

## Now we come to the tricky phase of reform

THE FUTURE OF aged care reform will be decided this year. Not primarily after the royal commission reports but in the process by which the commission develops its proposals; the ways in which sector leaders interact with the commission and vice versa; and the degree to which the current reform initiatives and the implementation of the royal commission proposals become an intertwined and seamless process through 2020 and 2021.

If that all goes constructively, we will have optimum outcomes and aged care in Australia will have a good future.

If those processes do not go well then aged care reform could be set back many years and we could end up with a real mess that will be a disaster for older Australians who need to access a government subsidised care system.



Ian Yates, chief executive of COTA Australia

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The commission has correctly said we need to turn the aged care system on its head, not patch it up.

But its proposals need to be ones that respect and work with the best in the sector and ones that the consumer movement, the progressive parts of the sector, and government will embrace and implement; and indeed, will hit the ground running with.

There are mainstream providers already on the journey to changing the sector in the directions we have long advocated.

During 2019 many providers wouldn't talk with the commission about their initiatives, despite COTA's strong and repeated urging. That was an error.

We are pleased providers are now putting their experiences to the commission. This must inform the commission's view of what is possible.

The commission needs to understand that there are a variety of pathways to the fundamental change we seek. The notion that there is only one pathway and one form of good aged care is a major and dangerous threat to service users.

In the meantime, provider representatives need to abandon their repetitious almost weekly appeals for more funding for the current residential care system. As if government pouring more taxpayer dollars into the status quo is electorally feasible.

Instead we need a commitment to work with government to restructure the industry. We need to enable the exit of significant numbers of providers who are not up to it and assist the best providers to take over those beds and also grow, including scrapping the Aged Care Approvals Round to help make aged care more investable. ■

## Stay engaged in the reform agenda in 2020

WHAT A PROMISING way to start a new decade, with a set of reform proposals from the Royal Commission into Aged Care Quality and Safety.

Their conceptual redesign proposal in consultation paper *Aged care program redesign: services for the future* attempts to address the key problems identified through the royal commission submissions to date.

They also raise questions for areas that have a limited evidence base and given the known dearth of research into aged care services and systems, there are some key gaps in how to make the system work.

Like all recent reforms older people are at the centre, but the report highlights the significant limits of marketisation for the sector. They propose an easier access to aged care services with the use of care finders, which I assume are something like patient navigators, and a focus on face-to-face communication.

They then propose that older people will access one of three streams:

- entry level support
- investment support such as restorative care and respite
- care and health support.

I have written in this column previously about the importance of ensuring voice and choice, as well as the evidence for the benefits of reablement and respite.

By flagging respite and reablement as investment in older people's health and wellness the commission sends a strong message about

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Professor Christine Stirling, president of the AAG

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But they ask how the system can encourage greater investment from services in these areas.

The commission proposes that access to nursing and allied health care services are offered on a needs basis that is irrespective of setting.

In terms of human rights, there can be no doubt that this should be the

benchmark, but the report asks again, how we can make this model work in terms of access, funding and defining what are reasonable and necessary services.

There is some existing evidence about how in-reach services improve outcomes through access to nursing and allied health care. Approaches like these can provide additional benefits like creating more porous boundaries between aged care facilities and the broader community.

Overall, 2020 looks to be an exciting year in terms of reform ideas for aged care services.

The royal commission consultation paper makes for interesting reading. I could only give a sweeping overview here, but I encourage everyone to stay engaged in the reform agenda in the year ahead so that we can all make a difference. ■

