

The National Report

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Aged & Community Services Australia

Contents

Another Chance to Tell us What You Think of National Report
Aged Care Bonds Back on Agenda
Minister Signals Broader Approach to Protecting Older People
2020 Summit Submissions
Ambassador for Ageing
ACFI Feedback
Community Care Conference : Magic and Myths Coming Closer
Government News on How to Apply for Zero Real Interest Loans and Associated Places
New Extra Service Approvals
Medication Use in Tasmania
Government to Fund Wound Management Research
National Health and Hospitals Reform Commission Seeks Submissions
Campaign to Reduce Slip, Trip and Manual Task Injuries
Government Reform Road Map on Skills
Government Support for Parkinson's training
Business Model for Aged Care Work
Learning Module for Palliative Care for Aged Care residents
Preparedness for Influenza in Residential Aged Care Facilities
Housing News
Water Safety Program for Older Australians.
Understanding Younger Onset Dementia
Multicultural Mental Health Australia New Mental Health Resources
Surgical Masks Effective in Preventing Spread of Flu Virus

Another Chance to Tell us What You Think of National Report

Many thanks to the good number of readers who took the time to complete our 2008 National Report Survey, in which we are seeking your views on content, timing and the possible addition of a monthly Research and Publications Report to cover the many items we don't have room to run in National Report.

We have included the survey again at the back of National Report and ask those who haven't yet completed it to do so and return to ACSA.

Aged Care Bonds Back on Agenda

In an underreported announcement last week Opposition spokesperson on Ageing, Margaret May, signalled a possible end to the Coalition's decade long opposition to market pricing of aged care accommodation in High Care.

She raised the issue in the context of Price Waterhouse's financial analysis of the industry published in 2007, which identified a \$5.7 billion funding gap opening up over the next decade - as a direct result of the increasing costs of construction of aged care facilities and the failure of user payments to cover them.

"Mrs May said taxpayers could not pay the bill indefinitely and Industry proposals for "refundable deposits" and a range of other alternatives should be examined.

I have been listening to the industry and I am prepared to put their proposals before shadow cabinet," Mrs May said.

Liberal leader Brendan Nelson has not ruled out the idea of bonds, but indicated the Opposition would first look at the provisions for aged care in next month's Budget."

Linking user charges for residential care accommodation to people's ability to pay on the one hand and to the cost of that accommodation on the other has been recommended in every serious investigation of residential care over the past decade including the Hogan Report of 2004. Until now such proposals have been blocked at the most senior levels in Government.

ACSA CEO Greg Mundy commented: "The current system is inadequate and inequitable. It doesn't cover the costs of providing accommodation in high care and what people pay depends primarily on whether they are high or low care rather than what they can afford. Low care residents are effectively subsidising high care residents."

"This isn't just about Accommodation Bonds in High Care, though ACSA agrees that option needs to be on the table. It's also about a rational, fair system of user payments to replace the messy product of a decade of fudging the issue, such as the new payments scheme that started on 20 March this year. Protection will always be needed for those without means but there is scope for others to pay on a more equitable basis."

"The opponents of such measures within aged care have moved on from positions they may have held in 1997. Now that the Coalition has signalled a willingness to change it's a good time for the new Government to rise to this challenge."

"We can afford to pay for an ageing population if we approach it in the right way", Greg Mundy concluded.

Minister Signals Broader Approach to Protecting Older People

Minister for Ageing Mrs Justine Elliot has broadened her approach on combating elder abuse acknowledging, in a Media Release last week, the need to work in partnership with a range of stakeholders, including aged care providers, to ensure safety and quality in aged care.

Her statement acknowledged the efforts of the industry and of associations such as ACSA to promote quality.

"The overwhelming majority of aged care providers are providing top quality care for our nation's elderly. I have seen world-class facilities and programs in every state and territory... The Government has made a firm commitment to continual improvement in the delivery of aged care and I look forward to working cooperatively with providers and service deliverers to achieve the best outcomes possible for our older population," Mrs Elliot said".

The aged care industry looks forward to seeing the commitment to improvement in aged care to be matched by appropriate resourcing in this year's budget!

2020 Summit Submissions

These are to be made available to all on the <http://www.australia2020.gov.au/> web site from the 14th April. ACSA has covered three areas in its submission: the need to invest adequately in aged care if we are to meet the health (and other) care needs of an ageing population, the risk to older people of social exclusion – which can be alleviated by better housing and care and the specific aged care needs of indigenous Australians. ACSA's submissions are also available on its web site <http://www.agedcare.org.au>

Ambassador for Ageing

Minister Elliot has announced the appointment of actor Ms Noeline Brown as the Ambassador for Ageing, with a brief to promote positive ageing. Noeline Brown is a well respected media personality, an active community member and an Australia Day Ambassador.

The Federal Government created the Ambassador for Ageing to ensure that older Australians have a strong voice, a direct link into Government and a person to promote positive and active ageing. The Ambassador for Ageing will be involved in a range of activities and events that promote positive and active ageing within the community as well as being a spokesperson for older Australians.

While known to most older Australians for her comedy roles, including Mavis Bramston and the Naked Vicar, Noeline has shown that she is ageing gracefully in her successful run on the top rating TV program Dancing with the Stars. In the second last series she kept up with younger performers- and a younger partner- until well into the knockout competition.

ACSA welcomes her appointment and will invite her to meet with our industry as soon as possible. We look forward to working with Noeline to promote a positive approach to ageing and aged care

ACFI Feedback

ACSA is interested in hearing from members how the early weeks of the ACFI are going. If you have feedback please provide through your State Association. Meanwhile here is another reminder from Medicare Australia on how to ensure speedy and accurate reimbursement

Are you aware that you can lodge your ACFI online?

You can do this by using:

- the web based form - all you need is internet access (preferably broadband), and a user ID and password from Medicare Australia or Aged Care Online Claiming software via either the Business to Business (B2B) channel or a file upload channel - available from industry software vendors.

You will benefit through:

- immediate submission of your ACFI form to Medicare Australia
- immediate acknowledgment that your ACFI form has been received
- faster feedback
- no funding delays - ACFI funding starts from the date your form is submitted and received online by Medicare Australia
- immediate electronic validation of data entry

B2B users will also benefit by:

- reduced paperwork
- improved access to data for use within business and delivery of care.

How to register.

To submit your ACFI forms online you will first need to register. Registration forms are available on the Medicare Australia website.

To register to use the:

- web based form—complete the ACFI authorisation form
- B2B or file upload channels—complete the Residential authorisation form.

For more information visit www.medicareaustralia.gov.au or call 1800 195 206** and select option two.

Community Care Conference: Magic and Myths Coming Closer

ACSA's second National Community Care Conference is now less than a month away, but there's still time to be part of the magic.

Places are still available in the pre conference workshops on dementia and chronic disease self management. Register now and secure your place.

On the plenary program, Shereen Moloney from New Zealand promises to provide an interesting pathway to making change work in this challenging sector.

She has overseen a major change from 'reactive crisis management' of the community provision of health and disability care in the community, to proactive early identification and management of care to enable these people to live in their own homes and to connect with their community.

A 'six-pointed star' now provides the way to successful care, and three years after the change, hospital admission rates and entry to residential care have both been reduced along with other clear indicators of success.

Shereen, who is now Senior Manager, Health of Older People for Capital and Coast District Health Board, has worked in the Health Ministry and the NZ Home Health Association, so she has brought policy and advocacy experience to her delivery responsibilities. Definitely not to be missed, she'll be speaking on Day One - Wednesday 14 May.

Registration and full program details online at <http://www.agedcare.org.au>

Government News on How to Apply for Zero Real Interest Loans and Associated Places

Minister Elliot has written to providers advising them on how to apply for some of the \$300 Million zero real interest loans for capital development. Advertisements have also appeared in the press.

Stage one of this initiative involves the Department of Health and Ageing inviting proven residential aged care providers to apply for \$150 million in zero real interest loans and up to 1,250 residential aged care places to build or extend residential aged care services in areas of need.

This loans round is separate to and different from the annual Aged Care Approvals Round, which will be conducted later in the year. Rather than applying for a set number of places made available in a particular area, providers are encouraged to submit proposals for a service or mix of services in accordance with a business plan that they believe is sustainable.

For example, providers seeking to establish a residential aged care service in a small regional centre may wish to also apply for a small number of community care places, or may propose to establish small services in adjacent towns managed from a central hub.

The criteria to be used to determine eligibility for a zero real interest loan include a good record as a quality provider of residential aged care, experience developing new services in a timely manner and sound financial viability.

The application form and a detailed application guide are now available on the Department of Health and Ageing website at <http://www.health.gov.au>. This site also contains a list and maps identifying the high need areas, a fact sheet on the Zero Real Interest Loans and responses to frequently asked questions.

Providers have 8 weeks to apply, with applications closing at 5pm (AEST), 6 June 2008.
<http://www.health.gov.au/internet/main/publishing.nsf/Content/ageing-contacts-subscribe.htm>

New Extra Service Approvals

Minister Elliot has announced that 179 places in six facilities in NSW, Queensland and Victoria had been granted Extra Service Status. More applications for Extra Service status are being considered in the February 2008 Extra Service Status Application Round.

Medication Usage in Tasmania

The last edition of National Report covered academic research undertaken in Tasmania regarding medication usage. Aged and Community Services Tasmania advises that aged care providers in Tasmania welcome moves to examine more effective ways to reduce the use of sedatives. However they reject the inference that a reported higher level of use in Tasmania somehow leads to a lower standard of care.

Many providers in Tasmania follow world's best practice in managing challenging behaviours. They believe GPs can be provided with further information and education in this area as they are the prescriber (not the nursing homes and their staff).

All aged care providers in Tasmania strive to maintain the highest possible standard of care. They would encourage a broader analysis of this practice across the community if we are serious about reducing the use of sedatives.

Aged and Community Services Tasmania is encouraging its members to volunteer to be part of this study and welcomes the opportunity for research to improve the industries already high standards of care.

Government to Fund Wound Management Research

The Minister for Health and Ageing, Nicola Roxon, and Minister Elliot, have announced plans for wound management research projects in aged care worth up to \$500,000.

With over 270,000 older Australians suffering from chronic wounds, this research will develop best practice in wound management that will be able to be translated across the sector - allowing for shorter stays in high care facilities and hospitals and much greater comfort to residents and patients.

A wound management research program will be a priority for future funding through the second round of Encouraging Best Practice in Residential Aged Care Program (EBPRAC). Individual projects will focus on federally-funded aged care homes.

Through EBPRAC, clinical guidelines are being translated into good practice in several aged care homes and this will lead to sustainable change in care delivery.

By focusing on wound management, aged care homes will be able to use up-to-date evidence-based clinical practice to improve care for all residents. Many older people will benefit from having improved access to appropriate wound care management.

The research will identify the most effective strategies for aged care homes to implement and maintain current good practice in wound management.

While some homes may have wound care management education for their staff, this new research program will encourage and support ongoing education to ensure consistent development of best practice helps improve care for older Australians.

National Health and Hospitals Reform Commission Seeks Submissions

The recently established National Health and Hospitals Reform Commission (NHHRC) has called for submissions to help the Commission design Australia's future health system. The NHHRC is seeking input from the public, frontline health workers, professional and consumer groups, and other interested people and organisations.

The Commission has developed draft principles for the Australian health system and is also inviting comment on these. The draft principles are available on the Commission's website.

There are several stages of the NHHRC engagement program over the life of the Commission to link with key reporting dates: interim report in November 2008, and final report mid 2009.

Individuals and organisations are encouraged to make submissions to the NHHRC by email to talkhealth@nhhrc.org.au. Submissions may also be made by mail to PO Box 685 Woden ACT 2606, or by calling 1800 017 533.

Submissions will be accepted from now until the end of May. For further details including the terms of reference of the Commission, the principles and a guide to making submissions, please visit the website at <http://www.nhhrc.org.au>

Campaign to Reduce Slip, Trip and Manual Task Injuries

A national campaign, led by Tasmania, aimed at reducing the number of slip, trip and manual task injuries sustained by non clinical hospital workers is now underway.

The Heads of Workplace Safety Authorities said the health and community services industry is a key contributor to the high levels of slip, trip and manual task injuries in Australia.

Nationally, 17,400 compensation claims were made by workers in the health and community services industry during 2004-2005.

The Safe Steps - National Hospital Intervention and Compliance Campaign focuses on helping non clinical workplaces in the health and community services industry to increase awareness of and manage slip, trip and manual task risks.

www.hwca.org.au

Government Reform Road Map on Skills

The Australian Government has released a road map for the reform of vocational education and training.

The Skilling Australia discussion paper sets out the delivery of the Government's additional 450,000 training places.

It refers to a new industry demand driven approach to training delivery rather than the old supply driven approaches of the Howard Government. Close consultation with business is a key component of our efforts to build a world class training system and a modern economy that delivers for Australian families. The new demand driven approach will better match up training to the needs of industry - finally providing businesses with a solution to on-going problems with skill shortages. Submissions commenting on the discussion paper close 30 April 2008. ACSA will be commenting on forthcoming rounds which will have greater relevance to our sector. <http://www.productivityplaces.deewr.gov.au/home.htm>

Government Support for Parkinson's training

The Australian Government will provide \$90,000 to Parkinson's Australia for the development and implementation of the online education and support program, which will be accessible to all health professionals, including those in regional and remote Australia.

The program will be provided free-of-charge to medical practitioners and nurses and will equip them to better diagnose Parkinson's disease and more effectively treat their patients.

The announcement underlines the Government's commitment to providing the best possible support to people with chronic illnesses and their families, and to supporting research to improve the treatment of these conditions.

Business Model for Aged Care Work

The latest Residential Aged Care Palliative Approach Network Newsletter has reported advice from GP partners Aged Care Team on its interactive tool, the 'Business Model' that demonstrates aged care work, with sessional visits to Aged Care Facilities, is a reasonable economic alternative to in-surgery consultations.

With this tool it can project earnings for sessions worked in Aged Care Facilities according to variables such as time spent travelling to and from the facility, length of time spent consulting there, and the average consultation time.

It can also demonstrate the financial benefit in planning to perform some Comprehensive Medical Assessments (CMAs), case conferences and Residential Medication Management Review RMMRs on a regular basis.

Learning Module for Palliative Care for Aged Care residents

Over 40 Divisions of General Practice will be rolling out *The Palliative Care Journey for Aged Care Home Residents Active Learning Module (ALM)* around Australia between March and August 2008. It includes six hours of education delivered in two 2-hour workshops and two hours of practice based activities.

While GPs and GP registrars are the primary target audience of the ALM, it has been designed to be offered as a multidisciplinary module to also include clinical decision makers in aged care homes and allied health professionals.

Details of the Divisions that are planning to deliver the ALM and the dates of the workshops are available on PCA's website. <http://www.palliativecare.org.au>.

Preparedness for Influenza in Residential Aged Care Facilities

Residential aged care facilities (RACFs) are considered to be high-risk environments for influenza due to communal living arrangements and the continual close proximity of residents. Nursing homes and hostels caring for older people are especially high-risk environments due to the age of residents and high prevalence of chronic medical conditions.

Current evidence supports that immunisation of older people against influenza and pneumococcal disease reduces hospitalisations and deaths due to complications of both these diseases. For older people in residential care settings the vaccine is 30-40% effective in preventing illness, 50-60% effective in preventing influenza-related hospitalisation or pneumonia, and 80% effective in preventing influenza-related death.

Two studies have demonstrated that RACFs with high rates of immunisation (above 60-80%) among residents have fewer outbreaks of influenza compared with those with lower immunisation rates. These findings are consistent with immunisation effects in other populations.

Influenza and pneumococcal vaccines are provided free for eligible RACF residents under the Australian Government funded program. However the vaccine cannot be provided free for RACF staff at this time, which is one of the challenges facing RACF providers.

The following websites provide further information on influenza:

- Influenza Outbreaks in Aged Care Facilities Factsheet - <http://www.health.nsw.gov.au/factsheets/infectious/influenzcontrol.html>
- Guidelines for the Prevention and Control of Influenza Outbreaks in RACFs http://www.aodgp.gov.au/internet/main/publishing.nsf/Content/cda-pubs-other-flu_guidel.htm

Housing News

• Opera House Upgrades for Older Australians

Upgrades currently underway at the Sydney Opera House - including the first public lift in the facility - will make it easier for older Australians and people with mobility issues to visit and experience one of Australia's greatest cultural institutions.

The \$38 million redevelopment includes the construction of the first public lift in the Opera House and the installation of two public escalators, which together save visitors from negotiating some 92 steps.

- **Take 6 Beyond Beige: Improving Architecture for Older People and People with Disabilities**

The challenges involved in improving architecture for the growing population of older Australians and those with disabilities form the basis of a new book launched by the Royal Australian Institute of Architects (RAIA).

Edited by well-known architects Beverley Garlick, Diane Jones and Guy Luscombe, *Take 6 Beyond Beige: improving architecture for older people and people with disabilities* looks at key issues such as: planning communities for an ageing population and recent trends in this sector; housing baby boomers; and designing new buildings for the mentally challenged.

- **NSW Benevolent Society Aims to Combat the "Age Drain"**

The NSW Benevolent Society believes it is imperative for the ageing services industry to assist older people to remain in their neighbourhood for as long as possible.

"All the research-based evidence shows that older people have a better quality of life, and are able to give more back to the community if they are able to stay in the home and area of their choice," said the Society's Chief Executive, Richard Spencer.

"They receive more care from friends and family when they are not forced to sell-up and/or move elsewhere because of housing pressures, lack of services and outdated accommodation facilities." Sadly, the trend is continuing to tilt towards enforced relocation to places outside the suburb or locale they have lived in for a long time and are most happy in. This age drain is in most cases not beneficial for the wellbeing of the people concerned or the social fabric of the community."

Mr Spencer said a major objective of the Society's proposed Apartments for Life project was aimed at seeing 95 per cent of residents stay in their home until the end of life.

Mr Spencer said comprehensive research undertaken by the Society underscored a preference for older people to maintain their independence in their own homes, and the driver to move to a nursing home or hostel is not necessarily based on choice but because there is no alternative.

"Those two pointers alone provide a strong case - indeed a necessity -for industry and all levels of government to be actively looking at new ways of dealing with a real problem area of an ageing population," he said.

- **Renting in Retirement 'Costs Four Times More'**

Renting a property during retirement costs almost four times as much as owning one, UK research shows. Pensioners who do not own their own home need an average of £11,491 a year to cover rent, utility bills, ground rent and services charges, but the average home owner needs only £3,020 a year to maintain their property.

As a result the average person would spend £133,117 on living costs during a 16-year retirement if they rented a home, rather than living in one they owned outright, according to the insurer Friends Provident. The group said someone who started saving into a pension at the age of 23 would need to save only £40 a month to cover their housing costs in retirement if they owned their home, but this soared to £150 a month if they planned to live in rented accommodation.

The difference is even greater for people who do not begin saving into a pension until they are 43, with home owners needing to set aside about £115 a month to cover housing costs, while tenants would need to save £450.

Jeremy Ward, the head of pensions marketing at Friends Provident, said: "Renting a property can often be a difficult cycle to break out of due to the initial money and deposit needed to purchase a house. Renting during retirement creates further difficulties and means that renters need to be more prepared and have a much larger annual income in retirement to keep a roof over their heads. In turn this means that renters need to be aware of the extra income required and make provisions for this in their pension planning."

Water Safety Program for Older Australians.

Royal Life Saving has developed an innovative Grey Medallion, a water safety program aimed specifically at the over 55's that will promote a healthy, active and safe aquatic lifestyle for Australia's growing older population.

Approximately 60 people aged 55 years and older drown in Australian waterways each year. This has been attributed to older people making a sea change, participating in more aquatic activities in their retirement and having a lack of understanding of their current swimming skills.

The Royal Life Saving Grey Medallion program has four components:

1. Water Safety Knowledge
2. Resuscitation and Emergency Care.
3. Aquatic Exercise
4. Personal Survival and Lifesaving Skills.

Understanding Younger Onset Dementia

Alzheimer's Australia has released a new publication to promote a better understanding among healthcare professionals and their patients of younger onset dementia, which affects 10,000 Australians aged under 65.

Alzheimer's Australia commissioned Understanding Younger Onset Dementia from clinicians and researchers at the Melbourne Neuropsychiatry Centre, a division of North Western Mental Health and the University of Melbourne, based at the Royal Melbourne Hospital.

The handbook outlines the diseases which cause dementia, the patterns of symptoms associated with them and the tests which are carried out to make the diagnosis. The publication is available on the web at: <http://www.alzheimers.org.au>.

Multicultural Mental Health Australia New Mental Health Resources

Multicultural Mental Health Australia (MMHA) has released a number of new mental health resources – the "What Is.." series of mental health fact sheets in over 20 languages.

The 10 topics cover issues surrounding mental illness, anxiety, bipolar mood disorder, eating disorders, depression, personality disorders, schizophrenia, challenging behaviours and suicide. The fact sheets are available in Amharic, Arabic, Assyrian, Chinese, Croatian, Dari, Dinka, English, Farsi, Greek, Italian, Khmer, Korean, Krio, Macedonian, Polish, Russian, Serbian, Spanish, Swahili, Turkish and Vietnamese.

The series has also been adapted for people who are visually challenged. MMHA and Australia's leading provider of blindness and low vision services, Vision Australia, have produced the series into braille, large print, electronic text for the internet and audio formats such as CD, cassette and DAISY for those with a print disability.

In addition to these new resources, MMHA has also released a new series of bilingual resources with beyondblue: the national depression initiative. These fact sheets, which previously were only available in English have now been produced in Arabic, Assyrian, Bosnian, Khmer, Croatian, Dari, Farsi, Greek, Italian, Japanese, Korean, Lao, Macedonian, Polish, Punjabi, Russian, Serbian, Chinese (Mandarin and Cantonese), Somalian, Spanish, Tamil, Thai, Turkish and Vietnamese.

The resources include: The Depression Checklist, Understanding Depression, Living and Caring for a Person with Depression, How Can You Help Someone with Depression? Depression and antidepressant medication and Emotional Health During Pregnancy and Early Parenthood. These new resources are all free and can be ordered directly from the MMHA office - 02 9840 3333 or downloaded from www.mmha.org.au/mmha-products/fact-sheets

Surgical Masks Effective in Preventing Spread of Flu Virus

Australian researchers have found that normal surgical masks help prevent people with the flu from spreading the virus just as well as more expensive face protection.

Previous studies tested masks in laboratories using machines, not humans, and with non-infectious particles. The study compared routine surgical masks with the more expensive and uncomfortable N95 masks, which are made from finer material.

No influenza virus was detected when participants wore the surgical or N95 mask but influenza was detected on all dishes when no mask was worn.

Findings strengthen the rationale for recommendations that patients in hospital with flu and healthcare workers treating them wear masks.

The information was presented at the Australasian Society for Infectious Diseases conference. www.asid.net.au

2008 National Report Survey

National Report is seeking feedback from readers to help us meet your information needs.

- 1. Do you find the National Report gives you the information you require?**
 Usually Sometimes Rarely Never

- 2. If not, what sorts of information would you like to see included?**

- 3. Would you like more or less detailed information?**
 More detailed Same Less detailed

- 4. Do you on-send the National Report to colleagues?**
 Usually Sometimes Never

- 5. Do you rely on the information that is included?**
 Usually Sometimes Rarely

- 6. Is the National Report timely in giving you the required information?**
 Usually Sometimes Never

- 7. Would you be interested in an additional monthly report on research and publications of interest and relevance to aged and community care services, providers and staff rather than having this material in the regular National Report?** Yes No

- 8. National Report aims to be about 10 pages long. Do you find this:**
 Too long About right Too short

- 9. Do you have any other comments about ACSA's National Report?**

Are you an: Aged Care Provider Government Official Political Official
 Supplier to the Industry Other