

‘Darling, I’m not going anywhere’: The rise of at-home care

From assistance with everyday tasks to \$30,000-a-week clinical care, some Australians are spending whatever it takes to bypass government waitlists and age in place.



Colleen O'Neill-Mullins at home with her carer, Christine. **Eamon Gallagher**

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When Colleen O'Neill-Mullins realised she needed some help with everyday tasks, moving into residential aged care was the furthest thing from her mind.

“Darling, I’m not going anywhere. I don’t intend on going into aged care at all,” says the 73-year-old, who has a form of Parkinson’s disease that affects her balance.

Instead, O'Neill-Mullins, who lives in Richmond with her husband, Reg, 80, looked into private aged care that would help her stay at home.

Through Prestige Inhome Care she was matched with carer Christine, who she describes as her “best friend”.

For the past year, Christine has helped O'Neill-Mullins, who enjoyed a long career in the fashion industry, with a range of tasks that help her maintain her independence such as housework, cooking and taking her to appointments.

To set themselves up for living at home for as long as possible, the couple also moved into Kennedy Place, a luxury over-55s retirement living development in 2024.

Less than 2 kilometres from their former home, the building includes a full-time concierge, cinema, library, gym, heated pool, wellness centre, restaurant, workshop, billiards room and hair and beauty salon, giving the couple access to a range of health, wellness and social spaces onsite.

Demand for ageing at home grows

Research shows older Australians increasingly want to avoid residential aged care. A recent study by AMP found that 60 per cent of older Australians would prefer to avoid an aged care home, while research from Flinders University's Caring Futures Institute found that 72 per cent are willing to pay more to access aged care at home instead.

O'Neill-Mullins is emblematic of the growing cohort of wealthy Australians who are bypassing residential aged care and the government-funded system to take control of their ageing journey. Providers of premium at-home care services say they've been swamped with inquiries in the past six months.

Fiona Somerville, managing director of premium in-home aged care provider **Acquaint** says the company noticed an uptick in enquiries from July 2025, ahead of changes to government-funded care packages, which were introduced in November.

"It's been absolutely insane in terms of the level of inquiry," she says.

"We are seeing an epidemic of loneliness in our aged care population. Having a pet at home that's familiar is shown to be really important."

— Prestige Inhome Care CEO Mark O'Brien

Prestige Inhome Care chief executive Mark O'Brien notes a similar trend, with enquiries from high-net-worth individuals seeking discrete care with [the ability to fund it themselves](#) growing.

Delays in getting assessed for government-funded packages and delays in that funding actually coming through, coupled with long waitlists for government-funded services and higher co-contributions that now need to be paid by the client for some services, are pushing more people to seek out private at-home care.

"Typically, our clients are older people who are looking to very much stay living at home, and generally, they'll have that mindset of, 'I'm never moving into aged care', or at least, 'I'm never moving into aged care until I absolutely have to'," Somerville says. "And so they're looking for a premium service, hand-picked teams, really consistent care and exceptional reliability."

“They’re people who have often been successful in their careers in business. They’ve invested wisely over time, they tend to be planning for the future. They’re definitely people that have got that capacity to pay, we’ve had surgeons, doctors, lawyers, judges, titans of industry and famous people.”

What is private at-home care?

O’Brien says one of the misconceptions about private aged care is that it’s only for those who require care around the clock. “There’s really no one-size-fits-all. It’s really a bit of a bespoke offering for each individual.”

“It can be a couple of hours just of companionship, support or domestic help, whether that’s gardening or house cleaning, and then, over time, it can develop into 24-hour care.”

He says Prestige offers a range of services that fall into categories such as clinical care (which includes nursing services), everyday living (such as gardening, meal preparation or shopping), and independence (which covers services such as transport or administering medication).

Acquaint, which offers similar services, has a three-hour-a-week minimum and its services also range up to full-time live-in care and end-of-life care.

Somerville says that, depending on the circumstances, as little as six hours of at-home care a day can be enough to keep someone out of residential aged care. “People often think the default is 24-hour care, but sometimes it’s not.”

While the companies have a schedule of typical services, they will try to accommodate any request, providing its “safe and legal”, Somerville adds.

“I think what our clients really value is the fact that we can be flexible.”

Some of the more unusual care requests both companies have facilitated include accompanying clients on overseas holidays, arranging for private car collections to be cleaned, and accompanying founders to board meetings of their former company.

“One of the craziest things that that happened recently is that one of our long-term private clients celebrated a birthday milestone, and we facilitated a Tiger Moth flight that was one of the things that he wanted to do on his bucket list,” O’Brien adds.

What does in-home private aged care cost?

Prestige’s services range from \$77 to \$198 an hour Monday to Friday depending on the type of service, while Acquaint’s start at \$88 an hour. Higher rates apply on weekends and public holidays.

O’Brien says for someone who is self-funding their care, without any government assistance, the cost for two to four hours a week might be \$400 to \$500.

For live-in 24-hour, seven-days-a-week care, Somerville says under a traditional structure where the carer works for eight hours, has eight hours’ downtime and eight hours’ sleep, costs start at around \$1000 on a weekday.

But O'Brien says that for someone with "high medical acuity needs" needing round-the-clock attention from multiple carers, the costs could be as high as \$25,000 to \$30,000 a week.

Acquaint managing director Fiona Somerville says as little as six hours of care a day can keep someone out of residential aged care.

As to how those costs compare to residential aged care, where entry costs can run to several hundreds of thousands of dollars depending on the value of your assets, O'Brien says it probably "nets out somewhere quite similar".

What are the benefits of private aged care?

Somerville says the biggest benefit of ageing at home is retaining freedom and control over your life.

"Sometimes the hard bit is for people to accept getting help," she says, but Acquaint frames it as having an assistant rather than needing help, which brings the comfort of familiarity to those who worked in the corporate world.

Other key benefits include being able to maintain connections to your social circles and stay in familiar surroundings, especially if your memory is failing.

O'Brien adds that a benefit that is often understated is being able to have a pet. "We are seeing an epidemic of loneliness in our aged care population. Having a pet at home that's familiar is shown to be really important, and part of the consideration set for people staying at home longer."

Impact of the government's recent aged care changes

Once known as "home care packages", the federal government's new "support at home packages" came into effect in late 2025.

They require many people who qualify for – or opt to receive – a government care package to pay a higher contribution towards at-home services.



A former consultant to the aged care industry, Somerville says the changes are symbolic of an aged care system that is slowly evolving to more of a user-pays model. “With a smaller tax base, there’s only so much money in the pot.”

Under the changes, funding has been redirected to clinical care so self-funded retirees who don’t qualify for a Commonwealth health card are now required to make an 80 per cent contribution towards everyday living services and a 50 per cent contribution towards personal care services.

Those who do qualify for a card are means tested and have to make a contribution of between 5 per cent and 50 per cent for personal care and between 17.5 per cent and 80 per cent for everyday living, depending on their income and assets.

But delays in assessments and funding, and long waitlists for services are pushing more people to seek out private at-home care, O’Brien says, adding that around 120,000 Australians are waiting to be assessed for a support at home package.

“Even after being assessed, it can be between nine and 12 months before funding starts so it’s driving people to look at alternative ways to care for their parents, or have their parents looked after.”

“We can mobilise a workforce and start care within hours of an initial enquiry.”

Another advantage of private care is that if someone’s condition deteriorates, a private provider can respond immediately with additional care, while a reassessment under the support at home program can take time.

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