

Quality Aged Care Action Group Incorporated (QACAG Inc.)

*QACAG Inc. is an advocacy group that aims to improve
the quality of life for residents in residential and community aged care*

Quality Aged Care Action Group Inc. Second Submission to the 'Caring for Older Australians' Productivity Commission Inquiry March 2011

Quality Aged Care Action Group Incorporated (QACAG) is a community based group which aims to improve the quality of life for people in residential and community aged care settings. We do this through talking to community groups, running events and activities such as the 'Dignity and Respect' postcard campaign and holding aged care community forums, lobbying government at local, state and federal levels, and participating on committees and networks. Appendix 1 describes the role and objectives of QACAG in more detail.

A delegation from QACAG met with Commissioners Mr Mike Woods and Mr Anthony Housego on 21 July 2010 and subsequently made a written submission on behalf of our members.

We are pleased to be able to attend the Final Hearings and look forward to meeting with you at 11.10am on Tuesday 29 March 2011. Mrs Betty Johnson and I will be attending on behalf of QACAG.

Below is a summary of the areas we would like to address on behalf of QACAG in response to the Draft Report.

Funding and Restructuring

We note that the report dedicates much of its focus to redesigning the funding system and that it proposes a shift towards much more of a 'user pays' system.

We welcome the proposals to make community-based care more flexible and responsive, and to locate more choice with older people in choosing who provides care. This must be supported by a much greater transparency and accountability: from providers to the funding bodies *and* to the older people receiving and paying towards services.

We support the idea of the single gateway for its benefits to older people making contact for a range of services. We would like to know how it might operate, and believe it should be a core government service, as a first point of contact, and not operated by private and non-government organisations which are responsible for actually providing the care.

We agree that people want remain at home and that where possible be cared for by

people from their close ties. We support a focus on care at home, including palliative and end of life care, and believe this must also be subject to proper staffing and skill levels.

QACAG remains committed to the view that nursing home care is an essential service, and is a health care need, not a lifestyle choice.

(One of our members who is in long-term care would actually prefer to be called a 'patient' as she does not 'feel' like a resident – she is dependent on staff for her daily care needs and requires nursing care. She does not live in care from choice, but due to health care need.)

We continue to oppose bonds for people first entering at a high care level, as we regard it as similar to selling/borrowing against one's house to go to hospital. Often it is a time of crisis for the older person and their loved ones, and the length of stay is more often weeks or months rather than years.

Several members commented that they believe many people would avoid seeking any help at home for fear of starting the process that might lead to losing their homes (whether real or perceived).

We are concerned that the removal of distinction between 'high' and 'low' care will open the door for even less accountability. At least now in high care (nursing homes) there is the protection of NSW legislation to ensure an RN on duty at all times. As it is, most hostels are now filled with people who have 'aged in place' to high care, where there is frequently no registered nurse on duty.

QACAG is concerned about the possibility of creating a sub-standard layer of care or 'ghetto' facilities if providers can trade their concessional beds. To prevent this, extensive work would need to be done to ensure that 'care' and minimum staffing is clearly defined and regulated to support good care for all. We question if it is acceptable for some facilities to avoid taking a range of residents solely based on income.

Nursing and Staffing (workforce)

QACAG is committed to keeping nurses in aged care, and that the roles of nurses must be supported, but not replaced, by care support staff. Service providers must ensure the staff are qualified, capable and well resourced to carry out their role. This includes staff having the skills, management support and enough time, whether in the community or in residential care.

We have witnessed the changes in terminology which serves to remove the language of 'nursing', including calling Directors of Nursing 'Directors of Care', reclassifying Assistants in Nursing to care workers, and calling nursing homes aged care facilities.

We also note our concern at to increasing loss of 'clinical care' as the driving force in care provision. While providers must be well managed and finally viable, we frequently hear examples of decisions being made by non-clinical management staff against the advice of clinical staff, or without the clinical needs being understood or addressed.

QACAG wants some sort of mandatory staffing: the number of nurse and care staff per person has decreased dramatically, and there seems no avenue to address this. Accreditation Standards and the Aged Care Principles use terms such as 'adequate' or 'appropriate' staffing but the numbers and time available to care for residents continues to decrease.

The CAM/SAM system used to tie funding to staffing: this meant that providers had to allocate a set amount to staffing, based on the older person's needs, or return the unspent funds. While the mechanics were complex, the outcomes for residents were vastly better than the deregulated system now which relies upon provider choice.

QACAG has previously raised concerns about the variability of training courses for aged care workers (eg Cert 111&1V), including examples of 'be a nurse in 7 days', and staff being moved between kitchen, garden and bedside with no specific training. We see it as an urgent priority to address this, especially:

- Set a minimum standard of qualification for anyone providing direct care
- Ensure a set standard for curriculum including length of course and process to pass (TAFE as the benchmark)
- Introduce a regulation system for all direct care workers for the protection of community (we are surprised that this was rejected by the Report and urge that this be reconsidered)

Consumer Voice

Aged care reform must incorporate consumer participation at all systems levels. The opportunity must be taken to ensure this is built in, rather than 'added on'. We want genuine, long-term and structured involvement by consumer representatives in all levels such as the proposed Gateway and within the Australian Aged Care Regulation Commission.

If you would like more information prior to our meeting, please contact me. We look forward to talking with you on Tuesday 29 March.

Yours sincerely,

Lucille McKenna
President of QACAG Inc

ABOUT QACAG

Background

QACAG Inc. was established in 2005 and became incorporated in 2007. The group is steadily expanding with a current membership of 150 drawn from individuals and organisations across NSW who strive to promote positive change through collaboration and community action. Regular meetings occur in Sydney, the Central Coast and the Blue Mountains, and an Annual General Meeting is held each year. To assist the sustainability of our group the NSW Nurses' Association provides some secretariat support and access to meeting and teleconferencing facilities.

Membership

QACAG is made up of people from many interests and backgrounds brought together by common concerns about the quality of care for people in aged care. We offer a wealth of experience with members including people receiving aged care services in nursing homes or the community, family and friends who support loved ones, nurses and retired nurses, people who work in aged care or health, long term activists in welfare and health and other concerned community members. Membership includes representatives from the Older Women's Network, The Combined Pensioners & Superannuants Association of NSW Inc, the Retired Teachers' Association and the Newcastle Combined Pensioners' Area Council. Several members sit on boards or committees or belong to other associations bringing a wider context and knowledge to their membership to QACAG.

Many QACAG members are older people themselves, some well into their eighties. Some members travel on public transport or in car pooling for up to three hours each way to attend meetings, and this speaks to the commitment and passion in this group. We recognise that at times our older members face the discriminative and devaluing attitudes towards older people that are insidious in the wider community. In fact, some are reluctant to disclose their age due to experiences of dismissive or patronising responses in various settings. Within QACAG we highly value the influence of older people with such a depth of life experience and know that this adds particular richness to our submission and to the work of our group

QACAG OBJECTIVES

QACAG

- strives to raise community awareness about aged care services and to take action to promote and achieve positive change
- aims to ensure the views of consumers are represented in networks and forums where aged care services are being developed, evaluated or commented upon, in government and non-government sectors
- maintains communication with providers of aged care services in relation to the views of consumers, but is not a forum for proprietors or owners.

QACAG provides a forum for members to discuss issues that affect the quality of life for people receiving aged care services in residential or community settings, including:

- what to look for when choosing aged care services
- what services are provided and payment structures
- staffing levels and staff skill mix: nursing staff and other staff
- who runs aged care services: for-profit, not-for-profit, government
- funding and accreditation systems
- state and federal legislation governing aged care
- how to raise concerns or make a complaint
- how to lobby for change