

Australian Medical Association Limited

ABN 37 008 426 793

42 Macquarie Street, Barton ACT 2600: PO Box 6090, Kingston ACT 2604
Telephone: (02) 6270 5400 Facsimile (02) 6270 5499
Website : <http://www.ama.com.au/>



QUALITY COMPASSIONATE AGED CARE REQUIRES ACCESS TO A QUALITY SPECIALISED HEALTH WORKFORCE

AMA Position Statement on Resourcing Aged Care

The AMA today released its *Position Statement on Resourcing Aged Care*.

The Position Statement outlines the workforce and funding measures that the AMA believes are required to achieve a high quality, efficient aged care system that enables equitable access to health care for older people.

AMA Vice President, Dr Tony Bartone, said Australia's ageing population will require an increasing amount of medical support due to significant growth in the prevalence of chronic and complex medical disorders and associated increase in life expectancy.

"The aged care system, now and into the future, must be adequately resourced so that older Australians are able to access the same level and quality of medical care as other people," Dr Bartone said.

"They should not receive lesser care or attention just because they are old.

"Care for older people in the best and most appropriate environment is a basic human right."

Dr Bartone said the AMA welcomes the Government's recent decision to establish an Aged Care Quality and Safety Commission.

"This Commission is consistent with the AMA's call for an independent Aged Care Commissioner, which was a major recommendation of our submission to the Carnell-Paterson aged care review, and is a core part of our Position Statement," Dr Bartone said.

"The Commission is a good start, but much more needs to be achieved to ensure older Australians receive the care they need and deserve in their later years.

"The AMA also welcomes the Government's decision to make it compulsory for aged care providers to provide influenza vaccination programs for all their staff.

"This further underlines the need for facilities to be properly resourced so that residents have ready access to vital medical and nursing care."

Key recommendations of the AMA *Position Statement on Resourcing Aged Care* include:

- more Government funding and support to allow ongoing access to medical and health care at home so people can remain in their home for as long as is appropriate. At the end of 2017, there were 104,602 older people waiting for an appropriate home care package, the majority of whom have high care needs;
- improved access for older people in residential aged care facilities (RACFs) to doctors through enhanced Medical Benefits Schedule (MBS) funding, and research into improved models to facilitate medical care in RACFs. Currently, inadequate MBS funding is a barrier for GPs to attend residents of aged care facilities, as they do not compensate for the significant non-face-to-face time (travel, finding residents and staff, etc.) that comes with caring for RACF residents; and
- Improved Accreditation Standards, which should include a satisfactory registered nurse to resident ratio in RACFs. There has been a decreasing trend in the proportion of registered and enrolled nurses in the residential aged care workforce.

Dr Bartone said that AMA members have reported cases where nurses are being replaced by junior personal care attendants, and some residential aged care facilities do not have any nurses on staff after hours.

“It is unacceptable that some residents, who have high care needs, cannot access nursing care after hours without being transferred to a hospital Emergency Department,” Dr Bartone said.

“We need more nurses employed full time in aged care.

“We need to provide greater incentives for doctors to attend aged care facilities on a more regular basis to meet demand and ensure quality medical care for older people.

“And we need to introduce enforceable standards that require facilities to provide clinically-equipped doctor treatment rooms that are readily available for use by doctors and nurses, with access to patient files, in existing and future residential aged care facilities.

“Medical care, including provision of clinical facilities and a full-time, well-trained nursing workforce, must be at the heart of all future policy and planning for aged care in this country,” Dr Bartone said.

Background

- Australia is facing an ageing population with more chronic, complex medical conditions than ever before.
- The number of older Australians (aged 65+) is projected to be 8.7 million by 2056, 22 per cent of the whole population.
- In 2009-10, more than half (53 per cent) of all RACF residents had dementia. This proportion will continue to grow over time, with projections reaching up to 1,100,890 people with dementia by 2056.
- Medical practitioner-led teams are a key part of the aged care workforce, and they have a responsibility to ensure their patients are receiving the quality care they deserve.
- Not acting on the needs of older people inflicts on their basic human right of experiencing the highest achievable level of health. Ignoring the needs of older people means more avoidable hospitalisations and excessive costs to Australia’s health system.
- A study across metropolitan Melbourne hospitals showed that 13.9 per cent of ED presentations of older people aged 70 and over (who did not arrive via ambulance) in 2008-2012 were ‘potentially avoidable general practitioner-type presentations’.
- In a study of 408 residents of RACFs presented at two Melbourne EDs, one third of presentations of residents who were returned to their RACF could have been avoided by incorporating primary care services.

The AMA *Position Statement on Resourcing Aged Care* is at <https://ama.com.au/position-statement/aged-care-resourcing-2018>

23 April 2018

CONTACT:	John Flannery	02 6270 5477 / 0419 494 761
	Maria Hawthorne	02 6270 5478 / 0427 209 753