



## **AGED CARE IN CRISIS – CARE CAN'T WAIT**

### ***Doctors and Nurses Unite to Put Care Back Into Aged Care***

The Australian Medical Association (AMA) and the Australian Nursing and Midwifery Federation (ANMF) are today jointly calling on the Federal Government to act now to guarantee quality and safety in aged care, and not wait till the conclusion of the Royal Commission in late 2020 to deliver much-needed new funding and reforms.

The Royal Commission into Aged Care Quality and Safety has already identified serious and dangerous shortcomings in the system, and more concerns will surface before the Commission delivers its final recommendations in November 2020.

The AMA and the ANMF fully support the work of the Royal Commission, but older Australians in aged care, and their families and loved ones, cannot wait another year for Government action to fix aged care.

Care can't wait.

The AMA and the ANMF want the Government to take urgent measures to improve the situation in aged care, and bring comfort and confidence to our parents and grandparents who have given so much to their families and the communities throughout their lives.

The Government can make immediate and effective improvement to aged care, especially with ensuring a safe and quality skills mix of medical, nursing, and care staff, by providing:

- mandatory minimum staff-to-resident ratios, including ensuring sufficient skilled nurses in residential aged care facilities (RACFs);
- increased GP aged care Medicare rebates for patients to facilitate enhanced medical practitioner care of aged care residents; and
- expanded home care investment to allow more older people stay longer in their own homes and relieve pressure on residential aged care services.

AMA President, Dr Tony Bartone, said that older Australians have the right to live in dignity and have safe and appropriate aged care services provided to them.

“We have to put care back into aged care,” Dr Bartone said.

“Older Australians deserve to have the same opportunity to have the best quality of life as everyone else, and the same access to high quality medical and nursing care they have enjoyed throughout their long and productive lives.

“Standards of care for our elderly should not be compromised through restriction of resources or the budget bottom line.

“The Government cannot stand by and watch aged care providers continue to provide poor quality care because they are deemed ‘too big to fail’.

“Ignoring the health and care needs of older Australians will lead to an increase in avoidable hospitalisations and excessive costs to the health system.

“The aged care system urgently needs a safe and quality skills mix of medical, nursing, and care staff. The increased presence of doctors as part of the care team is vital. The Government must act now,” Dr Bartone said

ANMF Federal Secretary, Annie Butler, said that older Australians deserve affordable, high-quality aged care services, with timely access to a range of appropriate health professionals, and in residential facilities, with care delivered by the right numbers of professionally trained nurses and care staff.

“They do not deserve the pain and suffering too many are currently experiencing nor do they deserve to continue to be ignored by their country’s Government, which is meant to ensure their safety,” Ms Butler said.

“The often-horrific evidence presented to the Royal Commission and stories revealed in recent *Four Corners* and other media programs are simply confirming what ANMF members have known for many years and are reporting to us with increasing despair.

“Underpinning so many of the problems that are being exposed across the aged care sector is systemic, chronic understaffing, leading to unacceptable instances of neglect, abuse, and too many preventable deaths.

“We can’t wait for the Morrison Government to act on recommendations of the Royal Commission to stop the suffering of our elderly; we simply cannot allow the Government to continue to sit idly on the sidelines and watch the extent of this suffering unfold.

“There is no need to wait, the Government can start taking action now.

“We need more nurses and more doctors in aged care. Legislated minimum staff ratios in nursing homes are needed urgently.

“Registered nurses must be available 24 hours a day, and there must be enough well-trained care workers to support the delivery of quality care.

“General practitioners must be supported to attend nursing homes to ensure quality medical care for elderly Australians.

“We also need to guarantee that taxpayer-funded subsidies received by aged care providers go directly to the provision of care to ensure safe and best practice care for every elderly Australian living in nursing homes.

“The Government can start on this immediately by requiring aged care providers to publish the staffing ratios in their facilities and to transparently report on their use of publicly-funded subsidies. The Government can then determine where additional funding is needed and ensure that it is provided.

“While a range of actions and improvements are needed to improve the safety and quality of care across Australia’s aged care sector, it is certain that safe, quality care cannot be guaranteed without mandated minimum safe staffing levels,” Ms Butler said.

## **Summary of reforms proposed by the AMA and the ANMF**

### **General funding increase**

An increase in funding for aged care and increased transparency in the use of funding. Insufficient funding is the reason behind qualified staff shortages. A lack of registered nurses means that medication mistakes are made. Insufficient funding is why the food is terrible. Insufficient funding is why facilities aren't purpose-built.

### **Staff-to-resident ratios**

Minimum mandatory staff-to-resident ratios, which reflect the level of care need of older people, should be introduced in RACFs

Registered nurses should be available on-site, 24 hours a day in RACFs to ensure older peoples' medical needs are adequately met, including the appropriate administration of medicines. That way unnecessary hospitalisations, unnecessary transfers and extended hospital stays would be avoided.

### **GP Medicare rebates**

But we can't just regulate our way out of this. We need to invest our way out as well. We need to increase the number of GPs working in aged care. The number of GPs willing to work in the aged care space has been reducing due to low Medicare rebates and the declining proportion of registered nurses in aged care.

Medicare rebates need to increase in excess of 50 per cent to begin to adequately compensate for the additional time and complexity involved in comparison to a GP attendance in their own consulting rooms.

### **Home care packages**

Government needs to increase the funding for home care packages (HCPs), most importantly for Level 4 packages. We know that many older people prefer to age in their own homes or community. For this reason, ensuring access to primary, home and community care should be a priority.

As of June 2019, there were 119,524 older people waiting for their assessed home care package.

The Royal Commission into Aged Care Quality and Safety reported that 16,000 people died waiting for a home care package. Waiting times are more than 12 months. This is not good enough.

A greater availability of home care packages will defer and prevent the need for more complex care in RACFs and hospitals.

If the government really wanted to do something, they would invest in HCPs and literally save money, while improving the situation for ageing Australians.

## **Background:**

- Australia is facing an ageing population with more chronic, complex medical conditions than ever before. According to the AIHW, it is estimated that by 2039 Australia will have 4.7 million people over the age of 70, two million more than currently, and over one million people over the age of 80.
- According to the latest AIHW Home Care Report, there are currently 119,524 people waiting for a home care package at their approved level. Of this, 72,062 people are waiting for a home care package at their approved level who have **NOT** been offered access to lower level package.
- Anyone approved for a Level 4 package, meaning highest level of need, on average waits over 12 months to have access to a lower level (level 2) package. Highest level of need means the older person needs assistance with activities of daily living such as nursing, medication, feeding, dressing, cleaning and mobility. A level 2 home care package hardly meets their needs.
- The Royal Commission into Aged Care Quality and Safety reported that 16,000 people died waiting for a home care package in 2017-18. And 87.5 per cent of those approved for a level 4 package are also approved for residential aged care.
- At 30 June 2018, of people in permanent residential aged care, 31 per cent had high care needs across all three Aged Care Funding Instrument (ACFI) domains, 52 per cent had a dementia diagnosis, and 86 per cent had at least one behavioural or mental health condition diagnosis.
- According to research, the average in residential aged care is 9.75 medications per resident. Yet 80 per cent of medication administration and management in aged care is done by non-registered staff.
- From April-June 2019 in residential care, medication management was the third most frequent outcome not met by providers in audits, and the most frequent complaint received by the Aged Care Quality and Safety Commission.
- Despite the high care needs of older people living in RACFs, there has been a decline in the proportion of full-time equivalent registered and enrolled nurses in RACFs. This must be reversed.

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