

The National Report

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Aged & Community Services Australia



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Campaign for Care of Older Australians

ACSA has joined forces with ten other peak bodies and church-based providers to mount a campaign in the lead up to a 2010 Federal Election. As reported in *The Australian* on 18th November, the group has written to the Prime Minister and other politicians to notify them of the campaign which will focus on providing greater choice of services; ensuring that potentially disadvantaged people are catered for and placing aged care services on a sustainable financial footing. The campaign will commence in earnest in the New Year.

The Minister for Ageing, Justine Elliot, stated in response that aged care reform is under consideration as part of the Government's proposed overhaul of the aged care system. Opposition spokesperson, Margaret May, indicated that the Coalition would offer considerable extra funding to help older people stay at home and is considering relaxing current restrictions on user charging to ensure ongoing viability.

Review of the Aged Care Funding Instrument (ACFI)

Minister Elliot on 6 November released the terms of reference for the Government's review of the Aged Care Funding Instrument (ACFI).

She said the review had been promised by the Government when ACFI was introduced, so as to ensure the new scheme was delivering as it was designed to do. ACSA called for such a post implementation review in Greg Mundy's appearance before the Senate committee that reviewed the ACFI legislation.

"The introduction of the ACFI was a substantial change to the way care subsidies are allocated and we want to hear from aged care providers about their experience with this funding tool and any concerns that they may have with its operation," Minister Elliot said.

Drawing on existing information, data, and on public submissions, the review will examine the extent to which the new Aged Care Funding Instrument has achieved its objectives of:

- Better matching funding to the complex care needs of residents;
- Reducing the documentation created by aged care providers;
- Reducing the level of disagreement between providers and the findings of departmental validators.

The review will also examine:

- The funding levels of approved providers in particular of low care providers and providers in rural and remote areas;
- Access to appropriate care, especially for residents with special needs;
- If there are any gaps or anomalies in the ACFI in relation to care needs;
- If the ACFI appropriately recognises the roles of care providers in relation to the delivery of care needs; and
- The appropriateness of Schedule 1 of the Quality of Care Principles 1997 in determining the services to be provided to residents of aged care facilities with differing levels of care needs.

The review is expected to be completed by mid 2010. A discussion paper to inform submissions will be released in conjunction with a call for public submissions later this year.

The terms of reference have been developed in close consultation with the ACFI Industry Reference Group and are available at www.health.gov.au/acfi together with a document specifying the scope of the review.

Greg Mundy and Jill Pretty, CEO of ACS NSW&ACT represent ACSA on the reference group. ACSA has started planning its input to the review process and is obtaining feedback through State Associations.

Pay equity test case threatens aged care jobs and services

ACSA is concerned that a pay equity test case in the social and community services sector has the potential to cost jobs and result in service cuts,

CEO Greg Mundy says that the Minister for Workplace Relations Julia Gillard's heads of agreement with the Australian Services Union (ASU) - reached without consultation with relevant employers- to test pay equity provisions under the Fair Work Act, is cause for alarm.

ACSA is not opposed in principle to equal pay for equal work. But without a commitment from Minister Elliot to fully fund any increases, and a commitment from Minister Gillard not to proceed without that undertaking, wage parity will mean redundancies and cuts to services for older Australians he said.

If the Queensland decision, upon which the ASU application will be based, to award between 18 per cent and 37 per cent increases was to be adopted nationally, the costs would be prohibitive.

In 2009, paying salaries, meeting the costs of maintaining and building new facilities and providing elderly people with care and support in their homes, is already bordering on the impossible. The situation can only worsen if the Government does not first address the basics of aged care reform.

In the interim, with the test case set to proceed to Fair Work Australia, Minister Elliot must give an undertaking that the Government will meet the full costs of any pay rises which flow to the aged care sector

Clarification on Salary Sacrificing under the Fair Work Act

Minister Gillard's office has written to ACSA to clarify the issue of salary sacrifice arrangements under the Fair Work Act 2009. The ability to enter into arrangements for employees to salary sacrifice will continue under provisions that deal with authorised deductions from their salary under section 324 of the *Fair Work Act* in accordance with the relevant modern award or enterprise agreement.

This understanding of salary sacrificing arrangements under the Fair Work Act has also been confirmed by the Australian Government submission to Fair Work Australia regarding Award Modernisation.

This clarification is welcomed as it will bring relief to members who have salary sacrificing arrangements with their employees.

Care Missing from Government's Aged Care Agenda

Greg Mundy has commented publicly on delays in aged care assessments, which have been reported in the Adelaide media. He said that they are another example of the enduring concerns confronting elderly Australians and service providers.

The plight of the elderly in need of care and support was starting to hit home as it becomes increasingly apparent that services cannot keep up with demand.

The media's focus on aged care issues in South Australia, and recently in Western Australia, is very welcome and long overdue. Widespread community recognition and support for aged care issues is critical.

Funding for rural and regional aged care staffing

Minister Elliot on 16 November announced \$2.6 million to provide training for 4000 staff working in rural and regional aged care facilities. The announcement builds on the Government's recent \$19 million training initiative.

"Distance in rural and regional Australia can create challenges for staff and providers in accessing training courses. This training will support staff in smaller homes in rural areas attend training courses by paying for the course and the associated costs," she said.

The Support for Aged Care Training (SACT) short courses focus on specialised areas such as wound management, diabetes care, medication management, falls prevention and manual handling. This training will assist personal care workers to build on or work towards certificate level and enrolled nurse qualifications.

Stewart Brown Business Solutions Aged Care Survey

Aged care facilities across the country are being forced to draw on their savings just to keep going, according to the latest aged care survey from Stewart Brown Business Solutions. The report examined the financial performance of a record 333 facilities over the 12 months leading up to 30 June, 2009.

The average total net result across the participating facilities was a loss of 35 cents per bed each day. Stewart Brown's aged care survey manager, David Sinclair said it was the first time in his memory that the average facility was eating into its savings. "That doesn't mean that they are not making a cash surplus," he said. "If you have a write -back of depreciation and so forth, you can still be making a cash surplus but this is certainly not a good trend."

Although high care facilities involved in the survey saw some improvement in operating results at the beginning of the financial year, they were unable to sustain the better outcomes. The average net operating result for high care facilities was down \$2.60 per bed day to a loss of \$9.68. The average low care facility lost \$5.97 per bed day.

Only 24 of the 110 high care facilities achieved an operating profit and just 88 of the 223 low care facilities managed to break even or better. "The cost of care has been increasing at a greater rate than the income which is why results have been declining," said Mr Sinclair. "And administration costs and catering costs are the two other major non-care costs that have gone up."

Greg Mundy commented that the report confirmed the urgent need for a lasting solution to the problem of adequate care subsidies and sufficient access to capital. We are now seeing the capacity of residential care providers being eroded. The longer this goes on, the harder it will be to recover.

NEW (eRA) electronic Resident Agreements

Special Introductory Offer (until 31 December 2009)

Revolutionary software to generate your resident agreements in just minutes is now available to ACSA members at the discounted price of \$255*.

You can now purchase licenses to access electronic resident agreements for Low Care, High Care, Extra Service & Respite which include automatic online updates, ensuring your agreements meet the latest legal requirements at all times. This hassle-free software generates agreements that include automatic calculation of daily fees, bond repayments, and related charges. ACSA in conjunction with e-tools and Kennedy Strang Legal Group have developed this product to save you time, money and the embarrassment of having out-of-date agreements!

Single, stand-alone, licences are available as is a network version for multi user sites. A special bulk purchase rate for 10 or more licenses is also available.

To find out more information or access an order form please go to:

www.agedcare.org.au/PUBLICATIONS-&-RESOURCES/Resident%20Agreements.html to go to the ACSA website or contact e-tools at info@e-tools.com.au. Alternatively if you would like to arrange an online demonstration of the software, contact Mark Kong at e-tools on (03) 9571 8611. Order now to save money!

**The \$255 price is for a single licence and is available to ACSA members until 31 December 2009. The price for a single licence after 31 December 2009 will be \$299.*

Dementia, Lesbian and Gay Men

Alzheimer's Australia, ACON – Australia's largest community-based gay, lesbian, bisexual and transgender (GLBTI) health and HIV/AIDS organisation - and Aged and Community Services Association of NSW & ACT have released a new discussion paper: '***Dementia, Lesbian and Gay Men***'. The paper was launched by the Hon. Michael Kirby, former Justice of the High Court of Australia in Sydney on 19 November.

The impact of dementia on the GLBT community is already beginning to present itself. Although lesbians and gay men face many of the same challenges around dementia as heterosexuals, such as advanced care planning, assessment, community or residential care arrangements, many also face additional challenges such as social isolation, relationship recognition and navigating a complicated legislative environment.

Alzheimer's Australia's discussion paper, '***Dementia, Lesbian and Gay Men***', provides practical advice on the issues many lesbians and gay men with dementia and their carers may face. In addition, it is a valuable resource for practitioners working in health care and related fields. The paper is available on Alzheimer's Australia's web site. www.alzheimers.org.au

Australia's Welfare 2009

While most Australians enjoy a good standard of living, many are struggling to care for people with a disability, or with issues related to ageing, homelessness, children and families, according to the biennial report *Australia's Welfare* released on 17 November by the Australian Institute of Health and Welfare (AIHW), in conjunction with a one day seminar at which Greg Mundy spoke.

Greg reported that those over 85 years were now the benchmark for assessing aged care needs and supply. There has been a 61 % increase in their numbers in the past 10 years and by 2050 they would make up 5 % of the total population.

While the supply of aged care places has increased slightly over the past 10 years compared with the population aged over 70, it has decreased compared with the 85 and older population. The complexity and care needs of those in care, is rising rapidly with 76% of residents being high care. However data from the ACFI shows that only 14% of residents have high needs in the Complex Health Care domain. He also pointed out the growing diversity in background and needs of older Australians. For more information go to: www.aihw.gov.au

Department of Health and Ageing Annual Report

This report has been tabled in Parliament in accordance with the Requirements for Annual Reports. Copies may be downloaded at www.health.gov.au/internet/main/publishing.nsf/Content/publications-D

An acerbic comment on the report came from health economist Professor Gavin Mooney, who wrote the following in the Crikey website last week.

“The Department of Health and Ageing has just published its Annual Report for 2008-09. It is not fascinating reading but then, to be fair, few annual reports are.

But in one respect it *is* fascinating. This is in its worshipping at the altar of performance indicators. What is concerning is not so much whether they have met their various PIs. It is the seeming obsession with such indicators and the nature of them. They are many, so let me focus on just a few.

On all of the "outcomes" (read programs) of which there are 15, there is for each a PI that is "Quality, relevant and timely advice for Australian government decision-making, measured by ministerial satisfaction". The so called reference point/target is "ministerial satisfaction".

In all instances, the judgment is that "ministers were satisfied". This is, thus, successful performance. But I wonder ... is this indicator used in all programs in all departments? And has there ever been a time when it was reported that the minister was not satisfied? And is it the case that all ministers religiously go over these reports and judge whether they are satisfied or not?

For all outcomes there is a PI, which is to keep the actual spend within 0.5% of the forecast. So often, sadly, the DOHA fails ... Now the logic here is that failure is just as bad if it underspends or overspends. This leads to odd situations. In program 5.2, for example, (Primary Care Financing, Quality and Access) all indicators are said to be met or substantially met, yet the program is (naughtily) more than 0.5 % underspent -- it was cheaper than forecast. That sounds good to this economist but, no, this is deemed to be bad as it is more than 0.5% below the target. If more had been spent so that the underspend was 0.5% or less then that would have meant success.

For a full read go to: <http://www.crikey.com.au/2009/11/11/the-rise-of-meaningless-management-speak-is-pi-in-the-sky/>

Medicare Aged Care Online Claiming Website Training Environment

Medicare Australia has announced details of its improved Aged Care Online Claiming website training environment. The new training environment replaces the Aged Care Funding Instrument (ACFI) training environment.

The Aged Care Online Claiming website training environment enables facilities to:

- familiarise themselves with the Aged Care Online Claiming website
- access the Care Recipient Profile
- view residential and community care web forms
- practise registering, updating and deleting residential and community care web forms
- view electronic Aged Care Client Records (eACCRs)
- view claims and payment statements.

User IDs and passwords are needed to use the training environment as well as care recipient and service data. This information is on the Aged Care Online Claiming website training environment section of the Medicare Australia website www.medicareaustralia.gov.au/aged.

To learn more about the training environment go to www.medicareaustralia.gov.au/aged or call **1800 195 206*** and select option 1 and ask to talk to an Aged Care Business Development Officer.

Medicare Australia has a new email address for you to contact Aged Care Business Development Officers (BDOs). Their BDOs will:

- give onsite service presentations and training
- provide assistance with online claiming registration
- help with start up queries
- provide PKI certificates
- provide administration and general support.

You can email BDOs at ac.online.support@medicareaustralia.gov.

Fringe Benefits Tax and Christmas Parties

The Tax Office has updated its fact sheet *Fringe benefits tax and Christmas parties* to help explain the FBT implications of Christmas celebrations. It is available, along with more information on FBT, from the Tax Office website: www.ato.gov.au/fbt.

Final Reminder Dementia Community Support Grants - Round Three

Applications for Round Three of the Dementia Community Support Grants opened on 17 October 2009. Applications close at 2pm 3rd December 2009. These grants aim to raise awareness about dementia in local communities and encourage innovative local services for people with dementia, their families and carers. These Grants are for up to 12 months in duration with funding of up to \$50,000 per Grant. Innovations include dementia sensitive facility design.

For more information on the Grants program including eligibility criteria and how to apply go to the Tenders and Grants page on the Department of Health website at <http://www.health.gov.au>. Please note the grants section is on the lower part of the web page.

Mistakes and Unintended Consequences - A Safety Net Approach

Commonwealth Ombudsman Professor John McMillan today invited submissions on this issues paper dealing with unintended consequences when legislation establishing government programs is implemented. Some of the questions being explored by the Ombudsman include:

- What measures do agencies use when an error has been made or the application of legislation has harsh and unforeseen consequences?
- Do agencies monitor the administration of legislation to assess whether a safety net power in the legislation should be used?
- What limitations or safeguards should be placed on the exercise of power under a safety net provision?
- Should agencies be able to vary a decision or action to comply with a recommendation of the Ombudsman?
- Do agencies do enough to make people aware of relevant safety net discretions?
- Professor McMillan is conducting targeted consultations with key stakeholders on these and related matters.

His issues paper, *Mistakes and unintended consequences—a safety net approach*, including details for providing submissions, is available from www.ombudsman.gov.au. Interested parties are invited to make written submissions by 29 January 2010.

Australasian Journal on Ageing

Australasian Journal on Ageing (AJA) September 2009, vol 28, issue 3, has now been published and sent to subscribers. AJA is the peer reviewed journal co-published by ACSA and the Australian Association of Gerontology, Council on the Ageing (COTA), and the Australian and New Zealand Society for Geriatric Medicine. Main articles of interest include:

- What makes a community age-friendly: A review of international literature
- Management and organizational barriers in the acquisition of computer usage skills by mature age workers
- A 4-step fall risk screening tool for subacute and residential aged care: the first step in fall prevention, and
- Future research on dementia relating to culturally and linguistically diverse communities.

Subscription details for ACSA members are on the website under publications:
www.agedcare.org.au

Public Health Expenditure in Australia 2007-08 Report

Australia's spending on public health activities - those of a preventive, protective or health promoting nature - grew by 21% in 2007-08, according to this report released on 13 November by the Australian Institute of Health and Welfare (AIHW).

The report shows total expenditure on public health was \$2,159 million in 2007-08, or \$102 per person on average, and \$444 million on more than in the previous year.

The public health activities that recorded the highest expenditure in 2007–08, were immunisation (\$704 million or 33% of total public health expenditure), selected health promotion (\$367 million or 17% of total expenditure) and cancer screening activities such as breast, bowel and cervical screening (\$290 million or 13%).

The Australian Government provided the largest share of funding for public health in 2007 08, contributing almost \$1,400 million or 63.6% of the total funding.

In 2007–08, the highest average expenditure per person on public health activities occurred in the Northern Territory and the Australian Capital Territory. Their average expenditure was estimated at \$373 and \$140 per person, respectively, compared with the national average of \$102 per person.

www.aihw.gov.au/publications/index.cfm/title/10952

Better Access to Prescription Medicine Information

Publication of prescription medicine Product Information and Consumer Medicine Information documents has begun on the Therapeutic Goods Administration website. Starting with over 200 prescribed medicines, others will be added progressively until full coverage is achieved early next year.

Product information and Consumer Medicine Information can be found at:

<http://www.tga.gov.au/meds/picmi.htm>

Medicines Use Issues for Type 2 Diabetes Patients

The National Prescribing Service (NPS) and Diabetes Tasmania have launched a new educational DVD aimed at people with type 2 diabetes, which addresses medicines use issues.

The DVD is designed to be used by health professionals and community organisations when discussing the management of type 2 diabetes with newly diagnosed patients.

The DVD comprises 11 segments which cover issues including, the types of medicines used to manage type 2 diabetes, the best ways to manage medicines, and what patients should discuss with their healthcare providers. It is also being produced in Cantonese, Mandarin and German as there is a high prevalence of type 2 diabetes within these ethno-specific groups in Australia. The 11 segments have also been made available at <http://www.nps.org.au/type2diabetes>.

Indigenous Dementia Web Resource

A new online 'one-stop info-shop' containing information for people working, studying or interested in dementia among Indigenous Australians is now available.

The Australian Indigenous HealthInfoNet web resource includes policies, strategies, program and project information, publications and health promotion resources. Further information is available at www.healthinonet.ecu.edu.au/chronic-conditions/dementia

Private Ancillary Funds Trustee Handbook

The Assistant Treasurer, Senator Nick Sherry, has launched Philanthropy Australia's *Private Ancillary Funds Trustee Handbook*.

Philanthropy Australia, the peak national body for the philanthropic sector, has developed this comprehensive Handbook to assist current and future fund trustees to operate successfully under the new regulatory management regime announced by the Rudd Government.

The Handbook contains information that will help trustees determine their roles and duties, including checklists and other information helpful to maintaining compliance. The new guidelines are available at <http://www.comlaw.gov.au>.

Superannuation Clearing House Service

The Government will deliver its free superannuation clearing house service for small business through Medicare Australia.

The clearing house service will be available for small businesses with less than 20 employees from July 2010.

The super clearing house will cut the red tape burden by enabling small businesses to pay their superannuation contributions electronically to a single location.

Health Research Funding Could Benefit Older People

Minister for Health and Ageing Nicola Roxon and Federal Parliamentary Secretary for Health, Mark Butler announced on 29 October \$487 million funding to boost the nation's health and medical research effort.

A project which could benefit older Australians include \$427,700 to Dr Rachel Neale from Queensland Institute of Medical Research to examine if vitamin D supplementation reduces mortality for older adults.

New Palliative Care Resources

Minister Elliot on 19 November launched two new publications developed by Catholic Health Australia (CHA) to assist staff and volunteers in aged care homes who provide care and support for palliative care patients.

Provision of Palliative Care in Catholic Health and Aged Care is for staff in aged care facilities and *Catholic Palliative Care Services* is for consumers. To obtain a copy go to: www.cha.org.au/site.php?id=41

Dementia Drugs Unnecessary: UK Report

The ABC's PM program reported that in Britain a review of the use of anti-psychotic drugs for dementia patients has concluded they are largely unnecessary and sometimes deadly.

The review ordered by the UK Government ministers' concludes around 1,800 deaths are linked to the drugs. The anti-psychotic drugs in question were originally developed to treat schizophrenia but over the past 30 years they've been increasingly used to subdue disturbed or violent dementia patients. The report says of the 180,000 patients given the drug, just 36,000 actually benefited.

The report has also been picked up in other Australian media but given the very different regulatory regimes in place here around pharmaceuticals the extent of any problems is not known.

<http://www.abc.net.au/am/content/2009/s2741641.htm>

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