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Interested Person

- The transition from community to respite to residential care be, less traumatic
 for the prospective residents. A specific care staff member should be
 assigned to new residents as their companion for a set period of time during
 the settling in period.
- The current funding structure needs to be more stringent so that facilities and
 organisations are no longer able to rort the funding system to gain maximum
 funding for residents who are capable and wish to maintain their
 independence. eg. A resident who is capable of managing their own
 medication and their showering and dressing.
- Future consumers will have a greater understanding of the Aged Care system and be more astute through their experiences and greater education and be more aware to exercise their rights.
- Our population mix is changing at a very rapid rate and care organisations and facilities are facing major changes in the resident/ client mix of the future. They need to be planning now as to how they will provide care and support structure for these various groups. Staffing will need to be a lined to meet the needs of these various groups both in hostel and nursing home accommodation.
- To restrict the over payment for providing care, which is not being provided for such payment.
- The government restrict their funding payment to provide only for increased staffing. To provide better care to increase the well being of the residents. Organisations be compelled to increase and monitor the training of dedicated care staff. This is a role for those with empathy, compassion, and a caring attitude to work with aged residents.
- The current Accreditation System does not reflect the true standard of care being offered to Hostel and Nursing Home residents. As the facilities are given a date for the visit, so all stoppers are pulled out to get everything up to the required standard, such paperwork, making sure that they have increased staffing numbers on the days of the visit. The facility has had extra cleaning prior to the visit. And the heavies of the organisation are present on the days of the expected visit by the Agency. The Agency visits should be spontaneous to get a true reflection of the care and staffing mix of facilities and have the opportunity to speak freely with families not specially chosen residents and family members.
- All Aged Care facilities, be forced to expose all wealth and assets to the government on a yearly basis. e.g As do pensioners and part pensioners.
- Facilities should be forced by stricter claim regulations to expose more transparency. So large organisations can no longer over claim for funding from the government.

- The return of a resident's capital from the Bond Money into their deceased estate. A time limit be set at one month after the time of notified date of death.
- All Aged Care facilities should be implementing the holistic model of care
 this would encompass all allied health professionals. This would also mean
 that the Leisure and Lifestyle component would play a significant role in
 the well being of the residents.
- One of the implications of my suggestion is that facilities tend to expect that any staff member can run a Leisure and Lifestyle programme without knowledge and proper training. There is the need to employ more Diversional Therapists and trained Recreational Activity Officers. Leisure and Lifestyle to be identified in any future funding structure.
- In some cases the accommodation bond charged for assisted care are seen as being too high so often families are forced to keep their family members at home with Community Services as long as possible. Families can monitor the care being provided, which has lead to shorter stays in high care facilities. e.g. Nursing Homes.
- The current subsidies would in most facilities be adequate providing the management used them for the correct intended use. That is providing the correct level of care for each resident. Staffing ratios to be determined by the government and be tied to the subsidies received for each individual resident.
- In lots of cases residents are too frightened to exercise their rights for fear of reprisal or discrimination by management and staff. Many families are also frightened to cause waves or complain as all too often complaints are not satisfactory resolved by management.
- Residents have powerful rights they need to be empowered to use them.
- Australia has the opportunity to look at many aged care systems around the world and look for the best parts and create an outstanding model of care, if Australia is truly committed to reforms on a major scale. For example Japan visited many facilities in Australia and no doubt other countries as well when they were perfecting their aged care system.
- Many facilities around the country are proving environments which promote learned helplessness, which result in gaining more funding from the Government. The Government should be looking, to reward organisations who are proactive in their planning for the future which encourages choice, control, independence and socialisation of residents within a neighbourhood environment for e.g. Apartments for Life based on the Dutch Model.
- Organisations and facilities be more, aware of the importance to maintain continuity of staff and an adequate staffing levels especially in Dementia Specific Units. Staffing in these special units should have specialist training to deal with the various situations which arise with these particular residents. e.g. Programmes such as "The Spark of Life Approach" which encompasses all aspects through their Certificate Course.

- Ethics and socially acceptable behaviour be a mandatory inclusion to the training programmes of all new staff members working in care facilities such as Aged Care and Disabilities.
- Organisations to be proactive by education, to equip, staff to deal with and identify the different mix of behavioural problems associated with dementia.
- Staff to be trained to identify sexual advancements of dementia residents towards fellow dementia residents.
- Organisations to be forced to be proactive in relation to prospective residents who have been users of non prescription drugs with the onset of dementia. And how this will impact on the mix of future residents in relation to behavioural problems in Hostels and Dementia Specific Units.
- The government introduce a staffing ratio for Registered Nurses in all aged care facilities such as Hostels and Nursing Homes. (Many of the facilities are cutting out registered nurses and replacing them with team leaders with the equivalent of certificate IV or certificate III with very modest remuneration for their increased responsibilities e.g. \$1 per hour).