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The Parliament of the Commonwealth of Australia

# FUTURE AGEING

## **Report on a draft report of the 40<sup>th</sup> Parliament:**

Inquiry into long-term strategies to address the ageing of the Australian population over the next 40 years

House of Representatives  
Standing Committee on Health and Ageing  
41<sup>st</sup> Parliament

March 2005  
Canberra

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ISBN 0 642 78500 7



# Contents

Foreword.....v

Membership of the Standing Committee  
on Health and Ageing - 41<sup>st</sup> Parliament.....ix

Draft report for the 40<sup>th</sup> Parliament.....xi





## Foreword

In the 40<sup>th</sup> Parliament, the House of Representatives Standing Committee on Ageing inquired into *the long-term strategies to address the ageing of the Australian population over the next 40 years*. The election was called in 2004 before a report was completed for tabling.

The House of Representatives Standing Committee on Health and Ageing, formed in the 41<sup>st</sup> Parliament, resolved to table the draft report from the inquiry without amendment or reopening the inquiry. Recommendations are not made in this publication, and thus a Government Response is not anticipated. To aid readers and future researchers, the committee inquiry process details are summarised and some conclusions are shared.

During the 40<sup>th</sup> Parliament inquiry a total of 192 submissions and 88 exhibits were received. The committee held 18 public hearings across the country (Adelaide, Alice Springs, Brisbane, Broken Hill, Canberra, Central Coast, Coffs Harbour, Darwin, Dubbo, Lake Macquarie, Melbourne, Perth, Sydney, and Western Sydney), undertook six site inspections to aged care facilities, a respite centre, the University of the Third Age, and four organisations at Tullamore NSW involved in work with aged people. From the public hearing program, the committee took evidence from 100 witnesses representing 88 organisations or themselves.

To maximise community opportunities for contributions to the inquiry, the committee also held six community forums associated with five of the public hearings (Gold Coast, Norah Head, Charlestown, Coffs Harbour, Alice Springs, Broken Hill). A total of 127 statements were made. The committee also received 17 private briefings. A report was drafted.

Since the report was drafted last Parliament, and the election announced in August 2004, there have been a number of Government policy announcements and the new committee acknowledges these initiatives might supersede some conclusions made in the earlier drafted inquiry report.

On 13 August 2004, the Minister for Ageing Julie Bishop announced a new taskforce to ensure full delivery and oversee the remaining aged care Government initiatives that were part of the \$2.2 billion Budget package, including:

- A new Internet-based service to provide information on the quality of care in aged care homes, as well as information on fees, services and workforce;
- An e-commerce platform for residential aged care payments and simplified resident classification scale, reducing paperwork for aged care staff and increasing efficiency in the information exchange between government and providers; and
- A provider-funded guarantee fund to further protect residents' bonds.

On 9 November 2004, the Minister for Ageing Julie Bishop announced the Government was taking applications for funding to train the aged care workforce:

- \$7.4 million for education providers to provide up to 5,250 Enrolled Nurses with training to administer medication; and
- \$56 million for vocational education and training opportunities for up to 15,750 aged care workers to upgrade their qualifications to Certificate III, Certificate IV and Enrolled Nurse level.

These measures were part of \$150 million funds the Australian Government was spending on education and training opportunities for aged care workers, including scholarships for rural and regional Australians wanting to study aged care, and new undergraduate nursing places at university.

On 18 November 2004, the Minister for Ageing Julie Bishop also announced and introduced legislation to enable older Australians to have more choice in health care and to make private health insurance more affordable. The private health insurance rebate is to be increased to 35% for people aged 65-69 and to 40% for people aged 70 and over, thus making private health insurance premiums \$100 to \$200 per year cheaper for approximately one million older Australians.


In the Governor-General's speech at the opening of the 41<sup>st</sup> Parliament, it was also announced that GP rebates would be increased from 85% to 100% of the Medicare fee for all consultations, and there would be greater access to mental health care especially with the burden of depression. While these issues affect all Australians, they are especially relevant to the ageing population.

The committee in the 41<sup>st</sup> Parliament considers it important to share with the community the evidence, developments and conclusions of the previous committee in the 40<sup>th</sup> Parliament. Parliamentary committee members are challenged throughout an inquiry process, balancing the electorate demands with burning parliamentary committee inquiry work. The previous committee members were committed to producing outcomes to vexed issues that all Australians will eventually face in the future. Thus, central to future progress is the need to make public any pertinent explorations.

**Hon Alex Somlyay MP**

**Chair**





# Membership of the Standing Committee on Health and Ageing - 41<sup>st</sup> Parliament

Chair            Hon Alex Somlyay MP

Deputy Chair   Ms Jill Hall MP

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Mr Michael Johnson MP

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The Parliament of the Commonwealth of Australia

# UNTITLED

**Report on the inquiry into long-term strategies to address the  
ageing of the Australian population over the next 40 years**

House of Representatives  
Standing Committee on Ageing  
40<sup>th</sup> Parliament

August 2004  
Canberra

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# Contents

Membership of the committee – 40 <sup>th</sup> Parliament .....	xix
Terms of reference .....	xxi
List of abbreviations .....	xxiii
List of conclusions .....	xxv
<b>1 Introduction .....</b>	<b>1</b>
The context of the inquiry .....	1
Australia’s ageing population .....	4
Why is population ageing important? .....	5
Can population ageing be changed? .....	7
Population ageing in other countries .....	8
The conduct of the inquiry .....	9
Scope and structure of the report .....	10
<b>2 Age friendly communities .....</b>	<b>13</b>
Promoting age-friendly community environments .....	14
Encouraging lifelong learning .....	17
Supporting carers in the community .....	21
The demands of caring .....	21
Future availability of carers .....	22
Summing up .....	26
<b>3 Ageing with dignity .....</b>	<b>29</b>
Are attitudes to ageing changing? .....	30
Age discrimination .....	34

---

<b>Safety in the community</b> .....	35
<b>Elder abuse</b> .....	37
Community action against elder abuse .....	39
Guardianship.....	40
<b>Planning for end of life issues</b> .....	42
<b>Summing up</b> .....	46
<b>4 Housing and transport</b> .....	<b>49</b>
<b>Homes for independence</b> .....	49
Home ownership by older Australians .....	49
Making homes more age friendly .....	51
Overseas initiatives .....	54
<b>Transport: the key to independence and involvement</b> .....	55
<b>Summing up</b> .....	57
<b>5 Healthy ageing</b> .....	<b>61</b>
<b>The top 10 health problems</b> .....	62
Prevention, not reaction .....	64
Obesity.....	66
Physical activity and falls prevention.....	68
The role of community Pharmacists .....	70
Nutrition.....	71
<b>Summing up</b> .....	71
<b>6 Workforce participation</b> .....	<b>75</b>
<b>The Challenge</b> .....	75
Why older people leave the workforce .....	77
Barriers to workforce participation.....	78
Sharing responsibility for improving workforce participation.....	81
The benefits of employing older workers.....	83
Practical initiatives to encourage participation.....	84
Lifelong learning for workforce participation .....	87
<b>New employment opportunities</b> .....	89
<b>Supporting workforce participation through corporate social responsibility</b> .....	90

Voluntary work - unpaid work .....	91
Summing up .....	95
<b>7 Financial security in later life .....</b>	<b>99</b>
<b>Superannuation .....</b>	<b>100</b>
Adequacy .....	100
Equity .....	101
Lack of Incentives .....	102
<b>The Aged Pension .....</b>	<b>103</b>
<b>Private Savings .....</b>	<b>105</b>
Voluntary savings .....	107
Compulsory Savings Schemes .....	109
<b>Improving financial literacy .....</b>	<b>111</b>
Summing up .....	112
<b>8 Aged care and health services .....</b>	<b>115</b>
Funding for aged care and health services .....	116
Issues raised in evidence .....	118
<b>Services to maintain healthy functioning .....</b>	<b>120</b>
Maintaining physical function .....	120
Oral health .....	122
<b>Community care services: coordination and quality .....</b>	<b>123</b>
Confusion or coordination? .....	124
Quality and safety in community care .....	126
The community care review .....	126
<b>Flexible care .....</b>	<b>128</b>
Extended aged care in the home .....	128
The Aged Care Innovative Pool .....	130
Transitional care and Pathways Home .....	131
The Multipurpose Services Program .....	132
<b>Care services in diverse settings .....</b>	<b>133</b>
Care for people with dementia or other mental health problems .....	133
Incidence and costs of dementia .....	133
Diagnosis and care .....	135

---

Depression and other mental health problems .....	137
Respite care.....	139
Palliative care .....	141
Residential care.....	144
The availability of residential care .....	145
Assessment for residential aged care .....	148
Quality and accreditation.....	150
The interface between residential care and acute care.....	152
Ageing with disability.....	154
Funding and the viability of aged care homes.....	155
<b>The need for age-friendly hospitals.....</b>	<b>162</b>
<b>GPs and the care of older people .....</b>	<b>163</b>
GP shortages .....	164
GP skills and knowledge .....	166
GPs and care of older people in the community.....	166
GPs and residential aged care.....	169
<b>Workforce shortages .....</b>	<b>171</b>
Nurses.....	173
Ageing of the nursing workforce.....	174
Lack of wage parity for nurses caring for the aged.....	175
Working conditions.....	178
Lack of education and training opportunities .....	180
Poor public image of caring for the aged.....	180
Beginning to turn the shortage around .....	181
Other health professionals .....	182
Summing up .....	185
<b>9 Aged care and health services: Looking to the future .....</b>	<b>191</b>
Research to better understand ageing and care of the aged .....	191
A workforce attuned to the needs of older Australians.....	196
Working together .....	197

Appendix A – List of submissions.....199

Appendix B – List of exhibits .....205

Appendix C – Public hearings, site inspections and community forums .....213





# Membership of the Standing Committee on Ageing - 40<sup>th</sup> Parliament

**Chair**            Mr John Cobb MP (from 5/11/03)  
                      Dr Andrew Southcott (to 4/11/03)

**Deputy Chair** Ms Jill Hall MP

<b>Members</b>	Ms Ann Corcoran MP	Mr Greg Hunt MP
	Ms Annette Ellis MP	Mrs Margaret May MP
	Ms Teresa Gambaro MP	Mr Frank Mossfield MP
	Mr Luke Hartsuyker MP	Mr Tony Smith MP





## Terms of reference

On 26 June 2002, the Minister for Ageing, the Hon Kevin Andrews MP, asked the Committee to inquire into the long-term strategies to address the ageing of the Australian population over the next 40 years.





## List of abbreviations

ABS	Australian Bureau of Statistics
AHMC	Australian Health Ministers' Conference
AIFS	Australian Institute of Family Studies
AIHW	Australian Institute of Health and Welfare
AMA	Australian Medical Association
ASFA	Association of Superannuation Funds of Australia
ASIC	Australian Securities and Investments Commission
AWT	Australians Working Together
BCA	Business Council of Australia
CACP	Consumer Aged Care Package
CBP	Community Business Partnership
CDEP	Community Development Employment Program
COTA	Council on the Ageing
CSIRO	Commonwealth Scientific and Industrial Research Organisation
DEST	Department of Education, Science and Training
DEWR	Department of Employment and Workplace Relations
DIMIA	Department of Immigration, and Multicultural and Indigenous Affairs
ENEPRI	European Network of Economic Policy Research Institutes

FaCS	Department of Family and Community Services
GDP	Gross Domestic Product
HACC	Home and Community Care
ICV	Indigenous Community Volunteers
IEP	Indigenous Employment Policy
ISFA	Investment and Financial Services Association
ISO	International Standards Organisation
IYOP	Year of the Older Person
NATSEM	National Centre for Social and Economic Modelling
NHMRC	National Health and Medical Research Council
NOM	Net Overseas Migration
OECD	Organisation for Economic Co-operation and Development
PBS	Pharmaceutical Benefits Scheme
PMSEIC	Prime Minister's Science, Engineering and Innovation Council
SISFA	Small Independent Superannuation Funds Association
TAFE	Technical and Further Education
TBL	Triple Bottom Line
U3A	University of the Third Age
VET	Vocational Education and Training
WESROC	Western Suburbs Regional Organisation of Councils



## List of conclusions

### 2 Age friendly communities

#### Conclusion 1

The Committee concludes that the Department of Health and Ageing should ensure that the proposed quality assurance system for Australian Government funded community care programs covers the support provided to carers both directly by the National Carer Respite Program and through the provision of Community Care Packages. (para 2.56)

### 3 Ageing with dignity

#### Conclusion 2

The Committee concludes that in further developing the *National Strategy for an Ageing Australia*, the Australian Government should include a statement of the underpinning the Strategy. In the first instance, the values would promote a basis for debate. Subsequently as a goal /vision against which further development should be tested and measured.

The Committee concludes that in further implementing the *National Strategy for an Ageing Australia*, key messages and information must be developed in such ways as to engage people of all ages, of different backgrounds and relevant to the contexts in which people are living and working. (para 3.76)

#### Conclusion 3

The Committee concludes that the Community Services Ministers' Advisory Council should direct the Positive Ageing Taskforce to broaden the scope of their work on elder abuse to identify and develop guidance on ways in which older people can be assisted to maintain control over their lives and affairs.

The Committee further concludes that guidance be implemented by all State and Territory Governments to provide a consistent approach across Australia to protecting the dignity of all older Australians. (para 3.79)

#### Conclusion 4

The Committee concludes that the Attorney General should work with the State and Territory Attorneys General to review, streamline and unify the legal instruments used for planning end of life decisions relating to management of affairs and assets, protection from abuse and care preferences. (para 3.82)

## 4 Housing and transport

#### Conclusion 5

The Committee concludes that the Australian Government through the Health and Community Ministers' Council and the Housing Ministers' Conference should lead the development of longer term strategies to address the housing needs of an ageing Australia that:

- build on the research being undertaken by the Australian Building Codes Board;
- promptly action any national building standard recommended by the research being undertaken by the Australian Building Codes Board;
- facilitate the development of a national 'age friendly home standard' which must be included in all rental and sales advertisements for domestic dwellings; and
- entitle purchasers 65 years and over to reduced transaction costs for the purchase of a freehold title domestic dwelling (with registrable and transferable interests) that qualifies for the national 'age friendly home standard'. (para 4.46)

#### Conclusion 6

The Committee concludes that the Australian Transport Council identify older people's transport needs and develop a national action plan to improve the safety, accessibility, availability and affordability of public transport to support older people's independence and participation in their communities. (para 4.51)

## 5 Healthy ageing

#### Conclusion 7

The Committee concludes that the Australian Government fund research to establish reliable baseline data on obesity and longitudinal studies to track changes over time and the impact of changes on health status. (para 5.46)

## Conclusion 8

The Committee concludes that the Department of Health and Ageing ensure that the expanded role of Aged Care Assessment Teams in case management include early identification and management of nutritional problems.

Nutritional problems should be included in the Aged Care Assessment Program National Minimum Data Set and reported against annually. (para 5.48)

## 6 Workforce participation

### Conclusion 9

The Committee concludes that the Prime Minister's Community Business Partnership should explicitly advocate improving employment opportunities for older people as a component of corporate social responsibility and triple bottom line reporting by Australian employer organisations. (para 6.78)

### Conclusion 10

The Committee concludes that employer organisations including government departments should voluntarily demonstrate their commitment to the employment of older people by :

- developing indicators for and reporting on improving employment opportunities for older people within their own organisations; and
- extending their corporate social responsibility activities to improving employment opportunities for older people more generally. (para 6.79)

## 7 Financial security in later life

### Conclusion 11

The Committee concludes that a comprehensive study of the impacts of demographic compression on the capacity of families to save for retirement be undertaken jointly by the Department of Family and Community Services and the Treasury. (para 7.73)

## 8 Aged care and health services

### Conclusion 12

The Committee concludes that the Department of Health and Ageing liaise with the state and territory agencies so that:

- the new dementia care supplement should be set at two levels, consistent with the rates for the new medium care and high care RCS categories; and

- the medium care level supplement should also be made available for the care of people with challenging behaviours who are still living in the community. (para 8.273)

#### Conclusion 13

The Committee concludes that, to provide a better incentive for aged care providers to provide respite care, including for people with complex high care needs, the subsidy for respite care in residential aged care facilities should be set at two levels, consistent with the rates for the new medium care and high care RCS categories. (para 8.274)

#### Conclusion 14

The Committee concludes that Australian Health Ministers, through the Australian Council for Safety and Quality in Health Care, should identify the care of older people while in hospital as a safety and quality priority and recommend specific actions to improve the standard of their care. (para 8.276)

## 9 Aged care and health services: Looking to the future

#### Conclusion 15

The Committee concludes that the Australian Government actively monitors funding for National Health Priorities research to ensure that by the end of 2005, at least one third of the funding priority is directed to research related to Ageing well, and ageing productively. (para 9.16)

#### Conclusion 16

The committee concludes that, in the next funding round, the NHMRC should give priority to research aimed at gaining a better understanding of nutrition for people aged over 65 years. (para 9.18)

#### Conclusion 17

The Committee concludes that the Department of Education, Science and Training should work with the Committee of Deans of Australian Medical Schools to increase the focus of the health of older people in the curriculum for under-graduate medical education. (para 9.23)