

The National Report

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Aged & Community Services Australia



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DUE TO THE EASTER BREAK, THE NEXT EDITION OF NATIONAL REPORT WILL BE DISTRIBUTED THE WEEK AFTER EASTER.

Can't do it without you Image Campaign Update

One of ACSA's corporate national partners, the leading continence product company TENA, has become the first sponsor of the campaign *Can't do it Without You*. TENA, who has been a national partner for over four years presented ACSA with a cheque for \$40,000 last week, which will

provide a significant boost to our fundraising effort and to the media awareness and public information campaign it funds.

This support shows TENA's confidence in our industry, and we hope members reciprocate in their support of TENA.

We also hope it inspires members to show their support by contributing financially - albeit at a more modest level- to the campaign. All monies raised will go to buying media time or space as described in the campaign brochure which State Associations have distributed to members.

ACSA's campaign to improve the image of aged care is receiving an enthusiastic reception in a series of briefings being held around Australia by CEO Greg Mundy and Policy Manager Pat Sparrow, who is managing this major project. Victorian, NSW, ACT and SA members heard campaign details at the recent Tristate Conference in Albury, South Australian members attended a briefing in Adelaide on 19 March, and Queenslanders will be briefed at the State Conference in Brisbane this week.

Individual services are urged to keep up ongoing local community awareness activities with the national campaign providing additional paid media support and ideas. The money you contribute nationally will help you locally.

For further information on how to participate, go to the ACSA website at www.agedcare.org.au.

ANF Campaign - Because We Care

The Australian Nursing Federation (ANF) launched its *Because We Care* national aged care campaign last week.

ANF national secretary Ged Kearney said the *Because We Care* campaign is aimed at raising the awareness and recognition level of Australia's highly skilled and dedicated aged care nursing and care workforce, focusing on:

- The right balance of skills and nursing hours so that nursing and care staff can provide quality care for every resident.
- Fair pay for aged care nurses and care staff who are paid up to \$300 per week less than nurses in other sectors.
- Recognition of the professional skills of Assistants in Nursing and care staff through a national licensing system.
- A guarantee that taxpayer funding is used for nursing and personal care for each resident.

More details at www.becausewecare.org.au

ACSA's View

Greg Mundy has stated ACSA supports the idea of lifting the profile of aged care and recognising the fantastic work that Australia's aged care professionals do. "ACSA's own campaign to lift the image of aged care has these among its objectives, so to the extent that the ANF campaign is about lifting the profile of aged care, it will complement our efforts."

“The specific issues raised by the ANF are another matter and many of their objectives, such as achieving more competitive wages for aged care nurses, cannot be achieved without increased Government funding. If CAP indexation is not continued in this year's budget and extended to community care, the staffing issues besetting aged care will get worse and the Government will be responsible for a further erosion in the care we can provide for Australia's ageing population.”

“Aged-care providers prioritize any additional funding allocations to ensure the quality of care is the best it can be,” Mr Mundy said in a media release commenting on the ANF campaign.”

“As we stated in our budget submission, more generous funding in public and private hospital systems has enabled higher wages in these sectors and hampered efforts of aged-care providers to compete.”

Mr Mundy said all of ACSA’s providers seek to deliver the best care possible. “I am delighted that the ANF and its members are demonstrating their genuine care and interest in wanting the best for Australia’s elderly.”

Quality of Care Principles

The ANF have commented on lack of qualified nursing staff, and the roles and responsibilities of staff in aged care. Victoria Crawford, the General Manager Accreditation at the Aged Care Standards and Accreditation Agency advises that ...“Our prime focus is that residents in aged care homes receive the appropriate care and services. To that end we expect homes to demonstrate that there are appropriately skilled and qualified staff in sufficient numbers to ensure that services are delivered in accordance with the Accreditation Standards, and that the individual needs of residents are met.

The issue of who can deliver the services is part of whether the staff are appropriately skilled and qualified as well as any regulatory requirements.

Item 3.8 Nursing services, specifies the following care and services to be provided for residents receiving a high level of residential care-

- Initial and on-going assessment and management of care for residents, carried out by a registered nurse
- Nursing services carried out by a registered nurse, or other professional appropriate to the service (eg medical practitioner, stoma therapist, speech pathologist, physiotherapist or qualified practitioner from a palliative care team).

The item then lists a number of examples of such nursing services (including such procedures as suctioning of airways, insertion of suppositories, tracheotomy care).

If the scope of practice for a registered nurse division 2 covers any of these specialised nursing service, or indeed those that are beyond the list, then the Agency would considered them to be appropriate to deliver the service. Any staff carrying out nursing services must carry out these tasks subject to appropriate training and appropriate supervision by a relevant professional, and subject to assessment by a relevant professional that the services can be appropriately carried out by those staff.”

National Respite for Carers Program

The Department of Health and Ageing has advised that over coming days, employed carer respite service providers will be offered a two year extension to 30 June 2011 to their current funding agreements.

Seven Employed Carer Innovative Pilots will not be continued as they did not demonstrate effectiveness. These service providers were notified of the decision about 6 weeks ago. Some of the models have been referred by the Department to the Department of Employment, Education and Workplace Relations (DEEWR) as they appeared to be useful workforce models rather than for respite.

Productivity Commission Study of the Contribution of the Not for Profit Sector

On 17 March, the Productivity Commission received terms of reference from the Government asking it to undertake a commissioned study on the contributions of the not-for-profit sector. The study's focus is on improving the measurement of the sector's contributions, and removing obstacles to maximising its contributions to society.

In undertaking the study, the Commission is to:

- assess current and alternative measures of the contribution of the not for profit sector and how these can be used to better shape government policy and programs so as to optimise the sectors contribution to society
- identify unnecessary impediments to the efficient and effective operation of not for profit organisations and measures to enhance their operation
- consider ways in which the delivery and outcomes from government funded services by not for profit organisations could be improved
- examine recent changes in the relationships between government, business and community organisations and whether there is scope to enhance these relationships so as to improve outcomes delivered by the not for profit sector
- examine the impact of the taxation system on the ability of not for profit organisations to raise funds and the extent to which the tax treatment of the sector affects competitive neutrality.

The Commission has been asked to adopt a broad definition of the not-for-profit sector to encompass most types of not-for-profit organisations, including Australian based international aid and development agencies.

It is also to have regard to the findings of the Government's Taxation Review headed by Dr Ken Henry and the Inquiry into the Definition of Charities and Related Organisations (2001).

Low Emission Assistance Plan for Renters

As part of the Rudd Government's Economic Stimulus Package \$3.9 billion was allocated to energy efficient measures. There has been confusion over whether aged care facilities and Independent Living Units are eligible to apply. ACSA has sought clarification from the Department of Environment who administers the scheme and they have said that "The Government is very

conscious of the needs of aged care facilities and is working with the aged care sector and the Department of Health and Ageing on how best to involve the sector as a whole, when the insulation programs start on 1 July. In the meantime, people living in independent units such as in many retirement villages can access the insulation or solar hot water offer, provided they own or rent their home and meet the other eligibility criteria.”

New guidelines are currently being prepared but we have been told that the various financing arrangements in retirement living such as DMF and loan license should be captured with a deliberately loose definition of renters. Retirement living will be classified under “other landlords” of the Low Emission Assistance Plan for Renters.

Members can download guidelines and application forms from <http://www.environment.gov.au/energyefficiency/insulation-renter.html>

Physical Activity Recommendations for Older Australians

The Australian Government has developed *Physical Activity Recommendations for Older Australians* which were prepared by the National Ageing Research Institute in Melbourne. Under the new recommendations, older Australians are urged to accumulate at least 30 minutes of moderate physical activity a day. The recommendations are part of the Australian Government’s plan to promote healthy and positive ageing.

“The aim of the recommendations is to raise awareness of older Australian special physical activity needs - such as balance, mobility and strength training,” Minister Elliot said of the Australian Government’s plans to promote healthy and positive ageing. The recommendations will be developed into a brochure. In the meantime, further information and suggestions for how older Australians can follow the new recommendations are in the *Choose Health: Be Active* booklet which was first developed in 2005 for older Australians in conjunction with the Department of Veterans Affairs and Sports Medicine Australia.

http://www.dva.gov.au/media/publicat/2005/choose_health/index.htm

Amount of pensioner supplement

The Minister has made a Determination increasing the daily pensioner supplement in accordance with increases in the consumer price index published by the Australian Statistician. It will now buy \$6.89. Information about the increase in the amount of the supplement will be sent to all approved providers by facsimile and will be available to the public on the Department’s website.

Schedule of Resident Fees and Charges

The Department has distributed the latest schedule of Fees and Charges, for Residents who entered care on or before, and after, 19 March 2008. The new Rates apply from 20 March 2009.

Workplace Ombudsman Aged Care Audit

Federal Workplace Ombudsman Executive Director Michael Campbell has reported on the national human services audit, which involved workplace inspectors auditing 84 aged care providers in NSW and a further 77 in South Australia, Tasmania, Victoria and the ACT.

In NSW, a total of 18 employers were found to have underpaid about 170 workers more than \$117,000. Nationally, 51 companies had underpaid 671 workers \$268,000.

Mr Campbell said all underpayments were inadvertent and employers had agreed to back-pay workers all money owed.

Employers unsure if they are doing the right thing should contact the Workplace Infoline on 1300 363 264.

National Health and Hospital Reform Commission Interim Report

Discussion continues on the Interim Report released on 16 February. Consultant gerontologist Dr Anna Howe was interviewed on the aged care section of the report, on ABC Radio National Life Matters on 18 March. Included in her recommendations are a possible Commonwealth State Aged Care Agreement, and also a national assistive technology program. (Go to ABC website www.abc.net.au and follow links to hear discussion).

The Parliamentary Library has published an analysis of the Report, and concludes that the aged care recommendations are “consistent with the broader reform objective of consolidating responsibility for funding and policy under the Commonwealth. The interim report also encourages greater competition in aged care, less regulation and greater consumer involvement in decisions about how aged care subsidies are spent. Of note are the reform directions that suggest allowing the use of accommodation bonds in residential aged care and providing funding for aged care to care recipients rather than places. This would essentially amount to a voucher system which, if implemented, may allow for greater consumer involvement in aged care and competition in the sector.

“The interim report notes that the demand for aged care is increasing. It proposes to change the ratio of places per 1000 people aged 70 or over to care recipients per 1000 aged 85 or over to reflect the changing demographic and ageing profiles of older Australians.

“Many of the reform directions are consistent with what has been advocated previously in the Hogan Review of Pricing Arrangements in Residential Aged Care and the Productivity Commission’s report on trends in aged care services. However, unlike those reports that called for more deregulation and competition, the Commission has not advocated complete deregulation of the sector but a ‘hybrid approach’ to regulation, whereby the number of places is no longer limited to the number of places funded by the Commonwealth. This would enable aged care providers to offer additional services based on perceived need. The Commission also advocates better integration of Commonwealth aged care programs so that older Australians can remain in the community longer.”

ACSA has welcomed the increased flexibility, choice and freedom for aged care providers to meet people’s needs’ in the Interim Report, but warned that while opening up key questions was a good start, ‘let’s make sure that the devil is not in the detail.’ It is working with other stakeholders on how to stage the reforms proposed by the NHHRC, and how they might be ‘fine-tuned.’
<http://www.aph.gov.au/library/pubs/rp/2008-09/09rp24.pdf>

Stewart Brown Business Solutions (SBBS) Benchmarking Report

Improvements in the net operating results for high care facilities dropped off towards the end of last year according to the Stewart Brown Business Solutions (SBBS) benchmarking report for the December quarter 2008.

The group's surveys showed slight increases in returns for high care facilities in June and September but the latest report shows returns have declined again.

The average operating results for high care facilities were down \$1.13 per bed day on September figures. Low care has not really deteriorated any further but it is still averaging a loss. Almost two thirds of the 96 participating high care facilities failed to record an overall profit and fewer than half of the 176 low care facilities were in the black.

The poor returns come despite improved average earnings in both high and low care. Among the high care facilities this was due to a sharp rise in operating costs, particularly in the areas of catering and administration.

The last three SBBS survey reports suggest that the new Aged Care Funding Instrument (ACFI) is partly responsible for the increased administrative burden on residential providers. "Rising care costs have played a greater role in offsetting the income gains in low care."

45 and Up Study of Healthy Ageing

UnitingCare Ageing has announced its role as partner in the 45 and Up Study – the most comprehensive healthy ageing study of its kind undertaken in the Southern Hemisphere. The study, established and managed by the Sax Institute in NSW, involves monitoring 250,000 participants aged 45 and over across NSW the next several decades. Data tracked includes physical activity, stress levels, medical history, social support and employment status.

UnitingCare is only aged care provider included in the study, with other study partners including Beyondblue, the NSW Cancer Council and the National Heart Foundation.

Recruitment for the 45 and Up Study was completed in January 2009 and involves 10% of NSW residents aged 45 and over who were randomly selected. For more information on the study visit: www.45andup.org.au.

Moves to Cut Red Tape

Rudd Government has committed to slashing red tape in the non-profit sector, making the announcement at the COAG Business Regulation and Competition Working Group (BRCWG) meeting held in Melbourne on 13 March. It was chaired by Finance and Deregulation Minister Lindsay Tanner and Small Business Minister Dr Craig Emerson.

The BRCWG agreed to start work immediately on how to implement a standard Chart of Accounts, and a nationally consistent approach to fundraising.

A recent Senate Inquiry found that overlapping and inconsistent regulation of the sector created an unnecessary compliance burden as well as hindering efforts to increase its transparency and accountability.

The sector is subject to 178 state and federal statutes and reports to 19 government entities and 74 other agencies.

Workers' Compensation Report

The health and community services sector had the second highest number of serious workers' compensation claims in 2006-07, with only the manufacturing sector having more claims, according to the Annual Compendium of Workers' Compensation Statistics.

Over 16,000 serious claims were received from people working in health and community services, which equates to 15.2 serious claims per 1,000 workers in the sector according to the Australian Safety and Compensation Council. The national average is 14 claims per 1,000 workers.

There were five compensated fatalities in the sector during this period, but overall there were 445 fewer serious claims from health and community service workers in 2006-07 than in 2005-06.

The frequency rate had also fallen from 16.2 serious claims per 1,000 workers in 2005-06 – and 18.9 serious claims per 1,000 workers in 2000-01

Arthritis Awareness Week, 29 March - 4 April 2009

Arthritis Awareness Week is an initiative of Arthritis Australia. It is a week of promotional and educational activities, held around the country, to raise awareness about arthritis, its effects, and the various treatment and management options available.

Arthritis Australia hopes that these activities will make all Australians aware that arthritis is not a natural part of ageing but a disease that affects many people of working age and also children. Arthritis includes more than 100 different diseases such as osteoarthritis, rheumatoid arthritis, gout, ankylosing spondylitis, Reiter's syndrome and systemic lupus erythematosus (SLE or lupus), that affect the musculoskeletal system.

Pain, stiffness, inflammation, and damage to the cartilage, bones and other structures within the joints are all common manifestations of arthritis. Although it cannot be cured, the symptoms and impacts of arthritis can be reduced through early diagnosis and appropriate treatment and management.

Person-Centred Care and Dementia-Care Mapping Evaluation

Both person-centred care and dementia-care mapping reduce agitation in people with dementia in residential care. In addition, person-centred approaches can be taught quickly and should be introduced as standard practice in residential care homes, according to a study released early online and appearing in the April issue of *The Lancet Neurology*.

Two individually tailored behavioural interventions already used widely in clinical practice, person-centred care and dementia-care mapping, have been shown to improve outcomes for people with dementia, but the evidence is mainly descriptive and observational.

To provide further evidence, Lynn Chenoweth, University of Technology Sydney, Sydney, Australia, and colleagues conducted the Caring for Aged Dementia Care Resident Study

(CADRES) to examine the effectiveness of these interventions and whether they could improve quality of life, decrease need-driven dementia-compromised behaviours, or reduce the use of psychotropic drugs and rates of accidents and injuries.

Findings showed that both interventions reduced agitation compared with usual care at the end of the 4-month treatment, and these benefits were continued beyond the intervention period, with a further decrease recorded at 4-month follow-up.

However, no other improvement in quality of life or significant reduction in neuropsychotic symptoms such as depression or hallucinations was recorded in either group. The authors also noted that neither intervention was associated with a lower intake of psychotropic drugs, although dementia-care mapping was associated with fewer falls.

In addition, the cost of person-centred care was considerably lower than for dementia-care mapping. Dementia-care mapping also required expert training and is labour intensive, which makes it impractical for most residential care homes, said the authors.

"Consideration should be given to the introduction of person-centred approaches as standard practice in residential facilities ... not just to reduce distress in residents, but to enable staff to identify and meet residents' unmet psychosocial needs," they said.

Diversity Our Strength: A Toolkit for creating culturally competent care for Lesbian, Gay, Bisexual and Transgender (LGBT) Persons

Studies conducted by the Toronto Long-Term Care Homes and Services in Canada have shown that many LGBT seniors did not consistently feel safe in disclosing their sexual identity or orientation to mainstream healthcare providers due to a fear of discrimination. This reality is seen to affect their sense of personal well-being.

The Toronto Long-Term Care Homes and Services set out to reduce this barrier within the long-term care profession by working with the community - including directly with LGBT individuals and agencies - to more fully understand community needs and to create a care and service culture and model in which all residents' histories and traditions are honoured and preserved.

The primary outcome of these efforts was the creation of an innovative toolkit which includes resources, activities and training programmes to help care providers deliver respectful and inclusive services. Click here to access the toolkit.

http://rs6.net/tn.jsp?et=1102483_962534&e=001GAw70gXvcshYjadJhYcvqqsvU7S-yhVjMeD-63dSvyeIqdw5jCBRu2gUL2ccUelq31QLWGGx72VhPCRuckU46bdHP-KOmYW4Z6a9MyKR1vFw5PIO2ll8Zh872UP4JBb3KH6C9gHrMAXI72LpkYmiy-AHXDelxVp>

Community Services and Health Environmental Scan 2009.

2009 is a Pivotal Year for Community Services and Health, the Industries Skills Council (CS&H ISC) Head Di Lawson says in this report which looks at the changes in the policy and economic environments as well as social and demographic factors,

The Environmental Scan 2009 outlines how these and other activities undertaken by CS&H ISC are helping to address the enormous workforce challenges ahead. The key messages in the Scan are:

- As counter-cyclical industries, there is heightened pressure for workforce growth in already expanding sectors through increased demand and capacity building;
- New service models and a reconfiguration of workforce composition are needed;
- Health - in response to the reduced supply and increasingly stretched traditional professions and the focus on primary and preventative care, a larger and more qualified assistant workforce and improved utilisation of skills throughout the workforce is needed.
- Community Services - to deal with more and more complex clients, there is a continued need to grow the workforce, reduce the proportion of workers with no qualifications and increase the proportion with higher competencies.

The Environmental Scan 2009 will be released in late March 2009. Further information at: https://www.cshisc.com.au/index2.php?option=com_content&do_pdf=1&id=243

Dementia Training for Ambulance Workers Project

The CSHISC recently undertook piloting exercises of an e-learning program for Paramedics and Patient Transport Officers to up-skill Ambulance staff in managing crisis situations in the community that may involve people living with dementia.

Funded by DoHA, the pilot exercise tested content, learning and visual design concepts across three sites in Victoria, the ACT and Tasmania.

Personalisation in Social Care: Progress in the UK

This report, released by the UK charity, *Help The Aged*, finds that personal care budgets are not a solution for all older people, although they will be crucial to government proposals for any new system giving more control to people.

Help The Aged argues that other European countries have sought to tackle the problems caused by an ageing population and found more financial investment was key.

<http://www.healthcarerepublic.com/news/PracticeStaff/LatestNews/887155/Personal-care-budgets-not-solution-all/>

Heart Failure Information for Patients and Carers

Information sheets for patients and carers now available in 16 languages other than English. Our information sheet for people with heart failure and their carers:

- includes information on how to minimise the symptoms of heart failure and stay healthy
- has an 'action plan', listing the important things to do every day and when to call a health professional or an ambulance.

It is based on the Heart Foundation booklet "Living well with chronic heart failure".

http://www.heartfoundation.org.au/PROFESSIONAL_INFORMATION/CLINICAL_PRACTICE/CHF/Pages/default.aspx

Information Technology in Aged Care Conference: 21 and 22 May 2009, Sydney.

The theme of the 3rd annual conference, *Sustaining Quality Through eCare*, emphasises the importance of information technology in establishing a sustainable, quality focused aged care environment.

The conference will bring together local and international experts across the fields of community care, medication management, assistive technologies and offsite information systems delivery. These critical aged care topics will be discussed from a practical perspective, highlighting the information we need to know now to better manage and design aged care service delivery.

Conference themes

- Total Cost of Ownership
- Medication Management
- Document Management
- Open Source Computing
- Designing Community Care Systems
- Community Health Records
- Assistive Technologies

Provisional program now available at www.itac09.com.au/program.htm

REGISTER NOW! Early Bird expires 3 April 2009

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