

## **Summary Information for the Network regarding The Productivity Commission's *Caring for Older Australians* final report August 2011**

### **Overview**

The Productivity Commission's (PC) final inquiry report into the aged care system - *Caring for Older Australians* - was released publicly on Monday August 8. A full copy of the report's two volumes can be accessed here: <http://www.pc.gov.au/projects/inquiry/aged-care/report> It includes fifty eight recommendations across the broad spectrum of the aged care sector with the following three major areas of focus:

1. Establishing a simplified "Gateway" to aged care services and assessments on a regional basis
2. Structural reform including the establishment of a new independent regulatory agency – the Australian Aged Care Commission (AACC)
3. Reform to Aged Care financing arrangements

Within these areas, the report also highlights the importance of patient choice, patient centred care, enablement and ageing in place.

### **Key report recommendations of importance to the Network**

The main report recommendations of relevance to the Network include:

- The proposal to establish a gateway agency to provide access to information and coordinated services at a regional level, with operational regions defined in reference to Medicare Locals and Local Hospital Networks (Recommendation 9.1 see also Volume 2 chapter 9, page 129)
- The need to review the Medicare rebate for GPs undertaking visits to older people in their homes and in Residential Aged Care Facilities (Recommendation 10.2, see also Volume 2 chapter 10, page 225)

- Greater awareness training and education for both consumers and aged care staff/providers regarding advanced care directives and their inclusion in proposed electronic health records (Recommendation 10.4 see also Volume 2, chapter 10, page 232)

Further information about these and other recommendations of particular relevance as well as implications and/or further action for the Network are provided below:

### **The Australian Seniors Gateway Agency**

#### ***Recommendation 9.1***

- The Australian Government should establish a simplified gateway agency to provide streamlined access to aged care information, services, needs assessments, care coordination and referral via a regional service structure. Initial care coordination services would be provided, where appropriate and requested, as part of the Gateway. Further care coordination and case management, which may form part of the elderly Australian's entitlement, would be provided in the community or in residential aged care facilities (RACF) by an individual's approved provider of choice.
- The Gateway would operate via a network of regional centres to enhance local responsiveness, with operational regions defined with reference to those for Medicare Locals and/or Local Hospital Networks (preferably Medicare Locals). These regional centres would offer the full range of information, needs assessment and care coordination services and their operation may be subcontracted to third party operators including other government agencies or non-government or private entities.

### **Health service remuneration**

#### ***Recommendation 10.2***

- The Medicare rebate for medical services provided by GPs visiting RACFs and people in their homes be independently reviewed to ensure that it covers the cost of providing the service.

#### ***Recommendation 14.1***

- The Australian Aged Care Commission, when assessing and recommending scheduled care prices, should take into account the need to pay fair and competitive wages to nursing and other care staff delivering approved aged care services and the appropriate mix of skills and staffing levels for the delivery of those services.

**Recommendation 9.6**

- The Australian Government should set scheduled fees for the delivery of certain sub-acute services that are delivered in a RACF. These fees should be cost reflective and, in general, lower than the scheduled fee for the equivalent service provided in a hospital.

**Prevention and reablement****Recommendation 9.2**

- An intensive reablement service should be introduced to give greater focus on independence, rehabilitation and restorative care. Eligibility and entitlement for this service should be assessed by the Gateway Agency.

**In-reach service delivery****Recommendation 9.5**

- Australian and state/territory governments should promote the expanded use of in-reach services to RACFs and the development of regionally or locally-based visiting multi-disciplinary health care teams (including from oral and mental health disciplines and dementia care specialists as appropriate).

**Advance care planning****Recommendation 10.4**

- Providers of aged care services should have staff trained to be able to discuss and put in place advance care directives.
- Funding should be made available for community awareness education about advance care planning.
- Advance care planning directives should be included in the proposed electronic health records.

**Workforce skills development****Recommendation 14.2**

- The Australian Government should promote skill development through an expansion of accredited courses to provide aged care workers at all levels with the skills they need, including: vocational training for care workers entering the sector and looking to upgrade their skills adequate tertiary nursing places to meet the anticipated demand from the health and

aged care sectors advanced clinical courses for nurses management courses for health and care workers entering these roles.

***Recommendation 14.3***

- The Australian Government, in conjunction with universities and providers, should fund the expansion of 'teaching aged care services' to promote the sector and provide appropriate training for medical, nursing and allied health students and professionals.

**Policy research and evaluation**

***Recommendation 16.1***

- To encourage transparency and independence in aged care policy research and evaluation, the proposed Australian Aged Care Commission should be responsible for ensuring the provision of a national 'clearinghouse' for aged care data. This would involve:
  - establishing a central repository for aged care data and coordinating data collection from various agencies and departments
  - making these data sets publicly available in a timely manner for research, evaluation and analysis, subject to conditions that manage confidentiality risks and other concerns about potential data misuse.
- To maximise the usefulness of aged care data sets, reform in the collection and reporting of data should be implemented through:
  - adopting common definitions, measures and collection protocols
  - linking databases and investing in de-identification of new data sets
  - developing, where practicable, outcomes based data standards as a better measure of service effectiveness.
- Research findings on aged care and on trial and pilot program evaluations, including those undertaken by the Department of Health and Ageing, should be made public and released in a timely manner.

## **Where to from here: Implications for the Network and further action**

The government is now preparing its response to the Productivity Commission's report and is undertaking further consumer consultation in this regard. Government has clearly stated that at this stage nothing in the report has been ruled in or out – although in launching the Report, the Prime Minister made it clear that government has not ratified the \$3 billion in savings that the Productivity Commission's report refers to and emphasised that the focus of their response will be on improving the Aged Care system rather than on cutting costs.

Minister Butler has also made it clear that Aged Care will be a priority for the Government in its next term and that government will be looking to make headway on this matter in the near future.

Working with the Aged Care sector will be a key role for Medicare Locals as they work with an increasingly broad stakeholder group and start to develop regional health solutions to address local population health priorities. The Gateway Agency in particular has potential for close and strong working relationships with MLs. There is currently little detail about the Gateway Agency however AGPN will continue to work with Government and the Department to promote the close working of the Agency with MLs

To address issues in Aged Care and determine how best MLs can work with this sector AGPN is establishing a Network working group in Aged Care. AGPN will also continue to work closely with this sector at the National Level through its participation in the National Aged Care Alliance (NACA) and will continue to promote the role of MLs in Aged Care through its submission to the federal budget as well as in more general submissions.

For further information on the Report please contact Scott Brown at: [sbrown@agpn.com.au](mailto:sbrown@agpn.com.au)

A copy of AGPN's media release on the Report is available here:

[http://www.agpn.com.au/\\_data/assets/pdf\\_file/0009/39186/20110808\\_med\\_productivity-commission-aged-care.pdf](http://www.agpn.com.au/_data/assets/pdf_file/0009/39186/20110808_med_productivity-commission-aged-care.pdf)