

# *The National Report*

**31 July, 2008 – Issue 185**  
**Aged & Community Services Australia**



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## 2008 ACSA National Conference



“Aged Care in the Fast Lane”: Update

On-line registration is now available at [www.agedcare.org.au](http://www.agedcare.org.au)

**HURRY! ‘Early Bird’ and ‘4 Delegates or More’ registration closes 15 August 2008.**

**Early Bird registration = \$880 (save \$165).**

**‘4 or more delegates’ registration = \$750 (save \$295 per person).** This discounted group registration for 4 or more delegates applies to the following:

- delegates from a single organisation (larger metropolitan provider);
- country local/regional 'groupings' (providers from specific regional locations or country towns etc.);
- metropolitan 'groupings' of smaller providers.

Save time and **register online** by clicking on the link below:

<https://www.amlink.com.au/secure/ei/getdemo.ei?id=2105&s= UKK0T1AYU>

For information about the **Conference Program**, please click on the link below:

<http://www.alloccasionsgroup.com/acsa-2008-conference-registration-accommodation-and-travel>

## Government Moving on Policies Affecting Charitable Sector

There has been media coverage in the last two weeks of a couple of Government processes which may affect charities – such as ACSA’s members.

- **Reporting and Disclosure**

The Senate Economics Committee is conducting an enquiry into the disclosure regimes of charities and not-for-profit organisations. It has broad terms of reference but will include a focus on fundraising and accountability for the use of such funds - and other reporting requirements.

Because of their size and incorporation status, charitable aged care organisations generally are already required to have a high standard of reporting but ACSA will be making a submission to the inquiry by the due date of the end of August. Individual charitable organisations may also like to read the Inquiry’s Background Paper and consider making a submission. Go to [www.aph.gov.au/senate](http://www.aph.gov.au/senate) and follow the links to ‘Current Inquiries’

- **Tax**

The second process is the Government’s Taxation review. While terms of reference for this have yet to be announced, the Treasurer has indicated that the taxation concessions applying to charities will be in scope for the review. This was indicated in his comments in June on the Government’s decision to reverse a Howard Government move to reduce the value of FBT concessions for lower paid workers.

The previous Government allowed inflation to reduce the value of some of the tax concessions granted to charities and this issue will also be part of the taxation review. Media coverage has also

focussed on the business activities conducted by some charities. This is far from being a new issue having been covered in the previous Government's Charities Definition Inquiry.

- **Compact**

The third process is the Government's commitment to investigate a 'compact' with the not-for-profit sector. The Australian Council of Social Services (ACOSS) has been conducting consultation sessions in the eastern states sounding out sector views on the potential value of such a compact, - and what it might contain.

Senator Ursula Stephens, Parliamentary Secretary for Social Inclusion and the Voluntary Sector, addressed the Melbourne workshop last week and advised attendees that she had already written to all Ministers directing them to remove any 'gag' clauses in funding agreements with not-for-profit organisations. She also thanked the sector for raising the issue of FBT concessions for lower paid charitable workers, which enabled the Government to address this issue. Senator Stephens was very positive about the Government's disposition towards the not-for-profit sector.

ACSA is participating in these processes and monitoring their directions to ensure that tangible benefits are obtained by our members. As always, progress will be reported in these pages.

## **CAP Review**

ACSA is planning its submission to this review. While no formal announcement of a due date for submissions has been made, we are working to a mid-August target. An information resource outlining key messages is available at [www.agedcare.org.au](http://www.agedcare.org.au)

## **We are ACSA**

Aged and Community Services Australia (ACSA), the national peak industry body for not-for-profit aged and community care providers, would like to advise that it has no connection with the Aged Care Services Australia Group, a privately-owned aged care provider also headquartered in Melbourne.

"We adopted the name Aged and Community Services Australia and the acronym ACSA in 1999" ACSA CEO Greg Mundy has said.

"Unfortunately it's not uncommon for people to guess what our acronym stands for, and 'Aged Care Services Australia' is one of the most common wrong answers, even from government officials. The similarity of the names is unfortunate and could be confusing but we have been using ours for 9 years and do not intend to change our 'brand'. The Aged Care Services Australia Group is not currently a member of an industry association to the best of my knowledge."

If people are in any doubt about which organisation they are hearing about or dealing with I suggest that they visit our web site: [agedcare.org.au](http://agedcare.org.au)"

## **Study Reveals Benefit of Community Care Programs**

A new study has found that home-based community care packages for older Australians improved their quality of life, kept them healthier and reduced the need to go into a nursing home.

*The Predictors Influencing the Change in Health Status of Elderly in Community Care* — or *PITCH* — study looked at the impact of community care programs on carers and care recipients. Previewed

in a paper presented at ACSA's 2008 Community Care Conference in May, it was launched by Minister for Ageing Justine Elliot in Melbourne last week.

Overall, the study, initiated by Bapcare and conducted by Monash University's Department of Epidemiology and Preventive Medicine, found that amongst community care package recipients, there was:

No deterioration in physical and mental health;

An increase in cognitive function, social networks were sustained; and

A reduction in carer strain for the study's rural participants as a result of receiving community care.

The study was conducted over a one-year period from mid-2006 and involved 550 randomly selected clients in Victoria. The study took into account a range of factors, including death, movement to a nursing home and new on-set dementia.

## **ACSA Receives Funding for Affordable Housing**

ACSA has been funded to undertake a Partnership Facilitation role with the Federal Government's new National Rental Affordability Scheme (NRAS). The ACSA facilitation role is to assist aged care organisations to develop affordable housing for older people supported by the NRAS scheme. The Rudd Government has allocated \$623 million over the next four years to NRAS with the states committing to providing over \$200 million in cash or in kind.

Roland Naufal has been contracted to work alongside ACSA staff member Lesley Dredge to undertake the 12 week NRAS facilitation role that commenced in late July. Roland is a former CEO of Villa Maria and since late 2007 has been working with the Brotherhood of St Laurence on affordable housing for older people.

NRAS is an exciting opportunity for aged care organisations to diversify their service models, funding streams and property portfolios. The Australian Government's incentive for the scheme will be \$6,000 per dwelling per year for 10 years. State and Territory Governments have also committed to providing at least \$2,000 per dwelling per year.

The timelines for NRAS application are very short. Round 1 was issued in July 2008, Round 2 will be issued in October 2008 and Round 3 is expected in March 2009. For further detail go to [www.fahcsia.gov.au](http://www.fahcsia.gov.au) then click through to the *Housing* and then *NRAS* pages.

This is a unique opportunity early in the life of a new government to participate in one of the most significant new funding initiatives in decades. The ACSA Partnership Facilitation project will be travelling to all states to provide further information and generate proposals for the scheme.

Please register your interest with Lesley Dredge at the ACSA office if you would like to meet with Roland or Lesley when they visit your state.

## **First Transitional Care Places Now Operational**

The first 35 places under the Government's Transition Care Plan for 228 places are now operational, in Victoria, South Australia and the ACT, and a further 22 places in Melbourne and Perth should start in August.

The recipients are listed in the Minister's Media Release, available on her website. While most of the places seem to have gone to State Government providers some have been allocated to the non-Government sector, including ACSA members.

ACSA will continue to press the case for NGO involvement in this area, citing the advantages of greater flexibility and efficiency.

## **Improving Aged and Community Care for Indigenous Australians**

The Federal Government is calling for tenders to develop new workforce training resources to help improve home and community care for frail and older indigenous Australians

It will focus on the training needs of the Aboriginal and Torres Strait Islander Home and Community Care (HACC) workforce in urban, rural and remote locations

The program aims to train people to help older indigenous Australians remain independent in their own homes rather than entering nursing homes. It will provide up to \$400,000 to improve training and resources for indigenous home and community care workers who care specifically for indigenous people.

While initially focussed on the NT, it is anticipated that the project will have national application for the some 1,400 people in the Aboriginal and Torres Strait Islander HACC workforce.

The Australian Government is seeking tenders from organisations or consortia with relevant expertise to run the project.

## **Aged Care in the Media**

Aged care unfortunately remains in the public spotlight with recent Departmental action involving the Kirralee facility in Victoria, and possibly another 30 facilities owned by the Aged Care Services Australia Group, a privately-owned aged care provider. Many interested parties have used the events to press for changes, including the Australian Nursing Federation (ANF), which has claimed that "Australia's elderly... (are)... at risk without qualified nurses in aged care. It is "again calling on the federal government to urgently make a commitment to solving the care crisis for Australia's elderly by ensuring minimum staffing levels, closing the wages gap for nurses, and ensuring the licensing of all aged care workers."

ACSA CEO Greg Mundy, on the ABC's PM program noted the need for new generation approaches to safety and quality and the need for adequate resourcing to underpin quality care.

There has also been some sensible, considered debate on other issues in aged care. Following several cases of gastro-enteritis in aged care facilities, the ABC's Life Matters program on Radio National, held an informative discussion on infection control issues on Monday 28 July, with ACQ's Pam Bridges and a facility which had managed an influenza outbreak which resulted in 10 deaths.

You can listen or download these broadcasts from

<http://www.abc.net.au/pm/content/2008/s2318141.htm>

<http://www.abc.net.au/rn/lifematters/stories/2008/2312398.htm>

## **New CEO for Aged Care Queensland**

Anton Kardash has been appointed the new CEO of ACQ. He has had more than 20 years experience in the practice, administration, management and leadership of organisations in both the community and private sector, and has a reputation for the timely development and implementation of successful organisational change in the health, employment and community service sectors.

Anton commenced in the role of CEO on 21 July.

## **Census of Community Care Aged Programs 2007-2008 Update**

The Department has advised that from February to May 2008, over 1600 service outlets submitted data for the Community Aged Care Census 2008. The overall response rate for packaged care has exceeded 98% of packaged care recipients, providing a data set of more than 49,000 records on care clients, including over 8,600 on respite care recipients.

The experience of service providers when entering census data was monitored closely during the collection period. Due to initial difficulties experienced with server capacity and reliability, an extra four weeks were added to the submission deadline. Subsequent feedback indicated improved system response and data entry.

Service providers also indicated they found the electronic web-based forms easy to use and understand. The majority of service providers also advised that electronic collection is the preferred mode. Over one third of participants have accessed summary tables of their data and all outlets will shortly be able to view a complete set of their submissions. However service providers remain critical of the survey process and ACSA will be making strong representations to ensure any future processes do not suffer from the same problems.

Over the next few months preliminary results will be made available progressively for discussion with peak bodies and will be released publicly shortly afterwards.

Early results indicate that the –

- proportion of CACP recipients with carers is comparable to levels indicated in 2002 (in the range 50% – 60%) and this increases to about 80% for EACH recipients and even higher for EACHD recipients;
- about 15% of CACP recipients, 20 % of EACH and 90% of EACHD care recipients have diagnosed dementia. This compares with 20% for CACP and 30% for EACH reported in the 2002 Censuses; and
- most CACP recipients have four activity limitations – most of those with carers have 5 limitations, whilst most of those without carers have three.

The industry has shown a strong interest in using information from the census in a variety of ways, including program management and forward planning. In addition to these themes, the Department is interested in using the census data in the policy formulation and review context. With this in mind the Department will carefully review the potential usefulness of each census item for possible inclusion in an ongoing data collection. Such a review will also take into account other possible sources for the information.

More information about the Census can be found on the Department of Health and Ageing website: [www.health.gov.au/internet/main/publishing.nsf/Content/ageing-communitycare-census-2007.htm](http://www.health.gov.au/internet/main/publishing.nsf/Content/ageing-communitycare-census-2007.htm). Alternatively, questions may be directed by email to [cc.census2008@health.gov.au](mailto:cc.census2008@health.gov.au).

## **Quality Reporting Program**

The Department has advised that the second cycle of the Quality Reporting Program commenced in the beginning of July 2008. Initially, the second cycle of quality reporting will be similar to the previous cycle, and will consist of a four step process. However, the Quality Reporting Program will also report on police check requirements for staff and volunteers who work in community aged care services. The second cycle of quality reporting will also capture relevant information on previous improvement plans. This work will result in some changes during the second cycle of quality reporting. For more information on the second cycle of the Quality Reporting process, please contact the Quality Reporting team on (02) 6289 7187.

## **National Community Services Data Dictionary Version**

The National Community Services Data Dictionary (the NCSDD) is a national resource which community services authorities use to ensure the consistency and comparability of all data collected under the scope of the National Community Services Information Agreement (NCSIA).

The data dictionary contains definitions and value domains that are endorsed as national standards for use by those collecting community services data in Australia. Version 5 can be downloaded [www.meteor.aihw.gov.au](http://www.meteor.aihw.gov.au).

## **National Disability Reform Agenda**

State, Territory and Commonwealth Disability Ministers have agreed to develop a national workforce plan as part of a National Disability Reform Agenda.

The national workforce plan will include the identification of national workforce requirements in 10 and 20 years; national career pathways for the disability sector and strategies for retention and skills growth. Although Ministers have listed workforce capacity as a priority since mid-2007 no national plan is yet under development.

The National Reform Agenda will include: service benchmarks; disability services' quality standards; service planning; building people-centred service delivery; early intervention and prevention; workforce capacity; national consistency; and ageing carers. These areas of reform affirm priorities from previous ministerial meetings, but the commitment from yesterday's meeting does appear to indicate a renewal of momentum.

Ministers agreed to provide \$6.5 million to enhance the ABS Survey of Disability, Ageing and Carers, the principal source of population-based disability data and an important basis for estimating demand for eg HACC services. The additional money will allow a doubling of the sample size, which will assist the development of benchmarks and planning.

The National Disability Reform Agenda will sit under the National Disability Strategy, consultations for which will begin in the next couple of months.

## Other Disability News

- **Changes to Work Requirements for Disability Support Pensioners**

The Rudd Government has announced that from September 2008, DSP recipients who wish to find employment will undertake a simpler assessment process or a 'pre-employment referral' which will only collect information to determine the most appropriate employment services for the individual.

Currently, DSP recipients who want to look for work automatically have their benefit reviewed which can result in a reduction of their payments.

There are currently more than 700,000 DSP recipients who are not required to undertake any activity. The potential loss of benefits was one of the single biggest disincentives for DSP recipients who of their own accord want to find work.

The simpler 'pre-employment referral' Job Capacity Assessment would only collect information required for the job seeker to determine the most appropriate service. It will allow the Job Capacity Assessor to identify which employment service providers are best suited to assist someone with disability back into the workforce without conducting a review of the person's DSP entitlement," Senator Ludwig said.

The announcement is part of a broader Government strategy to encourage more people with disability and/or mental illness to participate in employment. A National Mental Health and Disability Employment Strategy will be released before the end of the year.

- **Australia Ratifies UN Convention**

The Government has ratified the UN Convention on the Rights of Persons with Disabilities, making Australia one of the first Western countries to ratify the Convention. Australia joins 29 other countries around the world in a move that aims to promote a global community in which all people with a disability are equal and active citizens.

- **Disability Discrimination Act**

The Rudd Government will also amend the Disability Discrimination Act to clarify obligations of employers, service providers and others to remove discriminatory barriers for people with disabilities, in line with recommendations made in a Productivity Commission Report.

## Some Fuel Relief

From 1 July 2008, the number of eligible industries able to claim for fuel has been expanded to include other industries, including aged and community care. You can now claim fuel tax credits for the use of diesel and petrol used in items such as chainsaws, lawn mowers, pumps, tractors, whipper snippers etc.

How much you claim depends on how you use the fuel. For example, if you use a tractor, you can claim around \$19 for every 100 Litres of eligible fuel. This amount will double from 1 July 2012. To be eligible, you must be registered for GST and Fuel Tax Credits. Claims are made on your Business Activity Statement (BAS).

To find out more on Fuel Tax Credits visit [www.ato.gov.au/fuelschemes](http://www.ato.gov.au/fuelschemes) or seek professional advice from your accountant.

We want to keep this resource updated: please let us have any feedback, additions and/or alterations by emailing [communitynet@tricom.org.au](mailto:communitynet@tricom.org.au)

## **More DVA Funding**

An extra \$4.42 million has been provided to more than 220 ex-service organisations across Australia to directly support the needs of local veterans and their families. Ex-Service organisations' community organisations are encouraged to apply for funding to support projects for veterans by contacting the Department of Veterans' Affairs on phone 133 254 or 1800 555 254 or visit [www.dva.gov.au](http://www.dva.gov.au).

## **New Accommodation Bond Retention Amounts**

The Department has announced changes in Accommodation Bond retention amounts, from 1 July 2008.

The upper threshold to apply for bonds is \$35,040, with the maximum monthly retention being set at \$292.00. The lower threshold to apply for bonds is \$18,120 with maximum monthly retention at \$151.00

The maximum interest rate to apply for outstanding a bonds for the quarter 1 July 2008 to 30 September 2008 is 11.75%.

## **Options in Aged Care- Language Resource**

Available in 20 languages, this resource outlines all government-subsidised aged care services, with information on community care, respite care and residential care.

*Options in Aged Care* provides an overview of these services, explains how to access them, and where to go for more information. All services and telephone numbers referenced in the document are national, so this resource can be used Australia-wide.

Health and aged care service providers and community workers are encouraged to print this document and give it to their clients from culturally and linguistically diverse backgrounds to inform them about available aged care services.

Languages available are English | Arabic | Chinese (simplified) | Croatian | Dutch | German | Greek | Hungarian | Italian | Macedonian | Maltese | Polish | Portuguese (coming soon) | Russian | Serbian | Spanish | Tagalog | Turkish | Ukrainian (coming soon) | Vietnamese

<http://www.culturaldiversity.com.au/Resources/MultilingualResources/OptionsinAgedCare/tabid/237/Default.aspx>

## **Medicare Aged Care Online Claiming information booklet**

All providers will receive the new Aged Care Online Claiming information booklet in the mail by the end of August 2008. This booklet has been designed to help you understand Aged Care Online Claiming so you can choose the right online claiming channel to best suit the needs of your organisation.

The booklet explains how online claiming makes claiming easier and takes you through the steps to get started. Included with the booklet is a demonstration disk to help familiarise yourself with the Aged Care Online Claiming environment.

If you have any questions about the information booklet, or need any assistance, call the Aged Care Online Claiming helpdesk on **1800 195 206** and select option two.

## **Deeming and Gifting Provisions Information**

The links below provide information about deeming and gifting provisions, the terms used under the Social Security Act. Professional advice ought to be obtained about the effect and nature of provisions which may affect the extent of entitlements available to an individual.

[http://www.fahcsia.gov.au/guides\\_acts/ssg/ssguide-4/ssguide-4.1/ssguide-4.1.1.html#](http://www.fahcsia.gov.au/guides_acts/ssg/ssguide-4/ssguide-4.1/ssguide-4.1.1.html#);

[http://www.fahcsia.gov.au/guides\\_acts/ssg/ssg-rn.html](http://www.fahcsia.gov.au/guides_acts/ssg/ssg-rn.html);

<http://www.centrelink.gov.au/internet/internet.nsf/publications/fis012.htm>;

<http://www.centrelink.gov.au/internet/internet.nsf/publications/fis034.htm>.

## **Aged Care Excellence**

- **2008 SACS Award for Leadership in the Not-for-Profit Sector –Theresa (‘Teri’) Saunders, Finalist**

Theresa Saunders is the residential services manager of Corpus Christi, a Catholic Homes’ residential aged care facility in Clayton, Victoria, with more than twenty-five years of residential aged care industry experience both in the United Kingdom and Australia. Her extensive experience and skills as a manager blend with her natural insight, innate creativity and genuine enthusiasm to provide a truly unique leadership style.

Teri’s leadership has been recognised outside her facility with her becoming a finalist in the first annual SACS Consulting Award for Leadership in the Not-For-Profit Sector on 17 July 2008. There were 60 nominations from across Victorian and New South Wales. Organisations including aged care, youth, disability and children’s services, Foundations, and other health and care and service organisations, were submitted to an elite judging panel of Leadership Victoria Alumni. SACS Consulting Managing Director, Andrew Marty said that “The submissions highlight the excellence of leadership in the not-for-profit sector and how many unsung heroes the sector has.”

Teri’s “inspirational leadership” was acknowledged as one of the 5 finalists.

- **Another Gold Award for Warrigal Care**

Warrigal Care has won for the second year in a row a Gold award for their annual report at the 2008 Australasian Reporting Awards. The award celebrates excellence in annual reporting and public accountability and was presented at the awards ceremony at the Hilton Sydney in June.

To receive the Gold award, Warrigal Care had to demonstrate overall excellence in reporting, full disclosure of key aspects of its core business, as well as being compliant and a model for other peer reports.

“We have again received national recognition for our annual report that, not only complies with best practice business reporting standards, but is clear, concise and informative” commented Mark Sewell, Warrigal Care’s CEO.

The Australasian Reporting Awards have been running for 58 years, and were established to encourage effective communication of financial and business information.

This culminates another year of hard work and achievement for Warrigal Care, as it strives to maintain our commitment to continuous improvement and quality services to our community.

## **Australian Charter of Healthcare Rights**

Australian Health Ministers on 22 July have endorsed an Australian Charter of Healthcare Rights.

The Charter was developed after wide consultation by the Australian Commission on Safety and Quality in Health Care and specifies the key rights of patients and consumers when seeking or receiving healthcare services.

Mr Bill Beerworth, Chairman of the Commission, said the Charter summarises the basic rights that patients and consumers are entitled to receive when accessing health care services throughout Australia. These rights are Access, Safety, Respect, Communication, Participation, Privacy and Comment.

“The guidance of the late Dr Christopher Newell, the consumer member of the Commission, was pivotal to the development of the Charter. In view of his contribution to the Commission, and particularly to the Charter, the Commission is dedicating the Charter to his memory.”

The Charter applies to the whole healthcare system and allows patients, consumers, families, carers and services providers to have a common understanding of the rights of people receiving healthcare. It is applicable to all health settings anywhere in Australia, including public hospitals, private hospitals, general practice and other ambulatory care environments.

The Charter will become the reference point for all healthcare organisations, which will use the Charter as the basis for informing patients and consumers of their rights. The Commission will support inclusion of the Charter into accreditation systems and educational curricula to ensure it becomes an important part of the healthcare system in Australia.

The Ministers’ endorsement followed an extensive national consultation process to obtain the views of consumers, community groups, health service providers, clinical professional bodies, governments and other organisations and individuals about the Charter. Consumers have welcomed the endorsement of the *Australian Charter of Healthcare Rights* to which health consumer groups have contributed.

## **Reducing Harm to Patients from Healthcare Associated Infections**

The Australian Commission on Safety and Quality in Health Care has released the draft report *Reducing harm to patients through healthcare associated infection: the role of surveillance*.

Healthcare Associated Infections (HAI) acquired in the hospital setting are a major cause of death and increased morbidity for hospital patients worldwide. The report has been compiled by 51 experts in infectious diseases from across Australia, and provides up to date scientific and clinical

advice on how to reduce HAI by the use of the surveillance of processes of care and of infection rates of certain micro-organisms, in a variety of settings.

The Commission reports that hospital infection rates could be halved if health workers simply washed their hands more regularly and more thoroughly. It has found that around 200,000 people each year are contracting infections within the healthcare system and two million extra bed days are occupied by patients because they have picked up healthcare associated infection. The total cost is about \$20 million per year. Chief Executive Professor Chris Baggoley said “there are around 7,000 patients a year have staph aureus in their bloodstream. The report shows that. 19 – 27% of people with such an infection will die; but attention to hand hygiene can make a big difference”.

## **Prevalence and Patterns of Multi-Morbidity in Australia**

A research paper in the latest issue of *Medical Journal of Australia* has provided the first insight into the prevalence and patterns of multimorbidity (two or more types of chronic conditions) in Australia. About three in 10 people who saw a GP in 2005, and one in four Australians have multimorbidity.

Professor Helena Britt, Director of the Family Medicine Research Centre at the University of Sydney, and her co-authors studied the multimorbidities of more than 9,000 patients who attended GPs between July and November 2005.

Prof Britt said knowing the common combinations of multimorbidity may help in planning the health services needed for our ageing population. Prevalence of multimorbidity was estimated at 37.1% of surveyed patients, which translates to 29% of people who attended a GP in 2005 and 25.5% of the Australian population. Among the elderly, 83% of the surveyed patients had multimorbidity.

The most common morbidity combinations were: arthritis/chronic back pain and vascular disease (15%); a psychological problem and vascular disease (10.6%); and arthritis/chronic back pain plus a psychological problem (10.6%). The most common combination among patients with four or more types of morbidity was arthritis/back pain, vascular disease, gastro-oesophageal reflux and a psychological problem.

## **Older Workers are Healthier**

Older workers had lower rates of heart disease, diabetes, obesity and arthritis than their non working peers, according to a recent analysis of the 2004-05 National Health Survey by the Australian Bureau of Statistics (ABS).

The report found that mature age workers (between 45-74 years) were slightly healthier than their non-working counterparts, with 8 in 10 workers having a chronic health condition such as cardiovascular disease, diabetes or obesity, compared with 9 in 10 of the nonworking population.

Cardiovascular disease and arthritis each affected around a quarter of all mature age workers compared with half of non-workers. However, similar proportions of workers and non-workers aged 45-74 years were overweight or obese (58% and 55% respectively).

Further information is available in *Health of Mature Age Workers in Australia: A Snapshot* (cat. no. 4837.0.55.001), available for free download from the ABS website [www.abs.gov.au](http://www.abs.gov.au).

## **ACSA Joins SAGE International Study Tour Consortium**

ACSA has formally agreed to join the SAGE international study tour consortium, which assists in providing aged care professionals insights into international care delivery.

Three tours have run since 2006, taking delegates to China, the Netherlands, Malta and the United States of America.

Greg Mundy said the association strongly supported the principles behind the tours.

"We have always thought that international contacts and collaboration are valuable things to have," he said.

ACSA's involvement in the partnership will begin with tours in 2009 to IAHSA's conference in London in July (see details provided by Sage, below).

### **SAGE Europe 09 – new tour options released...**

Organisation for the UK/Europe<sup>09</sup> study tour (our biggest SAGE tour so far) is well underway, and more details will become available over the coming months.

Following registration of interest in the SAGE UK/Europe<sup>09</sup> program, we would now like to invite you all to indicate which particular tour option(s) you would be interested in attending. Please note an EOI makes you eligible for early bird prices when the tour is finalised.

The following tour options are available:

#### **Tour Option 1**

**10<sup>th</sup> July to 22<sup>nd</sup> July**

U.K. Facilities tours + IAHSA 8<sup>th</sup> Annual Conference in London

#### **Tour Option 2**

**19<sup>th</sup> July to 31<sup>st</sup> July**

IAHSA 8<sup>th</sup> Annual Conference in London + Belgium & Germany Facilities tours

#### **Tour Option 3**

**10<sup>th</sup> July to 31<sup>st</sup> July**

U.K. Facilities tours + IAHSA 8<sup>th</sup> Annual Conference in London + Belgium & Germany Facilities tours

#### **Additional Netherlands Tour Option –to be confirmed**

A small delegation (maximum eight) to tour facilities in the Netherlands. The tour will be run either before or after the main tour dates.

*NOTE: Subject to availability.*

Please advise us of your selection submitting the expanded expression of interest form on our website at [www.sagetours.com.au](http://www.sagetours.com.au), where you can now select your preferred option and have access to contact numbers and further SAGE information.

## 2009 IAGG Gerontology Conference (Paris)...

We have received a number of questions regarding the IAGG Gerontology conference being held in Paris from the 5<sup>th</sup> to the 9<sup>th</sup> of July, immediately prior to the start of the SAGE Europe tour. SAGE delegates interested in attending this conference are encouraged to organise their own attendance at this event, and could meet up with the SAGE tour group in London directly at the conclusion of the conference.

Thanks again for your interest in the program, and we look forward to seeing you next July!

Judy Martin.  
Sage Tours