

# *The National Report*

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**Aged & Community Services Australia**

**HAPPY NEW YEAR TO ALL OUR NATIONAL REPORT READERS!**

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## **Community Care Conference: Sydney 14-16 May 2008**

*Community Care Magic and Myths: the reality and the potential*

Fall under the spell of the second ever National Community Care Conference at the Sydney Convention and Exhibition Centre on Sydney's magical harbour.

The conference will look at three key community care elements - innovation, workforce and image. Our key international speaker is David Challis, Professor of Community Care Research and Director of the Personal Social Services Research Unit at the University of Manchester, UK. He has advised on services for older people to the Australian, Japanese, English, Hong Kong, US and Canadian state and provincial governments.

Professor Challis will talk about Different Models and Approaches to Assessment: Lessons for Policy and Practice.

Providing an equally thought-provoking perspective and viewpoint from Australia is Dr Norman Swan. Well known for his ABC Radio National Health Report program, other radio and television programs and live presentations, Dr Swan will explore the concept of self efficacy and its impact on successful ageing in the community.

Finally Ita Buttrose, media personality and publisher and twice voted Australia's Most Admired Woman, will challenge delegates with her view of how the industry is perceived and how this image can be improved.

Lots more - plus full program, sessional and social details - will be revealed with the waving of a magic wand and production of the registration brochure. This will happen soon, but in the meantime start planning on who will attend this unmissable conference in Sydney in sunny May.

Details as they come to hand will be reported here and placed immediately on the ACSA website: [www.agedcare.org.au](http://www.agedcare.org.au)

*There will be special pre-conference workshops and tours on Tuesday 13 May, so factor these into your travel and accommodation planning.*

### **ACSA National Conference Call for Papers**

The 2008 ACSA National Conference *Aged Care in the Fast Lane: More Costs, More Clients, More Competition* is being held in Adelaide, 28 Sept - 1 Oct 2008 at the world acclaimed Adelaide Convention Centre.

The organising committee is inviting providers of aged care services, Government Departments and corporate product developers to submit an abstract for presentation at the conference through this *Call for Papers*.

The conference will include concurrent sessions on Monday 29 September and Tuesday 30 September. These sessions will be linked to the main Conference Themes

- Working in the Fast Lane (Workforce)
- More Cost More Competition (Economics)
- Living in the Fast Lane (Environment)

It is planned that each theme will have three dedicated concurrent sessions each with a specific focus on

- Strategic Planning and Leadership
- Research/Policy
- Quality Practice

The *Call for Papers* is designed to allow you to present organisational case studies, individual research, best practice projects and practices to your peers and colleagues.

As a guide, the organising committee is seeking presentations that address a particular concept (see full *Call for Papers* brochure), but submissions are invited on other subjects that are relevant to the conference themes. Don't be afraid to talk about something that may not have worked - we can all learn from it.

All submissions must be received by Friday 1st February 2008. Submission details are available in the *Call for Papers* brochure which can be downloaded from [http://www.agedcommunity.asn.au/about\\_acs/documents/ACSA08CallforPapers.pdf](http://www.agedcommunity.asn.au/about_acs/documents/ACSA08CallforPapers.pdf)

## **Council of Australian Governments (COAG) Meeting**

COAG met on 20 December following the appointment of the new Federal Government and Ministry and identified health and ageing as one of seven issues for its 2008 work agenda.

The indicative forward work plan includes a number of health items, which are linked with aged care and specifically highlights “key reform directions in relation to ageing, including the need for greater levels of community-based care, opportunities for more seamless delivery, delivery of aged care places and the intersection between aged care funding, HACC and disability funding.”

An implementation plan for transition care is to be delivered to the March 2008 COAG meeting.

*The full communiqué is available at:*

<http://www.coag.gov.au/>

## **New Aged Care Approval Round**

A total of 6,525 new residential aged care bed allocations worth \$233.3 million a year in recurrent funding were announced by the new Minister for Ageing, Justine Elliot just before Christmas. She also announced capital grants of \$40.5 million to assist aged care providers build or improve residential aged care services.

Of the 6,525 places allocated, 4,415 are high care and 2,110 are low care.

“While 6,525 new places is good news, more beds are needed,” Mrs Elliot said when making the announcement. “The outcomes of the 2007 Aged Care Approvals Round show that not enough providers are applying to set up aged care services in some of the undersupplied areas of Australia. The Government has committed to fill these gaps.

She promised that she would be making further announcements ‘soon’ about the \$300 million in zero real interest rate loans promised in the election campaign to providers who are willing to establish aged care services in undersupplied areas.

To complement the new loans scheme, the Government plans to reform the existing aged care planning and allocation arrangements to ensure the time between the allocation of new places and when they become operational is reduced to a minimum.

“In particular, the annual allocation process will be made more efficient and the planning ratio, which is used to determine how many places are made available each year, will be reviewed,” the Minister said.

## 2007 ACAR - Summary of Residential Aged Care Places Allocations

State/Territory	Residential places	Total annual recurrent funds (\$m)	Capital Grants (\$m)
New South Wales	2,091	\$74.75	\$10.11
Victoria	1,490	\$59.00	\$9.54
Queensland	1,622	\$53.41	\$3.97
Western Australia	644	\$21.68	\$7.69
South Australia	375	\$13.96	\$0.25
Tasmania	63	\$1.89	\$2.57
Australian Capital Territory	175	\$6.59	-
Northern Territory	65	\$2.01	\$6.33
<b>TOTALS</b>	<b>6,525</b>	<b>\$233.29m</b>	<b>\$40.47m</b>

*Further details of the allocations can be found on the Department of Health and Ageing web site at [www.health.gov.au/acar2007](http://www.health.gov.au/acar2007).*

### **More HACC Funding Announced**

Additional HACC funding in NSW, Victoria, WA, Tasmania and the NT has been announced by Minister Elliot and her State and Territory colleagues.

NSW receives an extra \$34.5 Million, \$27.4 Million in Victoria, \$13 Million in WA, \$3.8 Million in Tasmania, and \$800,000 in the Northern Territory

### **Community Care Census Update**

The Department of Health and Ageing has emailed service outlets who are participating in the upcoming Community Care Census for 2007/08.

The census covers services provided to recipients of community aged care packages and NRCP - funded respite services, and aims to develop and implement an ongoing data collection for these services.

The Census content and process were trialled by over 60 outlets in all Australian states and territories during November 2007. It showed that participants welcomed the use of electronic census forms as easier and faster than the paper alternative used in the 2002 census. Data entry and submission processes were much faster and more efficient when staff had assembled all relevant client data before starting the data entry.

However the trial also indicated that the initial log-on process was too complex and deterred some users from logging on. As a consequence a new easy to use process has been created.

### Key Census Dates

- *Mid January* – A 'snapshot' of the electronic census forms will be emailed out together with other guidance for using the forms (e.g. the logon process and how to get additional passwords)
- *1 February* - Logon and password instructions will be emailed to enable completion and return of form
- *8 February* - Final date for return of completed outlet form
- *18 Feb - 20 March* - The "census period" (The dates have been selected in order to avoid the Easter public holidays). Participants will be asked to select seven typical consecutive days (the "census week") during this period as their reporting period for the purpose of gathering information on services provided to care recipients and carers during the census week.
- *4 April* - Final date for transmission of all completed care recipient/carer forms (this allows a minimum of nine working days to finish the entry of data on care recipients.)

*Further details about the trial and the census will be available shortly in Fact Sheet Two on the Department's website.*

### **Not-for-Profit Internet Resource**

Philanthropy Australia, with funding from the Macquarie Group Foundation, recently launched a Philanthropy Wiki to build a greater understanding of the not-for-profit sector and help community organisations operate more effectively. The Wiki is an online encyclopaedia that provides a first port of call for information on philanthropy, donors and grant-making.

*To view this resource go to: [www.philanthropywiki.org.au](http://www.philanthropywiki.org.au)*

### **Not-for-Profit Entity Definition**

The Australian Accounting Standards Board (AASB) has invited comments on its Proposed Definition and Guidance for Not-for-Profit Entities by 31 March, 2008. The AASB has used a principles-based approach to defining 'not-for-profit' entity as follows:

*An entity whose principal objective is not the generation of profit. A not-for-profit entity can be a single entity or group of entities comprising the parent entity and each of the entities it controls.*

The AASB is aware that clarification and/or guidance on this definition is needed as many auditors are placing different emphases on one factor over another and may arrive at inconsistent conclusions about the status of similar entities.

*More information at [www.aasb.com.au](http://www.aasb.com.au).*

### **COTA Over 50s Interactive Website**

[yourspace.cotaover50s.org.au](http://yourspace.cotaover50s.org.au) is part of the innovative electronic infrastructure of COTA Over 50s. It is an ongoing project developed with a view to improving communication of COTA Over 50s with older Australians, their families and friends.

The main features of the website include:

- Australia's Families: A video and photo Gallery (Family Vignettes)
- Music, educational and other youtube videos, free online educational games to play with children

[Click here to go to website.](#)

## **Victorian Workcover Authority Prosecution**

A recent Victorian court case drew attention to personal safety issues of psychiatric home care nurses attacked by a patient. This highlights the need for employers in the aged and community care industry with workers that visit patients or clients in their own home, to ensure that an OH&S risk management plan has been developed. The plan should include training and education, risk assessment and controls to address occupational violence for such workers.

## **Privacy Issues and Information about Relatives Sought from Patients**

The Australian Privacy Commissioner, Karen Curtis, has made two [Public Interest Determinations](#) to continue to allow health service providers to collect health information from patients about their family medical history without seeking the family members' consent.

The information can only be collected where relevant to the patient's condition or family, social or medical history.

"Important factors in my decision to make these Determinations were that this is a widely accepted practice, and that optimal patient care may not be possible if health service providers are required to seek third parties' consent before collecting relevant information," Ms Curtis said.

## **Walking and Moderate Exercise Help Prevent Dementia**

Seniors who regularly walk and get other forms of moderate exercise appear to significantly lower their risk of developing vascular dementia, the second most common form of dementia after Alzheimer's disease, according to a study published in the online issue of the medical journal *Neurology*.

The four-year study involved 749 men and women in Italy who were over age 65 and did not have memory problems at the beginning of the study.

Researchers measured the amount of energy exerted in the participants' weekly physical activities, including walking, climbing stairs, and moderate activities, such as house and yard work, gardening, and light carpentry. By the end of the study, 54 people developed Alzheimer's disease and 27 developed vascular dementia.

The study found the top one-third of participants who exerted the most energy walking were 27 percent less likely to develop vascular dementia than those people in the bottom one-third of the group. Participants who scored in the top one-third for the most energy exerted in moderate activities lowered their risk of vascular dementia by 29% and people who scored in the top one-third for total physical activity lowered their risk by 24% compared to those in the bottom one-third.

## **Software Prevents Patient Medication Overdose**

The Peter MacCallum Cancer Centre in Melbourne has implemented a new software system that will prevent dosage errors in patient medication.

The centrally managed intravenous (IV) drug administration software, Hospira MedNetT, runs over the centre's Nortel wireless network at the cancer research and treatment facility, which caters to 100 in-patients and 25 day ward patients.

Hospira MedNetT monitors the rate of administration of life-saving but potentially harmful medication. The technology uses a centrally updated database of IV medication - medication administered directly into the vein - to remotely update 150 infusion pumps around the hospital with the latest safety parameters on a per-drug basis. Using the software, errors in prescribing or programming the correct administration rate for any given drug into the pump are immediately flagged and averted.

The ability to wirelessly update the pumps with the latest Hospira MedNetT information should save the centre hundreds of hours of maintenance time. It also allowed the pumps to remain in service while being updated. The technology also allows real-time data from each IV pump to be captured.

### **Australian Health Workforce Institute**

A new Research Institute at the University of Melbourne and the University of Queensland will tackle Australia's health workforce crisis.

The Australian Health Workforce Institute will promote health workforce research and work closely with Commonwealth and State jurisdictions to ensure a sustainable health workforce by 2020.

The Institute website will include a database of health workforce expertise and a forum featuring cutting-edge articles on health workforce issues.

### **Nutritional Supplementation**

A study by Deakin University in 2005 found that 40 percent of elderly nursing home residents surveyed failed to get enough protein, 60 percent failed to get sufficient energy and 80 percent did not receive sufficient dietary calcium.

To help combat this problem and to provide nursing homes and hospitals with options for effective supplementation, Prime Nutrition has compiled a recipe booklet with meal options covering breakfast, lunch, dinner, dessert and snacks. These recipes are accompanied by detailed nutrition profiles, allowing dietetic and foodservice staff to plan effective supplementation options.

The booklet is available free of charge to nursing homes. Contact Prime Nutrition on Freecall 1800 257 650

### **New Zealand Workers Win Right to Change Working Hours for Care Needs**

More than two million New Zealanders have won new rights to request changes to their working hours as long as they are using the time to take care of someone close to them.

A private member's bill introduced by Green MP Sue Kedgley originally covered just those caring for children under five or disabled children up to 18, but due to last minute negotiations now includes anyone caring for children, teenagers and elderly parents.

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