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SUBMISSION TO THE ROYAL COMMISSION INTO AGED CARE QUALITY AND SAFETY

Introduction

SiP, incorporated in 2011, is a positive ageing residents' group that promotes satisfying, healthy, lifelong independent living in our local community.

SiP believes in:

- Helping older people to be strong and in control of their own lives
- Doing things with and not for older people
- Promoting wellbeing and wellness in Portarlington
- Encouraging the participation of older people in community life

SiP advocates for:

- Recognition and respect of the rights of older people
- Responsiveness, appropriate and flexible high quality services
- Improved policies, services and infrastructure to ensure that Portarlington develops as an age friendly community

SiP strongly supports the right of older people to reside in their own homes and to remain living there, with appropriate supports as required to:

- i. maintain independence
- ii. encourage and promote reablement
- iii. enhance wellbeing and ongoing quality of life

SiP hosted an open forum for members and friends on February 18, 2020, on the Royal Commission into Aged Care Quality and Safety, to discuss views on what is important in our community to facilitate and enable residents to age-in-place under the Federally funded Aged Care Program.

SiP recognises that health needs, wellbeing and related factors will motivate and/or necessitate some residents to seek residential care preferably in the community, or in locations close to family, friends and other supports. We consider that transitioning into higher level residential care should be as seamless and non-disruptive as possible so as to promote continuity of care for older people and on going connections with community and family.

SiP is concerned at the current disjunction between peoples' preferences to remain at home, and government policy and funding that favours residential care.

For example, 850,000 people currently receiving services under the Home Support Program, out of a total of 1.3 million people in the system, receive just \$2.2 billion of the total government expenditure of 18.1 billion - 12% funding for 65% of people.

SiP asks that recommendations to rectify this extraordinary imbalance be included in the Royal Commission's final report.

SiP endorses the view of the Commissioners in the *Interim Report: Neglect* that there is a need for a fundamental and comprehensive overhaul of the aged care system, not a mere patching up by modifications to programs and services. (p.12)

Therefore, in this submission SiP is focused on the features and principles that we consider should underpin redesign of the system, which if implemented, would lead to improvements in services for older people.

Proposed Key Features of a Redesigned Aged Care System

Preamble: The Human Rights of Older People

SiP considers that the emphasis in the existing aged care program on choice, consumer directed care, and consumer control have diverted attention away from what should be a key underpinning feature of aged care - the human rights of older people.

SiP proposes that the limited and limiting rhetoric of consumer rights in aged care, grounded in consumer protection, as evidenced by the *2019 Australian Charter of Aged Care Rights* for consumers, should be replaced with a human rights perspective that guides planning, policies, programs, services and funding.

The United Nations Principles for Older Persons, adopted in 1991 by the General Assembly, encourages governments to incorporate the following five principles (elaborated with 18 clauses) into their national programs - independence, participation, care, self-fulfillment and dignity.

This approach would enable the transformed aged care system to develop an aged care framework that operates with a primary and ongoing central focus on needs and rights of older people, replacing the current emphasis on transactions with caring relationships.

And this in turn would reassure older people that their rights:

- * continue throughout life, not compromised by age or health status, and
- * should be upheld, and not be disregarded or downgraded by government policies, programs or service agencies

Facilitated Access and Service Linkages Through a Revamped Gateway to the Aged Care System

SiP considers improvements in access to aged care to be a key fundamental reform feature required in system redesign.

SiP strongly supports the need for a streamlined pathway from the initial entry point that involves:

- * face to face interactions with older people and
- * linkages with the functions of information provision, assessment, case planning and management

SiP notes that problems with access were prominent in submissions to the *Royal Commission - Interim Report* (p.137)

- * the difficulty in finding useful information about what options are available where they live
- * the difficulty in working out how to coordinate services which may be delivered by different providers
- * the time-consuming repetitive efforts that have to be made in order to access a home-based service or transition into residential care.

Such concerns are ongoing. They were raised in previous reviews such as the 2011 Productivity Commission of Inquiry *Caring for Older Australians* and recently reported by some local residents in our community in their attempts to access My Aged Care on-line, or via the telephone service.

The difficulties and complexities with access to aged care system have led to the introduction of 'navigation' projects in an attempt to address and resolve enduring problems.

Currently there a range of COTA initiated and Federally funded navigator trials of 62 models of information hubs, community hubs and specialist support services scheduled to finish by June 30, 2020.

In Portarlington, in response to the difficulties experienced by residents in accessing aged care, Bellarine Community Health has been operating an important local weekly session involving appointments with a trained staff member to assist residents to access My Aged Care and make informed choices about their future care.

However, SiP considers that these add-on initiatives can only be seen as patching up a flawed system.

We advocate as a priority that the gateway to aged care system be redesigned to ensure both ease of access and linkages with assessment and related services, such as case management, so that best practice tailored care is available for older people.

SiP is encouraged that Counsel Assisting the Royal Commission recognised, in a March 2020 report, the primacy of problems of access and service linkages and has proposed as a solution the concept of local face-to-face "Care Finders" following initial entry and basic screening or comprehensive assessment depending on need levels.

Such a role is compatible with the legislative mandate of Victorian Local Government to promote the health and wellbeing of residents under the *1989 Local Government Act* and the *2008 Public Health Act*.

The important role of Victorian Local Government in aged care is also evidenced by 68 of the State's 79 Councils currently operating as local outlets under the State Government's Regional Assessment scheme, with these home support assessment services in the remaining 11 LGAs being provided by Community Health Services.

These agencies with trained professional assessment staff provide holistic face to face assessment and entry into the aged care system, including aged care planning, thus obviating any need for multiple assessments by individual service agencies.

SiP therefore recommends that proposals such as "Care Finders" recognise the existing council/community health assessment model in Victoria as a basis for redesigning access to the aged care system to ensure older people are provided with appropriate gateway services.

Principles of a Redesigned Aged Care System

SiP recommends that the following principles be utilised to guide the development and operation of aged care.

1. Principle of People Centredness

Flowing from a human rights perspective, it is important that the aged care system focus on the principle of people centredness which recognises:

- * the importance of wellbeing and quality of life outcomes for each older person

- * the need for responsiveness to the uniqueness and changing needs of each individual
- * diversity of older people according to e.g. socio economic status, health status, cultural factors, ethnic differences, sexual preferences
- * differing perspectives and life experiences of older people

2. Quality

- * aged care programs and services should promote health, wellbeing, independence and ablement/reablement
- * employment of well paid, competent and compassionate trained staff in both community and residential care
- * mandated staff ratios in residential care to ensure safety and quality
- * quality standards to also apply to food provided in community care programs e.g. meals on wheels and in residential care
- * clarity re as-of-right complaints procedures
- * the need for all older people, including those in residential care, to have access to medical doctors and specialists and allied health services
- * external monitoring of quality standards to ensure compliance in both community and residential care services
- * ongoing provision of training for staff
- * comparative ranking and updated data on services and residential facilities to enable informed choices
- * importance of regular reviews as part of case management
- * limited wait times for assessed services

3. Accessible Information

- * local gateway to care with informed linkages to services and a "one-stop shop" for comprehensive information
- * clarity on service options provided by agencies
- * readily available information on local service initiatives
- * information on entitlements for older people and carers
- * timely communications in different formats - on line, telephone, printed and face to face

4. Responsiveness and Flexibility

- * timely services that provide the appropriate assessed level of care
- * agencies recognising changing needs of older people and responding accordingly
- * service tailoring to meet individual needs and utilizing of the full range of options rather being restricted to those offered by one agency
- * services responding to the needs of people with disabilities as they age, to ensure a pathway to inclusion in age care services
- * availability of respite care - in home and residential - at reasonable costs with minimal administration

Local Area Planning

SiP considers that it is essential to build into the redesigned system the continuation of population based local area planning and coordination of services to ensure that current and future needs of older people can be met.

In Victoria this role has traditionally been undertaken by Local Government.

The aged care responsibilities of Victorian Councils have developed over 70 years, evolving to include functions of local area planning, service co-ordination, assessment, case management and service provision. Significantly Councils also contribute funding to aged care from local rate revenue.

For example, in partnership with Victorian and Commonwealth Governments, Victorian Councils in 2017-18 provided an estimated additional \$150-\$200 million for HACC-CHSP services.

It is important in the future, whether Local Government continues to carry out these functions, or they become the responsibility of the State Government or community health services which also have state-wide coverage, that the Council funding of aged care is not lost to the aged care system.

With more agencies - profit and not for profit - now providing aged care services, one option for Local Government could be to reallocate funds from services to sustain local aged care planning and coordination functions. These arrangements could be negotiated between the spheres of government and formalised with intergovernmental agreements.

Funding

Finally, SiP considers that it is essential that the redesigned aged care system is able to meet the demand for aged care services and that people are not experiencing unacceptably long wait times for services, receiving services at levels lower than they have been assessed as requiring, or being forced to consider the residential care option.

SiP notes that this issue was raised in the *Interim Report* and that recommendations were made for immediate funding for aged care packages.

This was provided by the Government but not at the level required and people are still experiencing long wait times with a backlog of packages and growing demand. In December 2019, 58,936 people seeking a package at their approved level had not as yet been offered a package. (Department of Health, *Canberra Data Report 2019*)

Counsel Assisting the Royal Commission in a March 2020 report proposed that in the future, funding be needs based and that packages should not be capped.

SiP strongly supports this proposal as a key recommendation in the Royal Commission's final report so as to restore confidence in the aged care system and meet the needs of older people who wish to remain at home with supports, as they age-in-place within their communities.

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