

# Synthesis Report:

## LASA Royal Commission Member Survey:



### Purpose

The purpose of this document is to provide to Government the views of LASA and our Members on key issues that industry would like to see addressed in the Aged Care Royal Commission.

### Background

On the 16<sup>th</sup> September 2018, the Prime Minister Scott Morrison announced the Government's decision to ask the Governor General to establish a Royal Commission into the aged care industry.

The Royal Commission will primarily look at the quality of care provided in residential and home aged care to senior Australians. The scope of the Royal Commission into Aged Care is to include the following:

- The quality of care delivered to older Australians and the extent of sub-standard care
- Care provided to older people with disabilities and young people in aged care homes
- Dementia care needs
- Future challenges and opportunities in responding to changing demographics, and
- Any other matters

In response to this announcement, LASA surveyed our Members seeking their views on the key issues for the Royal Commission to consider. At short notice, LASA received around 50 responses from Members on this issue. This report provides a summary of the key issues identified by LASA Members.

### Key Issues

#### Outcome Focused

LASA strongly asserts that the Royal Commission have a clear outcome to direct its focus and effort.

LASA suggests that this focus be on ***'ensuring that Australia has a high performing, respected and sustainable aged care system that delivers accessible, affordable, quality care and services for all older Australians'***.

With this objective clearly stated, a number of key areas for investigation that support this outcome become more apparent.

#### Open and Transparent

LASA asserts that the Royal Commission must provide a forum for all stakeholders to 'tell their story' with regards to their experiences of Australia's aged care system.

A commitment to openness and transparency will afford all involved in the Royal Commission process an opportunity to hear first-hand the personal stories of individuals (older Australians, their families, aged care staff, etc) and their lived experience of aged care in Australia and, through these insights, consider and identify any system level shortcomings.

LASA suggests that in this context, the Royal Commission provide appropriate supports to the public, aged care staff and other stakeholders who engage in the Royal Commission process.

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### Safety and Quality

Members urged the Royal Commission to investigate whether existing regulatory processes are sufficient to ensure safety, with concerns including an emphasis by regulatory bodies on paperwork over substantive results.

As one Member commented:

*“To what extent AACQA processes, especially risk identification, were sufficient to ensure a safe aged care system and whether inconsistencies in approaches and failings in oversight contributed to adverse events.”*

Furthermore, Members also seek insight into the practices and behaviors of the AACQA. Noting one Member’s comment:

*“Whether the increase in non-compliance is the result of an increase in poor care or if it is the result of reactionary behavior by the agency following Oakden and the Carnell Paterson review”*

Members also emphasised the need to build on previous work, particularly the recent Carnell Paterson Inquiry and the associated Government response, which is still in the process of implementation.

### Appropriate Funding

A key message from Members was the need for the Royal Commission to investigate and understand the changing needs and expectations of older Australians and the resources the industry requires to respond to these challenges.

As one Member put it:

*“[the] Royal Commission needs to define the kind of care the nation wants to provide, and then work out how to fund it.”*

Members have suggested that understanding the true cost of delivering care is a key area that must be explored, as this will also inform the adequacy or otherwise of current funding levels for residential care and home care.

Members also argued that the Royal Commission should investigate if there are any perverse incentives in the current funding model in residential care. In particular, exploring if the current model helps or hinders providers to promote and realise greater wellness outcomes for residents.

Finally, LASA suggests the impacts of changes to aged care funding arrangements by successive governments over recent years also need to be considered. These decisions included: changes to payroll tax supplement arrangements; changes to the Aged Care Funding Instrument (ACFI), and changes to the levels of indexation applied by Governments to aged care fees and charges.

### Workforce Matters

Members encouraged the Royal Commission to investigate workforce issues noting the substantial actions already underway as part of the Aged Care Workforce Strategy. Issues identified included: upskilling and career pathways; promoting good workplace practices and culture; the adequacy of training and qualification standards; approaches to understanding staffing requirements that reflect

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the complex and dynamic nature of resident needs; and, appropriate staffing mix and levels and appropriate remuneration.

One Member concludes:

*"Identifying elements of a best-practice model of care that delivers a high quality of life for older Australians. In doing so, consider frailty, acuity, workforce planning, flexibility, transparency, education and supporting and valuing the workforce..."*

### Access to Services

Members were unanimous in their desire that the findings of the Royal Commission provide better outcomes and protections for vulnerable older Australians. This could be achieved by investigating the root cause factors underpinning issues that the industry is currently facing. One Member commented:

*"Assessing to what extent current supply constraints, pricing controls and funding arrangements are adequate to deliver the standard of care expected by senior Australians."*

In this context, specific focus needs to be given to access issues for: specific service types (eg: mental health care, palliative care, dementia care, etc); the unique needs of specific groups (eg: Aboriginal and Torres Strait Islanders, people with disabilities, CALD, LGBTI, and other groups); and, the needs of communities in specific locations (eg services and supports in regional, rural and remote areas).

### Systems Interfaces

Members argue that the Royal Commission needs to look at the whole aged care system and its interplay with other systems/services. The Royal Commission must consider and investigate the relationships and interdependencies between aged care services and primary care, acute care, ambulance services, allied health, pharmacy, disability care and other social services.

This is supported by a LASA Member commenting:

*"Access to and relationship with General Medical practices and broader health care and other allied health system areas have a huge impact on the quality of aged care and vice versa."*

### Learn From the Past

Members noted that the Royal Commission needs to have a thorough understanding of previous reviews and reforms to:

- Understand the journey of transformation currently underway in Australia's aged care system and consider the appropriateness of the principles driving reform – ageing in place; consumer choice; market-based competition; and, consumer contributions
- Examine key documents/processes/decisions that have shaped the current aged care system, including the Aged Care Act 1997, Caring for Older Australians, Living Longer Living Better, Aged Care Roadmap, Aged Care Blueprint, Tune Review, etc.
- Consider past reviews and recommendations, noting those that have not been acted upon.

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One Member suggests:

*“in reviewing and considering the learnings from the past, we can begin to identify the expectations of older people, their families, and the community in regards to Australia’s quality and compliance regime.”*

### **Identify Leading Practice**

Members suggested that the Royal Commission should also focus on examples of leading practice and innovation in the aged care industry. Identifying these will assist in promoting better practice and rebuilding community and industry confidence.

In addition, consideration should be given to indicators that enable consumers to differentiate providers and make appropriate choices. As one Member observed:

*“an approach to examining the needs and expectations of older Australians to regulation and accreditation is likely to produce the most positive impacts and be more effective in reassuring the public.”*

## **Conclusion**

Ageing and aged care are issues of national importance.

Everyone involved in the aged care industry wants a safe and high quality aged care system. Our older Australians deserve nothing less.

This Royal Commission will play a key role in making our aged care system better. It will be vital to help draw out the shortcomings of our industry and further highlight areas for improvement and development.

While the Royal Commission is underway it is vital that we press on with addressing key issues and not lose sight of making the system better right now.

LASA’s reform agenda on behalf of our Members, to drive higher quality aged care, is clear:

1. An urgent increase in Government funding to better resource the aged care system.
2. Development of our industry workforce in line with the Workforce Taskforce Strategy to deliver an increased number of staff with appropriate qualifications and skills, opportunities for ongoing learning and advancement, and ensure that staff receive fair remuneration.
3. A more effective regulatory and standards regime so that if providers are not delivering appropriate quality of care that they are quickly identified and sanctioned, or shut down.

These issues affect all Australians. It is beholden on everyone involved in the aged care system to work together to make the aged care system better.