



## MEDIA BRIEF: PUTTING HEALTH CARE BACK INTO AGED CARE

Older people have the same right to quality health care as any Australian. Sadly, this right is often not realised, as the Royal Commission has shown. Furthermore, this is projected to become worse as our population ages and demand for aged care and health care services increase.

This brief describes the report by the Australian Medical Association (AMA) *Putting health care back into aged care*. The AMA's recommendations align with the Royal Commission's views for genuine person-centred care, however, the AMA recommendations differ in some aspects of achieving this. The full report is available from the AMA and can be downloaded from the AMA website.

### Key issues

- Disconnect between the aged care and health care systems;
- Fragmented and confusing system leads to poor continuity of care for older people;
- Contact with qualified medical professionals (GPs and Registered Nurses) is too limited;
- Poor health care in aged care results in avoidable hospital admissions of older people that are frequent and expensive;
- Older people end up over-medicated or inappropriately medicated;
- Many older people could continue to live at home if home care was properly resourced;
- Waiting lists for Home Care Packages are too long.

### Potential savings

The table below shows AMA's cost estimate of avoidable hospital admissions, presentations and stays from older people in the community and in nursing homes. These savings would be achievable if AMA's vision for aged care reform was implemented. (modelling is provided in full report.)

AVOIDABLE PUBLIC & PRIVATE HOSPITAL ADMISSIONS, PRESENTATIONS AND STAYS		POTENTIAL SAVING (\$M)	
ACTIVITY	ANNUAL WASTE 2020-21	ANNUAL 2020-21	OVER 4 YEARS TO 2024-25
Potentially preventable hospitalisations from nursing homes	27,569 hospitalisations or 159,693 patient days	\$312	\$1,430
Potentially preventable hospitalisations from the community (people aged 65 and over)	379,917 hospitalisations, or 1.9 million patient days	\$3,737	\$18,199
Non-admitted ED presentations from nursing homes	49,300 presentations	\$112	\$497
Hospital re-presentations from nursing homes (transport cost only)	18,800 re-presentations	\$31	\$138
People waiting in hospital for a place in a nursing home	232,000 patient days	\$197	\$887
<b>TOTAL</b>		<b>\$4,388</b>	<b>\$21,151</b>
		<b>\$4.39 BILLION</b>	<b>\$21.15 BILLION</b>

*Summary of potential savings from avoidable public and private hospital admissions, presentations and stays from older people in the community and in nursing homes*

# RECOMMENDATIONS

To achieve the necessary solutions, the AMA makes the following recommendations:

1. Increase Medicare rebates for nursing home attendances by GPs by 50 per cent to compensate for the additional time and complexity involved in comparison to a GP consultation in their own rooms. (modelling and detailed costing provided in full report)
2. Introduce MBS telehealth items for phone calls between the GP, nursing home staff and relatives.
3. Introduce a Medical Access Aged Care Quality Standard for nursing homes.
4. Introduce Care Finders who work closely with GPs to coordinate both health and aged care services.
5. Introduce hospital aged care outreach teams in all local health networks, in coordination with a patient's usual GP.
6. Ensure that Aged Care Assessment remains with State health services which involve medical specialists, coordinating and collecting information from the older person's usual GP.
7. Mandate minimum staff-to-resident ratios in nursing homes.
8. Mandate 24/7 on site Registered Nurse availability in nursing homes, and according to the level of residents' needs.
9. Mandate a minimum qualification for personal care attendants that includes basic health care, and continuous training of the aged care workforce with specific funding attached for training.
10. Ensure interoperability between GP clinical and aged care software systems, including My Aged Care and My Health Record.
11. Ensure that Home Care Packages are available to all those who need them, at the level of their need and a maximum of three months following the assessment. (modelling and detailed costing provided in full report)

The AMA looks forward to working with the Australian Government further as it reforms the aged care sector in response to the Royal Commission.

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The full report, *Putting health care back into aged care* is available from the AMA. [LINK]



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