

Caring for Older Australians: Draft Report

Submission to the Productivity Commission

March 2011

The Health and Community Services Workforce Council Inc (Workforce Council) welcomes the *Draft Report – Caring for Older Australians*. In an overarching sense, the Workforce Council supports the direction of the Draft Report and recommendations, particularly in terms of the proposed integration and streamlining of access to and delivery of aged care services. Here, we take the opportunity to provide some additional information, particularly in relation to issues pertaining to recommendations that relate directly to the aged care workforce.

Introduction

The Workforce Council is an autonomous not-for-profit peak body that promotes and supports workforce planning and development in the health and community service industries in Queensland. We undertake a range of workforce planning and development initiatives with industry stakeholders across the health and community services industries. We facilitate more than forty collaborative networks, coalitions and alliances consisting of industry representatives from across Queensland to work in partnerships to build workforce capacity, prioritise regional workforce development needs and respond accordingly. We work with a range of government organisations, peak bodies and other key stakeholders groups to develop a sustainable systemic response to workforce issues. In addition, the Workforce Council occupies a unique position working closely with the education and training sector through a range of projects and initiatives to ensure industry workforce practices are supported by appropriate educational services, pathways and programs. In summary, the Workforce Council:

- Provides information and assistance to our industries and industry partners
- Provides advice to Government about a wide range of training, workforce development and sector specific issues and policies
- Supports innovative workforce development strategies
- Brokers quality professional development in regions across Queensland
- Advocates the value of our industries within the Queensland Community
- Develops workforce planning and development products and services

For more information about these workforce initiatives please go to http://www.workforce.org.au/our-workforce-initiatives.aspx

Catering for diversity – caring for special needs groups

The Workforce Council supports all recommendations to incorporate strategies, services and models that cater for a culturally diverse population. We note in particular, the express need to build the capacity of the *whole* aged care workforce to be culturally inclusive in all aspects of service delivery. This includes those in direct care roles as well as those in management, policy, planning and support roles. Historically, professional development and support available to the aged care (and broader health and community services) workforce has been targeted specifically at those in direct care roles who cater specifically for culturally diverse clients and/or geographic areas that have proportionately high culturally diverse populations. The proposed Australian Seniors Gateway Agency, pricing structures that take account of professional development costs and initiatives to build local indigenous workforce capacity represent significant steps toward ensuring that a holistic approach to the provision of culturally inclusive aged care services is taken.

Delivering care to the aged — workforce issues

The Workforce Council supports Draft Recommendation 11.1. Given the substantial role that informal carers already play in the provision of care and support for older people, it is essential that avenues be available for education and support that will assist them in their roles. It is important to emphasise that these opportunities should be highly responsive to the particular needs and quality of life outcomes for informal carers and the older person/people they support. In this respect, the Workforce Council proposes that consideration be given to the following:

a) Assessing the capacity of informal carers to provide ongoing support

Any assessment framework of this nature should interpret capacity in a broad sense taking account of all health and wellbeing outcomes for older people and informal carers alike. It is important to remember that the informal care workforce is shrinking and represents the same shrinking paid workforce that will be responsible for driving Australia's economy in the future. It is therefore essential that capacity assessments are not driven entirely by an agenda to delay entry of older people into formal aged care for the sake of managing system capacity limitations. While formal care system capacity is a critical issue, building the capacity and scope of the informal aged care system must remain a top priority. While the Workforce Council recognises that this is the wider intent of the Productivity Commission's draft report and findings, it must be reinforced in policy and assessment frameworks that "operationalise" informal care as an option for the care of older people.

b) Entitlements to services and assisted referrals for informal carers

The Workforce Council would support the introduction of a strategic initiative to ensure that informal carers receive education, respite, support and advocacy services to assist them in carrying out their roles. Not only must the opportunities be available, a streamlined system to access information on opportunities available and referrals is critical if informal carers are to be supported appropriately in their roles. We further note the need to ensure that efficient referral systems are in place to ensure that entry into formal care is pro-actively supported when care needs escalate and/or informal carers' circumstances change.

The Workforce Council supports the recommendation that informal carers have opportunities to access a broad range of services including education and training, respite, counselling and peer group support and advocacy services. As a facilitator of a wide range of workforce development initiatives across Queensland's health and community services, the Workforce Council has built up a significant evidence base surrounding the need to ensure that informal and formal workers receive a mix of skills development, professional development and other opportunities to support them in their roles. Formal training and/or access to one-off workshops are not sufficient to create and sustain positive change in practice.

It is also important to consider the suitability of existing formal education and training options for informal carers. Existing VET qualifications and administrative systems may create significant barriers for the informal care workforce to participate in VET. Further, informal carers are more likely to require education and training that is immediately relevant to the individual context of care. There is a need for the development of approaches to education and training, within or outside of VET, that is meaningful and relevant to this cohort of learners. Currently, there are skill sets in the VET Health Training Package and the Community Services Training Package that may be appropriate for some informal carers. However, in order to ensure that the approach to teaching and learning is appropriate for an informal care cohort, collaboration between Registered Training Organisations, local carer networks and other relevant stakeholders would be essential.

DRAFT RECOMMENDATION 11.2

The Workforce Council supports the recommendation that the proposed Australian Aged Care Regulation Commission take account of the need to pay competitive wages to nursing and other care staff when assessing and recommending scheduled care prices. This area is extremely fluid in the current climate. Cases before Fair Work Australia and the funding models for aged care staff need to be well-aligned before a pricing model is developed by the AACRC.

It is important to ensure that the wide range of factors impacting on service providers' capacity to pay higher wages is also considered when assessing and recommending scheduled care prices. For example, most providers, under current accounting standards, need to value beds and record them as assets. If the supply of beds is no longer restricted (other than ACAT assessment) then the current book value of beds may decrease and this will negatively impact on the overall bottom line.

DRAFT RECOMMENDATION 11.3

The Workforce Council fully supports the recommendation to promote skill development through an expansion of courses to provide aged care workers at all levels with the skills they need and to support pathways designed to retain workers in the sector. Current delivery could be increased through universities and VET registered training organisations to meet the demands. There is significant opportunity to develop enhanced approaches to skill development that are regionally accessible (eg: combination of face-to-face and on-line learning) and provide reinforcement through innovative approaches to professional development such as professional conversations, staff exchanges and action research. Skills sets for leadership roles and a variety of specific assisting roles (for example, podiatry assisting, medications assistance, dementia care, palliative care) are being delivered to augment the skills of existing workers. The continuation of this program could support this recommendation.

DRAFT RECOMMENDATION 11.4

The Workforce Council supports the recommendation that the Australian Government, in conjunction with universities and providers, fund the expansion of 'teaching aged care services' to promote the sector among medical, nursing and allied health students. Notably, it is also within the scope of VET providers as well as higher education providers (collectively known as the tertiary sector) to contribute to this initiative. Many staff in aged care organisations are VET educated. Collaboration between universities, VET and teaching aged care service providers would create a range of opportunities to provide flexible and complementary teaching and learning opportunities, including building capacity for 'on the job' teaching. Clinical placements that could be provided by teaching / aged care establishments to para-professional students would address industry concerns about the quality of training in the VET system by providing practical placements where staffing levels can support the teaching component of the placement. Without this collaboration, staffing levels of aged care facilities are likely to be insufficient for providing quality teaching on the job.

Further, it is worthwhile to note that currently a cohort of aged and community care stakeholders in Queensland are developing a centre of excellence for dementia in partnership with a university. This model may be useful to expand the number of services which can model practice and support communities of practice for para-professional staff as well as clinical practitioners.

DRAFT RECOMMENDATION 11.5

The Workforce Council agrees with the recommendation that the Australian Aged Care Regulation Commission, in assessing and recommending scheduled care prices should take into account the costs associated with volunteer administration and regulatory costs; appropriate training and support for volunteers and reimbursement of out-of-pocket expenses for some volunteers. In a more general sense, funding models that do not take account of the full cost of care including administrative, regulatory, workforce training and support and other overheads are not sustainable and have the ultimate outcome of contributing to workforce pressures.

Aged care policy research and evaluation

DRAFT RECOMMENDATION 13.1

The Workforce Council supports the recommendation that there should be a national 'clearinghouse' for aged care data. However, the Workforce Council questions whether this should be a role of the Australian Aged Care Regulation Commission or an independent body. An immediate concern is that the regulatory function of the Commission may blur the boundaries between data that must be provided for regulatory purposes, and other data that will assist in research and evaluation for the sake of understanding, evaluation and continuous improvement. Nevertheless, a consistent approach to gathering data and single portal for accessing data would be of substantial benefit to the Australian community. A balance of qualitative data and quantitative data would be particularly desirable.

The Workforce Council supports the development of outcomes-based data standards as a measure of service effectiveness. However, given the difficulties surrounding the quantitative measurement of outcomes that relate to the quality of life of older people in care, it is important to ensure that any quantitative measures are supported by the collection of qualitative data that provides depth and context to care and support outcomes.

Conclusion

Overall, the Workforce Council supports the direction of the Productivity Commission Draft Report — Caring for Older Australians. The ageing population is creating significant challenges for health and community services and a consistent, integrated and innovative approach to delivering services to older Australians is essential. In the context of the aged care workforce, it is important to ensure that current and future workforce is developed in ways that support its capacity to provide high quality care in ways that are responsive to the changing environment and needs of older Australians. Recommendations in the Draft Report provide a significant foundation for a holistic approach to aged care workforce planning and development. This, in turn, will create a strong foundation for the equitable provision of care for older Australians in the years to come.