

Business improvement fund welcome, ACAR report must be implemented

THE GOVERNMENT'S creation of the Business Improvement Fund for residential aged care is an important step forward in the direction I wrote about in the last issue.

I said that we need a commitment from provider peaks to work with government to restructure the industry – enabling the exit of significant numbers of providers who are not up to it and assisting the best providers to take over those beds and also grow, including scrapping the Aged Care Approvals Round to help make the sector more investable.

The Business Improvement Fund looks financially modest but let's see it operate and if it works then I have no doubt the prime minister and treasurer will support its extension into 2020/21.



Ian Yates, chief executive of COTA Australia

The fund is interwoven with the business advisory service program for aged care providers, which seems to be working better than the previous iteration.

The Business Improvement Fund helps providers who have finally recognised the need to either restructure or reengineer

their operations, for example with information technology, or business model, but can't afford to.

It is also for those who want to get out or providers who are willing to take over the operations or beds of providers who need to get out.

It's a good question as to why government should help providers exit, but I think it's in the public and consumer interest to rationalise and improve the industry, and to avoid precipitous collapses.

It is as yet unclear how many providers who are not viable actually realise it and are approaching these services.

Helping providers willing to consider taking over the beds of those who need to exit is very welcome. Those providers have been very reluctant lately because of their own financial, regulatory and operational

pressures and challenges, including from the royal commission.

I continue to think that other supports may also be necessary to assist them.

The government has had the report on the impact analysis of removing ACAR for allocating residential beds for a while.

It should both release the report and accept its recommendations so they can implement their 2018 in principle decision to make this change, removing the restraint on good providers and their investors responding to consumer preferences.

In the 2020 Budget we need to see the Business Improvement Fund extended. We need to see the ACAR transition measures implemented. And of course, we need more Home Care Packages. ■

Coordinating a response to coronavirus in aged care

THE RECENT bush fires across Australia have brought long-lasting social and economic impacts to affected communities. They are also having a deep impact on our psyche in terms of how we respond to emergencies.

As a result of the 2009 bushfires, the Victorian Department of Health, in collaboration with the aged care accreditation agency, sector representatives and service providers, developed a bushfire ready resource plan. This resource aims to ensure that an emergency plan and relevant risk management approach is available to protect the health and safety of residents and staff.

Now in 2020, the current coronavirus (COVID-19) outbreak has taken us into a new wave of rapid response, requiring the Aged Care Quality and Safety Commission to work closely with Australian and international health authorities in combating the risks of infection.

In particular, Standard 8 of the Aged Care Quality Standards requires providers to have clinical governance arrangements in place that include effective organisation wide systems for preventing, managing and controlling infections.

The importance of infection control to ensure individual consumers' safety, health and wellbeing is underscored in Standard 3, which focuses on minimisation of infection-related risks through implementing standard transmission-based precautions to prevent and control infection.

While Australia's COVID-19 containment strategy has to date proven to be effective, it is widely accepted that this virus will probably spread more broadly through the community and will have more serious consequences for older people with chronic illness.

In residential care the



Marguerite Bramble

risk of infection and serious complications from the illness is heightened because of the dual threat of age and close living conditions.

Professor Brendan Murphy, Australia's Chief Medical Officer, has recently advised all aged care providers to be on high alert and take steps now on infection control measures in preparedness for health emergencies to reduce the risks to their clients, residents

and staff.

From the perspective of the response to disease spread, the first priority is preparing and supporting health workers. The second priority is supporting chronically ill clients or high-risk residents and their families.

Briefings for health care workers must include mode of infection transmission, identifying the first steps if infection is suspected, arrangements to ensure adequate care and isolation of the infected individual and access to relevant supplies.

Most importantly, we must all be informed of the relevant response to COVID-19, consider the risks and support our communities to respond in an informed manner. ■

