

**“Leading the Way”**

**September 2009**

**ATTACHMENT A**

# National Aged Care Alliance

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Leading the Way

Our Vision for Support and Care of Older Australians

September 2009

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## Preamble

The purpose of this document is to present a shared vision for the future support and care of all older Australians so that they can live with dignity and independence.

It has been developed by the National Aged Care Alliance, a coalition of the leading consumer, provider and professional associations and unions involved in the provision of care and support for older people.

The challenges and changes needed in aged care have been well documented. Reforms over the last decade have increased the range of services and improved access and quality. However, it is now time for action to substantially change the system and take these reforms to the next level.

The reform agenda presented here transforms aged care in Australia by placing older people at its centre with a choice of timely, accessible and affordable services. In short our vision is built around putting the older person first.

The following organisations are members of the Alliance:

Aged and Community Services Australia, Aged Care Association Australia, Alzheimer's Australia, Anglicare Australia, Australian Association of Gerontology, Australian General Practice Network, Australian Healthcare and Hospitals Association, Australian Nursing Federation, Australian Pensioners' and Superannuants' Federation, Australian Physiotherapy Association, Australian and New Zealand Society for Geriatric Medicine, Baptist Care Australia, Carers' Australia, Catholic Health Australia, COTA Over 50's (Councils on the Ageing), Diversional Therapy Association of Australia, Geriaction, Health Services Union, Legacy Co-ordinating Council Incorporated, LHMU, Lutheran Aged Care Australia, OT Australia, Palliative Care Australia, Pharmacy Guild of Australia, Returned & Services League of Australia, Royal Australian College of General Practitioners, Royal College of Nursing *Australia* and UnitingCare Australia.

More information about the Alliance is available at [www.naca.asn.au](http://www.naca.asn.au).

# 1 The Vision

Every older Australian is able to live with dignity and independence in a place of their choosing with a choice of appropriate and affordable support and care services as and when they need them.

# 2 The Underpinning Principles

## 2.1 Older Australians are entitled to:

- live active, contributory and fulfilling lives
- have their individual and collective needs fully and equitably considered when governments are making decisions about health, housing, transport and other community services
- make decisions for themselves, in conjunction with chosen family and friends where appropriate
- be treated with equity and fairness regardless of cultural background, geographic location, health, gender, sexuality and capacity, including their capacity to communicate needs
- the removal of barriers and systemic limitations affecting the realisation of any of these principles

## 2.2 Where older Australians require support or care, they will:

- have access to services in their own communities and homes that:
  - are readily available, affordable and client-directed
  - promote wellness and wellbeing, and assist them in realising their aspirations
  - provide genuine choice to meet the aspirations, needs and preferences of a diverse older population
  - are underpinned by a commitment to quality improvement, evaluation and ongoing research
- be the principal decision makers about when they may need assistance and the nature of that assistance
- have access to affordable, effective and safe health and medical care
- have easy access to reliable and relevant information about the availability, quality and cost of aged care services.

### 3 What a reformed care and support system would mean for older people

A support and care system that meets this vision and principles will ensure firstly that when something, whether small or large, goes wrong in an older person's life and becomes an impediment to their full participation in family and community, supportive arrangements are promptly accessible, and fully responsive to the person's need, situation and preferences.

The goal of these arrangements is to assist in every possible restoration of function or situation, or to facilitate and enable people to maintain or restore their participation in community despite any frailty or disability.

As other physical, neurodegenerative (especially dementia) and/or other mental health challenges emerge, people will be able to promptly access care assessment that will result in an entitlement to a level of funding determined by the assessment. They or their chosen representatives can use this entitlement to obtain support and care either through approved providers or through their own networks and arrangements.

There will be a wide variety of choices and options available rather than predetermined menus. The mix of supports will vary from person to person according to their own support networks; personal aptitudes, preferences and aspirations; varying impact of disabilities; and other personal circumstances. Support and care services will be designed around these personal variables.

There will be a range of readily available support and care services linked seamlessly into the broader health system. These include easily accessible primary health care services; transition care after any acute health episode so no-one has a long term aged care assessment while acutely unwell; restorative and rehabilitative services to provide the greatest opportunity of getting back to full function after acute care; support and care services for people living with dementia; and palliative and end of life care.

Most people will receive care and support in their own homes, whether that is a 'family home' of long standing, or a retirement village, community or publicly owned housing, or a private dwelling chosen by people as their own later life housing option.

Some people's needs or circumstances will require them to access residential care and other supportive accommodation options. They may require constant care at a cost that can only be met in a supportive accommodation setting; or they may prefer the security of constantly available support staff due to their advanced frailty and/or cognitive impairment.

People will contribute to the costs of care according to their capacity to pay, and no-one fails to access care because they cannot afford it. The costs of accommodation are separate to care costs and people either purchase or rent, or enter loan/ licence arrangements for accommodation as they choose.

# 4 Fundamental reform is necessary to achieve this vision. The elements of reform needed for better care and support of older people are:

## 4.1 Promoting a society for all ages:

- high priority, well resourced and comprehensive initiatives to:
  - promote new and inspiring paradigms of the roles of ageing in our society, consistent with our Underpinning Principles
  - stimulate positive and inspirational representations of ageing
  - combat all forms of ageism
- a commitment to raising the profile of aged care and support by presenting positive images to demonstrate its significant contribution to enhancing the well being of older people
- acknowledgement that optimum care and support can only be achieved with significant improvements to other key public infrastructure, including government commitment to achieving crucial elements, including:
  - adequate public housing and support services;
  - mandatory adaptable, accessible and sustainable design standards for all housing;
  - an integrated public and community transport system, designed to comprehensively support and accommodate the needs and aspirations of the entire community, including older people;
  - urban design that ensures integrated public and living environments that are safe and accessible for all ages and promote active involvement in community life

## 4.2 Consumer focused, user friendly and equitable:

- funding for care and support services linked to each recipient so that the recipient and their family can determine how and where they receive their care and support, including the option to control how their funding entitlement is used
- removal of the current regulatory restrictions on the quantity and type of services providers can offer so that they can be more responsive to older people's preferences
- accessible and reliable information on the availability, quality and cost of care and support services provided through a range of portals linked to comprehensive, integrated, consistent and current data on a user-designed data platform that supports informed consumer decision-making

- a well-resourced national aged care assessment system which achieves consistent and equitable outcomes and provides high quality, rapid, seamless and appropriate assessments based on multi-disciplinary skills, taking into account each person's history and circumstances
- robust community-based support networks and arrangements designed to work with and strengthen individuals' capabilities and build on community and family networks and other social ties
- flexible care and support services designed around and responsive to the varied situations, lifestyles, needs, preferences and aspirations of older people
- readily accessible participatory processes and structures that enable consumer involvement in aged care and support decision-making at all levels, supported by well resourced consumer advocacy services

#### 4.3 Entitlement to robust community care is front and centre - within a seamless continuum of care and support services:

- the separation of funding for support and care services and for accommodation, so that choices about each are as far as possible independent of each other, enabling greater options and choices in both services and housing
- the same care fees and subsidies across residential and community care for people with similar care needs to help with the exercise of equitable and free choice over where care and support is received, including the option of continuing to receive care in the community as needs change
- responsive and adaptable respite and temporary care and support options available as needed and sufficient transition, convalescent and rehabilitation services and facilities to meet need
- all levels and forms of services allow and enable older people to enter, leave and, most importantly, re-enter as needed
- a variety of housing and residential care and other supportive accommodation options that meet adaptability, accessibility and sustainability standards sanctioned by government, supplied by a variety of government, charitable and private providers in a range of types and standards which include sufficient accommodation for those who do not have the means to self-provide
- genuine integration of all aged care and support services within a more seamless continuum of health services from primary, to planned and emergency acute, to restorative; all equitably accessible by older people without discrimination
- access to appropriate and high quality palliative and end-of-life support and care from the earliest appropriate opportunity



#### 4.4 Properly funded and flexibly and equitably financed:

- funding provided to individuals as an entitlement based on assessed needs, rather than being subject to quotas
- funding for care and support based on regularly updated independent benchmarking of the cost of providing care and support in an environment where recipients have full choice of such services
- user contributions to the costs of support and care services to be nationally consistent, transparent, equitable and affordable - with a variety of payment methods available
- no-one should be denied access to support and care due to financial incapacity
- flexible payment options for the cost of supportive accommodation options, including residential care, which provide genuine choice in how user contributions are made (e.g. loans, periodic payment, deferred contributions, rent), using a statutory framework to ensure transparency, security and like for like comparability in an environment where care recipients have full choice of services
- a dynamic and resourced workforce planning regime with adequate funding to ensure sufficient skilled, appropriately qualified and competitively remunerated staff are attracted to and retained in aged care and respected for their work

#### 4.5 A framework of support for informal carers and families:

- formal acknowledgement and improved support for families, friends and community carers, including the development of long-term strategies to address their diminishing numbers in light of Australia's changing demographics
- acknowledgement that family and informal carers have the right to cease carer roles for short periods or permanently

#### 4.6 Continuous improvement and quality control:

- optimum services continuously improved through shared learning founded on evidence-based practice and well-supported research programs which investigate all facets of ageing and of caring for older people
- funding for services to include provision for optimal levels of continuing and recognised qualifications, training and development for all staff and volunteers in aged care
- a robust and dynamic accreditation system for approved ethical age care providers across the full range of aged care and support services including community, residential, respite, and short and long term living options

- an independent national complaints service that meets the Australian Standard and is based on fostering feedback and complaints mechanisms from the service level up, focused on prompt complaints resolution, enhanced learning and service and system improvement
- accreditation and complaints systems that proactively foster consumer involvement in identifying service quality issues, fully protect all genuine informants, act with fairness and respect and promptly and appropriately correct malpractice, abuse and poor quality service

## 5 Reform Implementation

Implementation of these reforms will require broad support and the involvement of all stakeholders including most importantly representatives of and advocates for older people, aged care providers, industry and finance experts, and the Federal Government.

The complexity of aged care will necessitate transitional regulatory arrangements and funding to move from where we are now to the vision of care and support outlined in this paper.

Older Australians deserve and are entitled to a care and support system that ensures them the same freedoms and choices as all other Australians.