009.

We believe it is now time to do the same for people of working age. COTA's primary interest is in the needs of older people, many of whom are of pre-Age Pension age, seeking work and facing significant barriers to re-entering the labour market if they become unemployed. Most people over 50 years old on allowances are on Newstart and they make up just over 25% of the Newstart population.

COTA is also committed to the development of sustainable and equitable policies for senior Australians that take account of the needs of the entire community in the short and long term. For this reason we are not pursuing age related initiatives but instead take the view that older people will benefit from measures to assist all 'working age' people. COTA makes the following recommendations:

14. Allowance payments for single people should be increased by \$50 per week from March 2014.

The original intention of unemployment benefits and other allowances was that they would be paid for relatively short periods and so the level of payment could be lower than a pension which was seen as a permanent form of income support. It also assumes that people have other resources to fall back on to assist with costs through this transition phase of their lives. Inbuilt into this approach is also a value judgement that people who are unable to work are more 'deserving' than those who could undertake employment but are currently not working. COTA challenges all these assumptions.

It is clear that Newstart Allowance is no longer a short term or temporary form of support with 60% of current recipients having received it for over a year and around 20% receiving it for more than 5 years. Falling unemployment rates and changes to social security arrangements that have moved more people onto activity based payments mean that it is the most disadvantaged job seekers that are left on Newstart Allowance and they tend to take longer to move off it.

COTA made a submission to the recent Senate Inquiry into the adequacy of Newstart recommending that Newstart and other allowances be increased as the gap between Newstart and pensions payments is now too wide. COTA was disappointed that the Committee did not recommend an increase despite acknowledging that the payment is inadequate. The Poverty Report by ACOSS showed single people on Newstart are particularly vulnerable to poverty. The Henry Review of the tax transfer system showed there was scope to increase the allowances without providing a disincentive to undertake work.

15. From 2014 allowance payments should be indexed at every six months to movements in a standard Australian Bureau of Statistics measure of typical fulltime wage levels.

The gap between Newstart Allowance and pensions is currently \$133 a week for a single person and that gap is widening all the time because of the differential indexation approaches. If the current indexation arrangements are maintained and there are no real increases in the allowance it will only be worth half the pension in 20 years' time. It is clear that measures need to be taken to ensure the gap does not get any wider.

Base pension rates are indexed twice a year, in March and September, to the higher of the increase in the new Pensioner and Beneficiary Living Cost Index and the increase in the Consumer Price Index. The new pensioner living cost index has been specifically designed to better reflect changes in the cost of living experienced by pensioner and beneficiary households, rather than the wider community. There is no reason that it should not apply to Newstart.

Australia's retirement income system has three pillars, the Age Pension, compulsory superannuation contributions (SGC) and voluntary superannuation contributions and other savings and investments. It is clear that older Australians will continue to access their retirement income from all three sources.

In 2009 the Government implemented significant reforms to the Age Pension and in 2012 committed to increasing the SGC from 9% to 12% by 2019/20. There have been a number of changes to voluntary contributions over the years and some changes to the way income from superannuation is treated post-retirement. COTA agrees with the superannuation industry that the continuous policy changes are not helpful; they make it difficult for older people to plan for their retirement and have not helped build confidence in superannuation as a product.

However, we believe that there needs to be some action on voluntary contributions and some changes to the way people can draw down on their superannuation in their retirement. COTA makes the following recommendations:

16. Restore the annual cap on concessional voluntary superannuation contributions for people over 50 years to \$50,000 from 1 July 2013.

The 2012-13 Budget saw the annual cap on concessional contributions for superannuation for people over 50 years cut from \$50,000 to \$25,000 from 1 July 2012. This measure hit older people, and particularly older women, hard as many had planned to make voluntary contributions to build up their post retirement income. Older women who have lower superannuation balances because of gaps in employment, lower income etc. are sometimes fortunate enough in their later years to be able to make higher voluntary contributions and this measure is a significant disincentive for them to do so.

It also came on the heels of the global financial crisis when most people saw their superannuation balances take a hit, again hardest for older people close to retirement as they do not have the time to rebuild their balances. Plans to rebuild balances over the next couple of years pre-retirement were dashed when the cap was slashed in the last Budget.

17. The Superannuation Industry Supervision(SIS) regulations be amended to:

- ***Provide equivalent treatment of post-retirement products offered by life insurance companies and by superannuation funds, preferably through development of regulations which apply to both.***
- ***Set out general required characteristics for longevity products rather than mirror the specific characteristics of existing products in the market.***
- ***Allow products which provide a deferred benefit past normal retirement age to be offered.***

There are concerns around how the current range of superannuation products will help people manage the risk of longevity. It is clear there needs to be a broader range of drawdown products for people to choose from that allow them to spread their superannuation asset over their lifetime.

One of the possible products is a deferred annuity but there are a number of regulatory impediments to the development of a deferred annuity or pension market in Australia. The requirement to make annual payments on annuities to get favourable tax treatment, and the restrictions on varying annuity payments, are seen as two of the key barriers to greater take up of deferred annuities.

COTA supports the above recommendation which has been put forward by the Association of Superannuation Funds in Australia (ASFA) to change the regulations. We believe this change would lead to more competition and give consumers more choice of products which we think will be of long term benefit to all older people.