

23 September 2018

Response to request for input to the Terms of Reference for Royal Commission into Aged Care Quality and Safety

There was general support for the idea of the Royal Commission and the Terms of Reference. However, it was suggested the Terms of Reference for Royal Commission into the Quality and Safety of Aged Care could draw on the proactive nature of the Royal Commission into Institutional Responses to Child Sexual Abuse by exploring:

- what can aged care providers and governments do to better protect older Australians from abuse and substandard care in the future;
 - what can aged care providers and governments do to achieve best practice in encouraging the reporting of, and responding to reports or information about, allegations, incidents or risks of abuse/neglect and related matters in the aged care setting;
 - what should be done to eliminate or reduce impediments that currently exist for responding appropriately to abuse/neglect and related matters in aged care settings, including addressing failures in, and impediments to, reporting, investigating and responding to allegations and incidents of abuse and substandard care;
 - what can aged care providers and governments do to address, or alleviate the impact of, past and abuse and related matters in aged care settings, including ensuring justice for victims through the provision of redress by aged care services, processes for referral for investigation and prosecution and support services.
- There needs to be a balance between the current and future focuses in relation to the Royal Commission, dealing with current issues of quality and standards needs need a higher level of focus than a planning for future generations
 - There needs to be reference to the quality monitoring and assurance mechanisms which appear to have failed in so many instances, and we can assure the public that we have the right processes in place now to guarantee adherence to the new, stronger standards. The Terms of Reference relate to the on the ground experience of aged care that need to be looked at in detail, but scrutinising the effectiveness of quality assurance mechanisms needs to be afforded equal priority
 - The terms of reference focus on existing care services. There is a need to look at the challenge of providing care that older people want and need in their home close to their community and/ or with diverse needs. Those who have access to care services are relatively advantaged - for most older people in the NT having a roof over your head and 3 meals a day, of whatever quality, is a luxury and not available in the first instance. The market based model effectively excludes those that are most in need.
 - It was the view of some of our members that the level of priority given to young people with a disability should not overshadow the other aspects of the Royal Commission – the focused on aged care needs to be maintained.



- Levels of fees and adequacy of funding in residential and home care and their impact on delivery of quality care needs to be considered. For example, in the Home Care Package space, there are many cases where service providers seem to be pocketing large portions of government subsidies whilst the consumer struggles to receive the level and quality of care they require. Similar findings are predicted to surface in the private aged care space following the Inquiry into the Financial and tax practices of for-profit aged care providers. A lack of funding for high level community based home care packages often results in people receiving lower level packages of care which are inappropriate for their care needs; the impact of funding can have on factors such as staffing provisions and food quality; the ability for service provider to implement changes required to meet new aged care quality standards).
- Shortfalls that occur at the aged care and health and hospital interface should be included. For example, Residential aged care providers are regularly sending clients with complex behavioural needs to hospital because they are not adequately equipped to respond to the needs of clients. And on the other hand, hospitals are often in the habit of seeking residential care for patients that would benefit from alternative models of care such as a Home Care Package, Transition Care or Short Term Restorative Care.

Additional Royal Commission items:

- The number and mix of staff per patient that are required for quality care
- The inappropriate use of Restrictive Practices should also be included.
- Inclusion of all settings where care may be provided to older people, including retirement villages
- The efficacy of the current accreditation system in identifying risk, quality and safety.
- Effectiveness of support structures to ensure seniors know and understand their rights
- The need to provide recipients and their representatives improved access to and advocate of their choice including independent advocacy and external complaints mechanisms.
- Details of the funding and resourcing and how to ensure that adequate staffing is provided to deliver the quality of care expected
- Impact of delays in access to care in particular the time it takes to get care at home
- Inappropriate admission to residential care, due to lack of availability and access to home support
- Equitable access to aged care services no matter where you live.
- Availability of services that are culturally appropriate and trauma informed.

Complied by:

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