

Royal Commission into Aged Care Quality & Safety

THE ROYAL COMMISSION JOURNEY SYNTHESIS 2019-2021



LASA
LEADING AGE SERVICES
AUSTRALIA
The voice of aged care

This LASA Royal Commission Synthesis provides LASA's high level overview of the activities of the Royal Commission since the publication of the Terms of Reference (ToR) 2 ½ years ago. In this time there have been changes in Commissioners, the appointment of a new Commissioner and the loss of Commissioner Tracey just prior to the publication of the Interim Report.

There have been two extensions due to weight of work and to reflect the interruption of normal activities due to COVID-19. The Commissioners have published two reports in their name – their Interim Report *Neglect* in October 2018 and *Aged care and COVID-19: a special report* an early element of the Final Report which focused on their findings and recommendations into COVID-19.

*'This Royal Commission will be about proactively determining what we need to do in the future.'*¹ Prime Minister Morrison, on announcement of the Royal Commission.

*'The Royal Commission is a once-in-a-lifetime opportunity to come together as a nation to consider how we can create a better system of care for elderly Australians that better aligns with the expectations of the Australian people. The hallmark of a civilised society is how it treats its most vulnerable people, and our elderly are often amongst our most physically, emotionally and financially vulnerable. Frail and elderly members of our community deserve to and should be looked after in the best possible way, and we intend to do our best to see that it happens.'*² Commissioner Tracey, opening remarks to the preliminary hearing.

*'We all want a safe and high quality aged care system. Our older Australians need it and they deserve it'*³ Sean Rooney, CEO Leading Age Services Australia.

WHO



The Honourable
Tony Pagone QC



Ms Lynelle Briggs
AO



The Honourable
Richard Tracey AM RFD QC

The Commissioners were supported by a team of Counsel Assisting.

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¹ [https://w\(t2o ww.pm.gov.au/media/royal-commission-aged-care-quality-and-safety](https://w(t2o ww.pm.gov.au/media/royal-commission-aged-care-quality-and-safety)

² <https://agedcare.royalcommission.gov.au/hearings/Pages/Remarks-by-Commissioners-and-Counsel-Assisting-18-January-2019.aspx>

³ <https://lasa.asn.au/news/royal-commission-must-drive-ongoing-industry-reform/>

WHY

The Royal Commission was announced by the Prime Minister in September 2018 in response to a number of high profile instances of failures of care, with the Department of Health suspending almost one aged care service per month during the previous 15 months and an increasing number of residential homes under sanction to improve their care. The Prime Minister also wanted to examine the issue of younger people living in residential aged care and to ensure the nation is well prepared for the increase in demand set to occur in the next decade as the large 'baby boomer' generation needs more support from the aged care system.

Since the announcement of the rationale behind a Royal Commission inquiry the stress facing aged care service users such as long waits for access to home care, the importance of quality and safety as demonstrated through the devastating effects of COVID-19 in residential care and the concomitant pressure on providers to maintain and sustain their operations have only exacerbated. The urgency of transformation in aged care is now critical.

WHAT has happened

The Royal Commission has held:⁴

23 hearings – these have adapted to emerging issues such as Earle Haven and COVID-19. They have converted from a traditional face to face approach to engagement, driven by a commitment to ensure that hearings and activities occurred in all capital cities and a range of other regional centres to a virtual, COVID-19 safe approach to public activities.

Preliminary Hearing	18 January 2019
Perspectives on the aged care system as it presently exists	11-13; 18-22 February 2019
Aged Care in the Home	18-22 March 2019
Dementia care and residential care	6-8; 13-17 May 2019
Access and inclusion	17-19 June 2019
Person-centred care	24-28 June 2019
Access to aged care and clinical care	8-12; 15-17 July 2019
Carers for older Australians	29 – 31 July 2019
Regulation in aged care	5-9 August 2019
Younger people in residential aged care	9-11 and 13 September 2019
Diversity in aged care	7-11 October 2019
Aged Care Workforce	14-18 October 2019
Provision of aged care in regional areas	4-6 November 2019
Aged care operations of selected providers	11-15 November 2019
Interfaces between the aged care and the health care systems	9-13 December 2019
The future of the aged care workforce	21 February 2020
Future aged care program design	4 March 2020
Hearings were temporarily suspended due to COVID-19; on resumption they were characterised by Counsel presenting a number of propositions for the future which were tested with witnesses	
Mental health, oral health and allied health care	15-17 July 2020
The response to COVID-19 in aged care	10-13 August 2020
Accommodation	13-14 August 2020
Home care	31 August – 2 September 2020
Funding, financing and prudential regulation	14-22 September 2020
Counsel Assisting's final submissions	22-23 October 2020

4. <https://agedcare.royalcommission.gov.au/hearings-and-workshops>

2 workshops which included less formal discussions across Counsel and witnesses:

Redesign of the aged care system	10-11 February 2020
Research, innovation and technology	16-17 March 2020

During this time LASA produced 98 hearing summaries capturing the key details of the day and delivered to Members.

10 Community Forums and Two Community meetings

Forums were a less formal opportunity for members of the public to hear about the work of the Commission, to offer their ideas on the challenges and strengths of aged care and to propose ideas for improvement. There were limits to media reporting.

Through the forums information emerged on Commissioners' thinking, including the scope of inquiry (policy not misconduct) and the future plans of the inquiry.

These were predominantly attended by Commissioner Briggs.

Community meetings were held in regional areas ahead of hearings in the area. At community meetings, local members of the public were invited to discuss the strengths, challenges and opportunities to improve aged care in regional areas.

Bankstown	1 March 2019	NSW
Bendigo	5 March 2019	VIC
Wollongong	13 March 2019	NSW
West Melbourne	3 May 2019	VIC
Broome	19 June 2019	WA
Townsville	18 July 2019	QLD
Adelaide	12 August 2019	SA
Brisbane	19 August 2019	QLD
Rockhampton	20 August 2019	QLD
Launceston	3 October 2019	TAS
Community meetings		
Dubbo	16 - 18 September 2019	NSW
Mudgee	17 - 17 September 2019	NSW

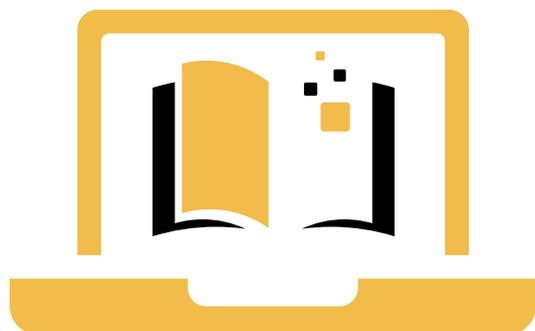
22 site visits: These were private visits by the Commissioners and their teams and are designed to provide a broad context for the variety of ways in which services are delivered.

Compiled a suite of case studies which were captured in [Volume 2](#) of the Interim Report. The details of Counsel's proposals and witness responses are captured in the [searchable document library](#) on the Royal Commission's webpage

PUBLICATIONS

[Neglect](#) – their Interim Report

[Aged care and COVID-19: a special report](#)



8 background papers which were often published at the time of a topic based hearing.

[Background Paper 1 - Navigating the maze: an overview of Australia's current aged care system](#)

[Background Paper 2 - Medium- and long-term pressures on the system: the changing demographics and dynamics of aged care](#)

[Background Paper 3 - Dementia in Australia: nature, prevalence and care](#)

[Background Paper 4 - Restrictive practices in residential aged care in Australia](#)

[Background Paper 5 - Advance care planning in Australia](#)

[Background Paper 6 - Carers of older Australians](#)

[Background Paper 7 - Legislative framework for Aged Care Quality and Safety regulation](#)

[Background Paper 8 - A History of Aged Care Reviews](#)

Consultation and proposition papers on which they sought formal comment and submissions

[Consultation Paper 1 - Aged care program redesign: Services for the future](#)

[Consultation paper 2 - Financing Aged Care](#)

[Counsel Assisting's submissions on workforce](#)

[Counsel Assisting's submissions on Program redesign](#)

[Research, innovation and technology - workshop propositions](#)



20 research papers have been published throughout the course of the Commission. These have been notified to Members through the 118 regular Member Updates that have been shared, with commentary about the LASA view on each as required.



[Research Paper 1 - How Australian residential aged care staffing levels compare with international and national benchmarks](#)

[Research Paper 2 - Review of International Systems of Long-term Care of Older People](#)

[Research Paper 3 - Review of Innovative Models of Aged Care](#)

[Research Paper 4 - What Australians think of Ageing and Aged Care](#)

[Research Paper 5 - They look after you, you look after them: Community attitudes to ageing and aged care](#)

[Research Paper 6 - Australia's aged care system: assessing the views and preferences of the general public for quality of care and future funding](#)

[Research Paper 7 - Models of Integrated Care, Health and Housing](#)

[Research Paper 8 - International and National Quality and Safety Indicators for Aged Care](#)

[Research Paper 9 - The cost of residential aged care](#)

[Research Paper 10 - Technical mapping between ACFI and AN-ACC](#)

[Research Paper 11 - Aged care reform: projecting future impacts](#)

[Research Paper 12 - Report on the profitability and viability of the Australian aged care industry](#)

[Research Paper 13 - Inside the system: aged care residents' perspectives](#)

[Research Paper 14 - Inside the system: home and respite care clients' perspectives](#)

[Research Paper 15 - Residential Care Quality Indicator Profile](#)

[Research Paper 16 - How far do people move to access aged care?](#)

[Research Paper 17 - Experimental Estimates of the Prevalence of Elder Abuse in Australian Aged Care Facilities](#)

[Research Paper 18 - Hospitalisations in Australian Aged Care: 2014/15-2018/19](#)

[Research Paper 19 - Does the quality of residential aged care vary with residents' financial means?](#)

[Research Paper 20 - The quality of care experience and community expectations](#)

The Royal Commission also collated a reference library of related publications which were used as reference points throughout their inquiry. <https://agedcare.royalcommission.gov.au/publications/related-publications>

Miscellaneous papers were also published and included other evidence to which Counsel referred or proposed recommendations which were to be put to the Commissioners to make in their Final Report

[The required return for aged care service providers](#)

[Capital financing for residential aged care: Call for submissions](#)

[ICT Strategy and Architecture Report](#)

By 31 July 2020 they had received 10,144 submissions, taken 6,729 calls to their information line and have published submissions against specific topics.

[Diversity in aged care submissions](#)

[Consultation Paper 1 submissions](#)

[Consultation Paper 2 submissions](#)

[Workforce submissions](#)

[System governance submissions](#)

[Program design submissions](#)

[Capital Financing Submissions](#)

[COVID-19 submissions](#)

[Responses to Counsel Assisting's Final Submissions](#)

A month by month library of more general submissions has been published <https://agedcare.royalcommission.gov.au/submissions/read-published-submissions/read-general-submissions>

The Commission reserves the right not to publish submissions or to redact information within a submission. This includes circumstances where there are privacy concerns about the information included.

SUBMISSIONS MADE BY LASA

[Capital Financing submission](#)

[System Governance submission](#)

[Program Design submission](#)

[Workforce submission](#)

[Consultation Paper 1: Redesign of the aged care system submission](#)

[Consultation Paper 2: Financing submission](#)

[LASA's response to Counsel Assisting's Final Submissions](#)

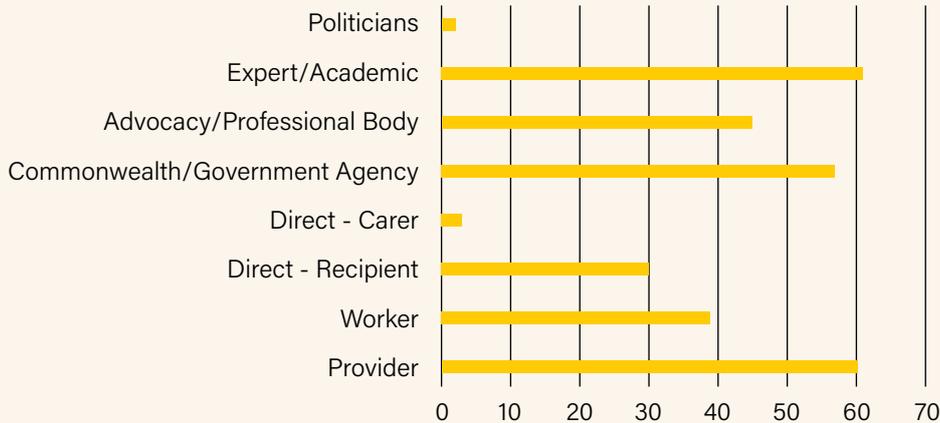
LASA made a number of other submissions on residential and dementia care, home care, *innovAGEING* and NextGen which have not yet been added to the Royal Commission's webpage.

There have been over 660 witnesses. In the period leading up to the Interim report the focus leaned towards the experience of care recipients and their carers as well as the providers and staff involved in their care, particularly through the use of case studies.

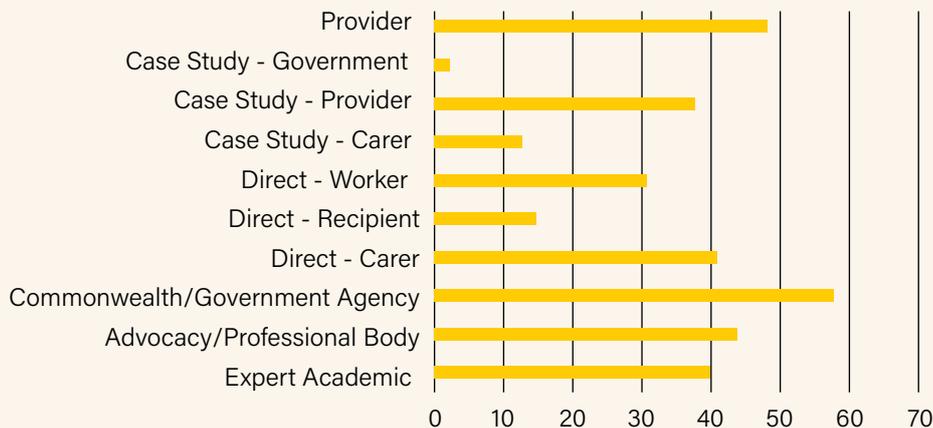
Following the Interim Report there was a shift in the type of witnesses with an increase in experts and academics. Consistently there has been high representation of Commonwealth and Government agencies and in the final period there has been an increase in provider representation. (See below).

LASA staff giving evidence at hearings or workshops included the LASA CEO, Sean Rooney and the (former) Employee Relations Manager Jenna Field. Informal discussions have also been held with representatives from *innovAGEING* and NextGen further to requests for information by Royal Commission staff.

WITNESS TYPE (Oct 2019-Sept 2020)



WITNESS TYPE (Feb 2019 - Sept 2019)



WHAT have they said

Neglect – their Interim Report which called for urgent action by Government:

- to provide more Home Care Packages to reduce the waiting list for higher level care at home
- to respond to the significant over-reliance on chemical restraint in aged care, including through the seventh Community Pharmacy Agreement
- to stop the flow of younger people with disability going into aged care, and expediting the process of getting those younger people who are already in aged care out.

In response, Government released more home care packages and reinvigorated its planned approach to younger people in residential aged care.

Aged care and COVID-19: a special report also made a series of recommendations:

The first recommendation of the Royal Commission was that a report should be presented to Parliament on the response of Government by 1 December. A summary of the responses to the recommendations is provided below.

The full detail can be found at [Australian Government Implementation Progress Report on the Royal Commission into Aged Care Quality and Safety report: Aged Care and COVID-19: a special report](#) which outlines the measures the Government has put in place to respond to the five other recommendations of the Royal Commission.

Recommendation 2: The Australian Government should immediately fund providers that apply for funding to ensure there are adequate staff available to allow continued visits to people living in residential aged care by their families and friends.

Government response: Accepted and delivered.

Government relies upon the funding already delivered into aged care through the various COVID payments to demonstrate that this activity has been delivered.

Recommendation 3: The Australian Government should urgently create Medicare Benefits Schedule items to increase the provision of allied health services, including mental health services, to people in aged care during the pandemic. Any barriers, whether real or perceived, to allied health professionals being able to enter residential aged care facilities should be removed unless justified on genuine public health grounds.

Government response: Accepted and will commence from 10 December. Two new MBS item numbers will be established for mental health and allied health services for residential aged care residents. Funds will also be provided to primary health networks for in reach group re-ablement programs.

Recommendation 4: The Australian Government should establish a national aged care plan for COVID-19 through the National Cabinet in consultation with the aged care sector

Government response: Accepted and delivered.

The Government has published the [Updated national COVID-19 Aged Care Plan \(7th Edition\)](#)

[Aged Care Advisory Group](#) is established and was made permanent on 1 October.

[Protocols](#) continue to be developed with states and territories, including arrangements for the stand up on response centres within 48 hours: [A Commonwealth, state and territory plan to boost aged care preparedness for a rapid emergency response to COVID-19](#)

[Visitation](#) recommendations are encompassed in the new tiers of escalation and revised Visitor Access Code

[Hospital in the Home](#) recommendations have been captured in the National Plan, noting that the best response to each situation should be determined and implemented on a case by case basis.

[Outbreak reviews](#) includes the four already commissioned reviews into outbreaks, as well as a further national review to examine lessons learnt from the management of outbreaks and to identify critical success factors. This is expected to be completed by the end of March 2021.

Recommendation 5: All residential aged care homes should have one or more trained infection control officers as a condition of accreditation. The training requirements for these officers should be set by the aged care advisory body we propose.

Government response: Accepted and completed/in progress

Government draws attention to the funding from COVID supplements and the recently published requirements for the establishment, training and reporting on IPC leads. It notes that these will be monitored by the Aged Care Quality and Safety Commission through assessment, specifically against Standard 3

Recommendation 6: The Australian Government should arrange with the States and Territories to deploy accredited infection prevention and control experts into residential aged care homes to provide training, assist with the preparation of outbreak management plans and assist with outbreaks.

Government response: Accepted and in progress

The Government notes it will increase its contribution under the National Partnership on COVID-19 Response from 50 to 100 per cent for activity by the states to support aged care services, particularly infection and prevention control (IPC) training, and co-ordinated preparedness and response. The Commonwealth is also working collaboratively with jurisdictions to continue to support preparedness and response. It notes the work of the ACQSC to review preparedness and response regarding IPC.

COUNSEL'S FINAL WORD

During the [Final Hearing](#) Counsel Assisting put forward 124 recommendations in [Counsel Assisting's Final Submissions](#) and an ambitious time line [Counsel Assisting's Final Submissions Annexure](#) on which they sought submission and commentary. Responses to these have also now been published by the [Responses to Counsel Assisting's Final Submissions](#).

These are summarised and themed below:

Structural reform

New Aged Care Act
Australian Aged Care Commission : independent statutory body to as system governor
Aged Care Pricing Authority: independent statutory body to ensure prices are determined independently with additional measures associated with establishment and role/function
Office of the Inspector-General of Aged Care with oversight of the Commission's performance
Aged Care Advisory Council to provide advice on aged care policy, service arrangements and performance of the aged care system to the Commission and Minister.
Planning based on need, not rationed and specifically for regional, rural and remote areas
Statutory duty of aged to care recipients for providers, with legislative amendment on provider governance and program to assistance improvements in governance
Australian Commission on Safety and Quality in Health and Aged Care, including urgent and then periodic review of the Quality Standards with wider enforcement powers
Dedicated Aged Care Research Council
Amendment of National Health Reform Agreement with statement of roles and responsibilities for aged care
Transition planning clearly developed with Implementation Unit and review of effectiveness requirements

Service reform

Integrated long-term support and care for older people offering a comprehensive continuum of care, single assessment process, certainty of funding based on assessed need, care management planning, inclusion of allied health to residential care
Involvement all levels of government with a National Cabinet Reform committee on Ageing and older Australians
Meeting preferences to age in place, addressing the home care package waiting list, introduction of care finders
Enhanced individual advocacy arrangements
Improved data collection, aged care national minimum data set, benchmarking and analysis and enhanced quality indicators
Respite support program
Assistive technology and home modification program

Designing for diversity, including specific arrangements for Aboriginal and Torres Strait Islander people, introduction of required cultural safety training
Establishment of a dementia support pathway, with service adjustments, regulation of restraint use
Improve design of aged care accommodation, including grants for small home models
New primary care model to improve access to care, improved access to specialists, improved access to mental health services, dental care, increased access in regional and remote areas, access to specialist telehealth, increased access to medication review
Restricted prescription of antipsychotics
Improved transition between residential care and hospitals, including reporting, data sharing
Adoption of digital technology and My Health Record
Extension of Multi-Purpose services
Improved experience reporting, complaints management and protection for whistle-blowers
Introduction of graded assessment and performance ratings, expanded serious incident reporting
Improved approved provider arrangements and requirement for continuity suitability

Tackling ageism

Improved public awareness of aged care
Social support program to prevent social isolation and loneliness
Equity for people with disability receiving aged care, with annual reporting to Parliament

Workforce

Establish Aged Care Workforce Planning division at Department of Health
Strengthen capacity of the Aged Care Workforce Council
Work value case to increase wages
Review of educational courses to address skills gaps
Funding for teaching aged care programs
Minimum staff time standard for residential care and reporting of staffing hours
National personal care worker registration scheme and mandatory minimum qualification

Carers

Improved support to informal carers
Establish Aged Care Volunteer Visitors Scheme

Younger people in residential aged care

Mechanisms to achieve, monitor and report on progress towards commitments

Funding and financing

Interim changes to indexation arrangements
Immediate changes to Basic Daily Fee
Amendments to viability supplement
Immediate funding for education and training
Casemix-adjusted activity based funding in residential aged care
Maximum funding for home care to match that in residential aged care
Funding to incentivise reablement in residential care
Payments on accruals basis for home care and standardised statements
Co-payments for social supports, assistive technology and home modifications
Revision to fees for respite and care at home
Costs of living to be determined by Pricing Authority for residential aged care
Repeal of means tested daily care fee for residential care
Reform of means testing for accommodation charges
Aged Care Commission to be prudential regulator and establish prudential standards with liquidity and capital adequacy requirements and improved financial reporting requirements which include continuous disclosure

They also sought comments on previously presented matters identified in the hearings on workforce, program design and further to consultations on capital financing and system governance:

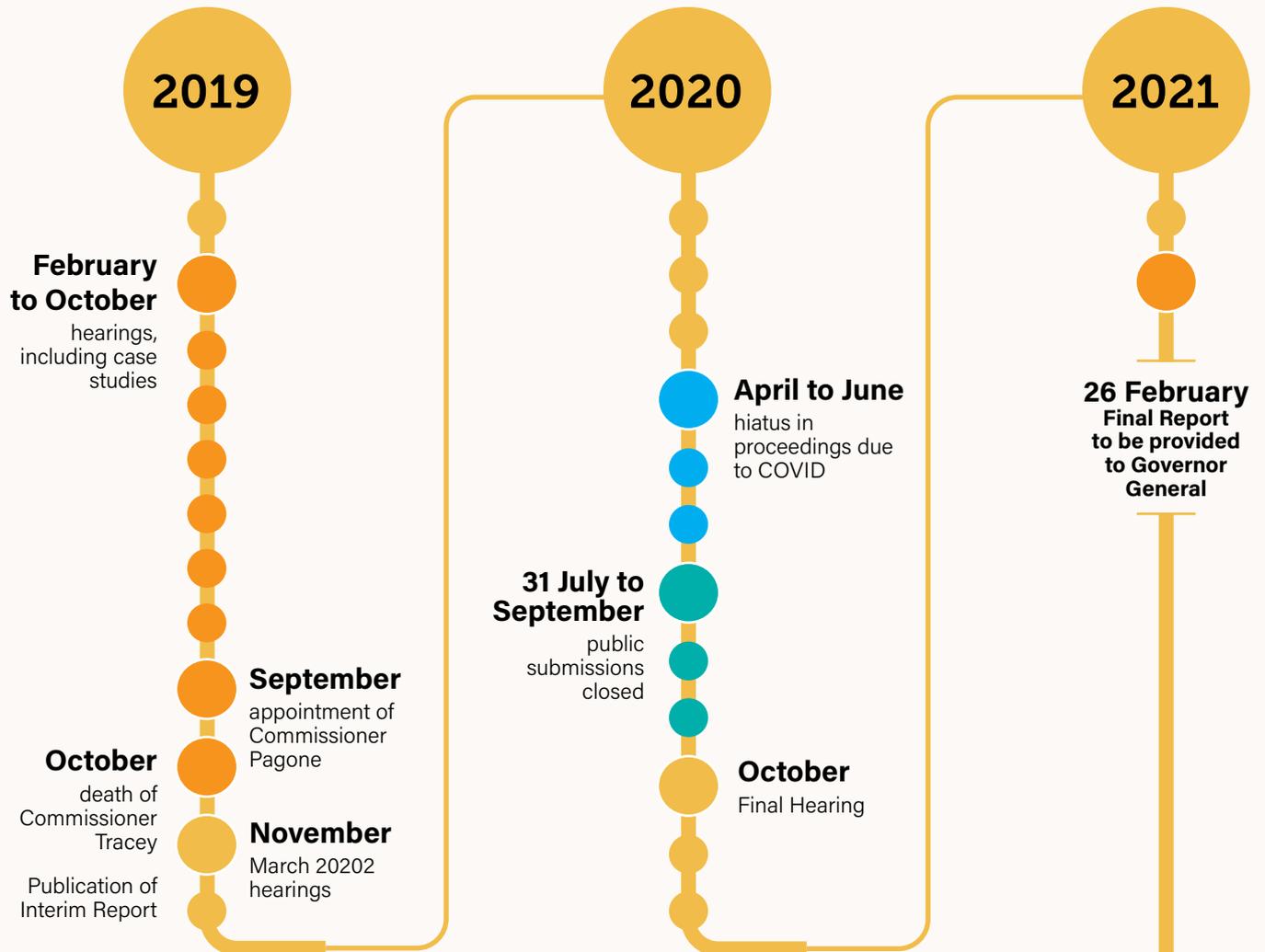
- My Aged Care and an improved provider search function
- Care at home
- Allied health care
- Workforce: short term arrangements to increase wages
- Direct employment of care workers
- Informal carers: leave entitlement
- Financing
- Capital financing

At the Final Hearing Commissioner Briggs presented seven other topics or counter proposals:

- Aged care policy principles
- System design and governance
- Program management
- Restraints
- Provider leadership and culture
- Research and data governance
- Capital financing

[LASA's response to these recommendations is contained in full here.](#)

SO WHERE ARE WE NOW



SO WHAT NEXT

The Final Report is due to be provided to the Governor General on 26 February 2021. After this it will need to be tabled to Parliament following which it can be made public.

In the period immediately following publication LASA will be updating Members with our reflections on the content.

This is a seminal moment for those who are engaged in any way in the delivery of aged care services and will set the agenda for the next 20 years. These are to be 20 years with the most rapid increase in demand for services ever seen and from a cohort with the highest expectations ever experienced - and who deserve the best. The impact of the changes which the recommendations will bring about will be unprecedented in a sector which has already experienced an unprecedented upheaval over the past 12 months.

LASA will present our detailed analysis of the recommendations and the way forward at our [Royal Commission Final Report event](#).



AGED CARE TRANSFORMED

Getting from Here to There

Royal Commission into Aged Care Quality and Safety Final Report Virtual Forum

9 & 10 March, 2021 | 1pm - 5pm AEDT Online

LASA
LEADING AGE SERVICES AUSTRALIA
The voice of aged care

Aged Care Transformed - Getting from Here to There

What we all hope will come from the Royal Commission inquiry is a new aged care system that meets the needs and expectations of older Australians, that is sustainable and which enables the individuals and organisations who deliver it to do so with quality and compassion. Join LASA and our guest experts as we consider, dissect and debate how the Royal Commission Final Report helps us in *'getting there'* from the previous two years of deliberations, investigation and intense scrutiny.

- Getting there: we have the report but what does it mean:
- Getting to it – findings, recommendations and what it means
- Getting there in Residential Care; Home Care; Retirement Living – concurrent sessions
- Getting it right – how our predictions stacked up
- Getting there in one piece – how to realise transformation
- Getting quality and compliance right
- Getting funding and finance right
- Getting workforce right
- Getting the best for older Australians
- Getting from here to there – Q&A Panel
- Getting there in good spirits – bringing back the joy
- Getting started – what do we do tomorrow?

Following this LASA will be working with our Members to advocate to Government to respond comprehensively to the recommendations of the Royal Commission.

The Royal Commission is a once-in-a-lifetime opportunity to come together as a nation to consider how we can create a better system of care for elderly Australians that better aligns with the expectations of the Australian people.

Funding for aged care is insecure and subject to the fiscal priorities and wide-ranging responsibilities of government. Since at least 1984–85, the Australian Government's level of expenditure on aged care has not kept pace with demand. Funding does not reflect the cost of care.

This inquiry is a unique opportunity to create a better system of care for older Australians and others engaged with the aged care system.

None of these many problems is revealed for the first time by this Royal Commission.

The recommendations in the final report will form the basis of authoritative advice to government and to the aged care sector on how to ensure the aged care system of the future aligns with the expectations of the Australian people –

If implemented as an entire inter-connected package, those reforms should, over time, address those causes and thus improve the quality and safety of aged care in this country for the benefit of older people and ultimately the entire community.

Systemic failures happen because of underlying causes in the way the aged care system is designed and governed, and to some extent because of the attitudes within Australian society and government which inform those decisions. The causes of systemic failure identified through the work of the Royal Commission include the following:

- a. attitudes to aged care and the delivery of services*
- b. funding and financing*
- c. inadequate governance and regulatory frameworks*
- d. failure to take opportunities for improvement*



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