

Friday, 30 July 2004

Reg. No. Y257604 ABN: 49 569 681 928

The Secretary
Senate Community Affairs Reference Committee
Suite S1 59
Parliament House
Canberra ACT 2600

Dear Sir/Madam,

Senate Community Affairs References Committee Inquiry into Aged Care

This submission is being made on behalf of Lutheran Aged Care Albury. Our organisation currently provides residential and community care services to 250 residents and clients and this will be extended by another 50 residential places early in 2005.

Lutheran Aged Care Albury prides itself of responding to identified community needs by developing programs that address these needs. For example, we operate both high and low care facilities and endorse the ageing in place philosophy. We have recently introduced extra services in one house of the nursing home. Our community care programs include Community Aged Care Packages for general, multicultural and rural and remote clients; the Veteran Home Care program and the Extended Aged Care at Home. We have also developed a small retirement village to supplement these programs. We are currently establishing a residential respite program for 13 people and will operate a total of 64 dementia specific places.

We are actively involved in seeking a better deal for our residents and clients. We understand and acknowledge the pressures on Government in developing a sustainable funding model as we move into a period of greater demands and higher expectations in care services, however, we remained concerned on many service delivery issues.

1. Workforce Shortage and Training

We welcome all support provided in this area but staffing and training remains an ongoing issue that needs constant monitoring. While the recent survey into the aged care workforce highlighted positive aspects within the industry we still need to address the profile of aged care nursing, its worth as indicated by equivalent wage structure and promotional opportunities and the broader issues of staffing in community care programs.

2. Aged Care Standards Agency

We have ongoing concerns with the current system. We believe several accredited agencies should available to facilities to provide the external auditing required in the accreditation process. The current monopoly does not encourage



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openness, accountability and opportunity for review. We do not

ABN: 49 569 681 928 support a system that rates facilities as we wish to promote and encourage the concept that all residents receive the same level of quality care.

Another issues that must be addressed in the accreditation process is the emphasis on documentation and the demands this places on staff. While facilities are capable of meeting these requirements they are not resourced to do so. Every hour spend developing "evidence" must come from other services including care hours.

3. Young People with Disabilities

It is now well recognised that placement of younger disabled in nursing homes is inappropriate. We have explored with local health providers other options but always come to the capital and recurrent dilemma. Providers are willing to be involved in providing this service, but must be funded accordingly.

4. Home and Community Care Programs

Lutheran Aged Care Albury has operated Community programs since 1993 and has sought community feedback in developing new programs. We simply cannot meet the demand for services nor do we have the flexibility within current programs to meet individual requirements.

We have clients on programs that now require more services than can be provided by that program – this can place them and the programs ongoing financial viability at risk. The current system is based around assessing a client's need and finding a program that provides the required services. When a client's care needs go outside of this service, we start the process again. We prefer a system that identifies a client's needs and the provider matches the care services to these needs. As the needs change, the program changes but the client remains with the one provider.

Standards of care are set by governments but operators struggle to meet these within funding restraints. Holistic care involves more than physical care, yet funding forces operators to make this the focus. Quality of life involves social, spiritual and emotional support.

Our experience has shown that early intervention and appropriate home care will delay entry to residential care and reduce hospital admissions. To achieve this a more flexible approach to community services is required. Access to services needs to be made easier for our clients who are often frail, confused and lack an understanding of the system.

In summary, there is a need for more community care services, the funding model requires reviewing, more flexible options in care services and the development of special programs to enable people with dementia to remain at home longer.

5. Transition Care

Current arrangements to assist elderly to make the transition from acute care to aged care or back to the community are inadequate. This is well documented and some programs have been trailed to provide this support.

The acute setting of hospitals is not appropriate for the elderly where the philosophy of care is not focused on quality of lifestyle issues. The elderly



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generally lack confidence or any form of advocacy in the hospital environment and are often discharged prematurely to their homes because of lack of options.

Appropriate transitional care would reduce hospital admissions and help ensure that suitable placement, whether it was back to the home or to an aged care facility, was made. This would be more cost effective in the long term, cause less trauma for the client and place less burdens on the health system.

Transitional care services in the home or for a short term in an aged care facility that also incorporated rehabilitation together with a flexible approach that allowed providers to respond to a clients immediate needs is required.

Options for transitional care need to be fast tracked.

It is important we do not allow issues such as these to become blurred with political rhetoric. We are talking about care services for the elderly of Australia. The issues are real and they will be resolved if we work together with the determination to provide our people with quality of care and a quality lifestyle.

Please contact me should you require any additional information.

Respectfully submitted,

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