



Assessment Reform Section
Department of Health
Australian Government

StreamlinedAgedCareAssessment@health.gov.au

Streamlined Consumer Assessment for Aged Care

The Health Care Consumers' Association (HCCA) is a health promotion charity and the peak consumer advocacy organisation in the Canberra region. Last year we celebrated forty years of incorporation. HCCA provides a voice for consumers on health issues and provides opportunities for health care consumers to participate in all levels of health service planning, policy development and decision making.

HCCA involves consumers through:

- consumer representation, and consumer and community consultations,
- training in health rights and navigating the health system,
- community forums and information sessions about health services, and
- research into consumer experience of human services.

HCCA is a member-based organisation. For this submission we received some targeted input from consumers, as well as drawing upon our own and other's research across these issues.

Thank you for the opportunity to advocate for consumers and express consumer views on streamlining the consumer assessment process for aged care.

Yours sincerely,

A handwritten signature in black ink that reads 'K Dwan'.

Kathryn Dwan

Manager, Policy & Research, HCCA

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Introduction

HCCA are pleased to provide comments on the *Streamlined Consumer Assessment for Aged Care: Discussion Paper – December 2018*. Aged care services are an area of intense interest for HCCA and its members, and we appreciate the opportunity to provide feedback. HCCA strongly advocates for improving the consumer experience of aged care assessments and services, particularly if it leads to better, more customised and flexible support.

Of all the “key design issues” highlighted in the Discussion Paper, HCCA members are particularly concerned with embedding wellness and reablement into the aged care assessment process. We understand reablement to be a way of helping people to recover or relearn skills, to regain confidence, and to maximise their independence.¹ In Australian reablement is seen to be synonymous with restorative care.²

We make some general comments on streamlined consumer assessment before turning to the issue of embedding wellness and reablement into the aged care assessment process.

General comments

Some general concerns have been raised by HCCA members regarding the streamlining of the assessment process:

Older people and their needs are not the same. Therefore, ***older people should be assessed based on their particular health conditions and capabilities*** rather than categorised by level of support need only. Streamlining assessment runs the risk of simplifying the actual outcomes of the assessments. While streamlining the process is good in principle, it cannot come at the cost of individualised assessments based on providing customised support. The National Disability Insurance Scheme (NDIS) provides a good example of how to individualise assessments and services.

It is extremely important that ***consumers are asked what they need***. Assessments need to be consumer-centred under Standard 2 of The National Safety and Quality Health Service (NSQHS). This means that the new, streamlined process must allow consumers to be active participants in their own assessment. A streamlined system cannot afford to trim away these critical, highly personal interactions between older people and assessors.

The experience of older people can only be partly understood by someone who has not experienced old age. Assessors are generally not older people with an experience of aging and related issues. To foster empathy in the assessor workforce, ***older people should be involved in training the assessors and should have clear and convenient pathways for registering concerns about assessors conduct***. This active involvement should become part of the formal accreditation and monitoring of the assessment workforce.

Aged care services need a renewed focus on Consumer Directed Care (CDC). CDC was emphasised in the Commonwealth's Living Better, Living Longer aged care reform package proposed in 2012 to:

support greater choice and control for aged care recipients, including through embedding consumer directed care into mainstream aged care program delivery. Consumer directed care is an approach to planning and management of care, which allows consumers and carers more power to influence the design and delivery of the services they receive, where they want and are able to exercise choice. Where possible, it seeks to tailor the mix and range of services to care recipients' preferences, as well as allow greater flexibility in the timing and scheduling of services and in how care is shared between informal and formal carers.

The Aged Care (Living Longer Living Better) Act 2013 formed the basis of the current aged care assessment framework yet CDC is not mentioned in the Discussion Paper. CDC should explicitly be re-stated as the foundation on which to base a streamlined consumer assessment model.

How should wellness and reablement be further embedded in assessment practice under a streamlined assessment model?

Any new system must provide comprehensive and individualised assessment that leads to older people recovering or relearning skills, regaining confidence, and maximising their independence. The best opportunity for improving wellness and reablement is through measured and meaningful interactions between consumers and assessors. HCCA is concerned that meaningful human interactions may get lost in the drive towards a more streamlined service.

An assessment approach that seeks to imbed wellness and reablement must be sensitive to the following issues:

- **Time-limited services need to be fluid and based on establishing what works and what does not for each individual.** Our members insist that becoming 'more able' is a long road, which may begin quite slowly. Furthermore, progress along this road is often not linear.
- **Seamless transition to longer-term care** is necessary when time-limited services prove inadequate.
- **Current parameters for assessment need to be revisited.** At present, only two services are available in a 12 month period and the duration of services is typically around 6-8 weeks. However, to achieve reablement, some consumers may need to access more than two services a year. Likewise, the length of services should be determined by the consumer achieving their goals.
- **Assessments should not be based on a single interview with a consumer.** There are many reasons why this is so. Older consumers can often experience sudden and rapid

decline. Similarly, the capacity of older people – especially those with dementia – may fluctuate daily. Also, older people may over- or underestimate their needs.

- ***Time-limited services need to be seen and understood as a means to reablement.*** There is a risk that labelling a person's needs can have negative outcomes for their reablement. For instance, if a time-limited service includes meal preparation then a consumer may feel they have been assessed as unable, or not safe, to prepare food.
- ***Measures to reduce consumer anxiety will be necessary.*** Anxiety may arise because consumers fear losing a service they don't currently need but may in the future. We are also aware that some consumers may expect to receive the services to which they are 'entitled' and may worry that once they are deemed independent they will no longer receive those services. Strategies for reducing anxiety over losing services may be as simple as gradually phasing out services rather than stopping them abruptly.
- ***A national, evidence base for the long-term effectiveness of wellness and reablement is needed.*** There is little evidence on the long-term benefits of wellness and reablement in aged care. If wellness and reablement is to become a means of assessing a person's increased or stable function, then this information needs to be used to monitor the success of My Aged Care processes and provider services. Assessment and outcome information could contribute to the evidence base.
- ***The skills needed for assessing service needs and case-managing wellness and reablement different.*** Members are concerned that the ACAT workforce would be unable to cope with the 'case-management' aspect of assessing older people for wellness and reablement needs. Some feel that the two tasks of assessing needs and managing reablement are entirely different and should be undertaken by two separate roles. Some members have suggested a multidisciplinary team is needed to provide a more holistic assessment approach. The consumer's GP could be a team member as they should have the most thorough understanding of the consumer's situation.
- ***Assessors will need to be suited to the task and appropriately trained.*** When implementing a new national assessment workforce, it needs to be acknowledged that not all existing assessors are suitably qualified or experienced.
- ***Services must be available and adequate before the new process starts referring consumers.***
- ***Systems are needed to monitor assessment processes AND the success of service provision.*** There is evidence that service providers will overestimate their implementation of wellness and reablement if asked to self-report. Reporting on improvements in wellness and reablement can be too subjective if there are not standardised measurements in place.
- ***Continuity of assessors will improve consumer experience.*** Considerable effort should be given to providing consumers with the same assessor wherever possible. This

will help establish trust and minimise the number of times the consumer needs to explain their situation. While the assessment process may become streamlined, embedding wellness and reablement will require longer, and possibly multiple assessments. This reinforces the desirability of some assessors reassessing consumer needs in the future, wherever feasible.

Concluding remarks

HCCA looks forward to seeing how our submission is considered, and what recommendations are made that can further embed wellness and reablement in aged care assessments.

Embedding wellness and reablement in the assessment process fundamentally changes the dynamic of assessment as well as the approach to it. HCAA supports the Government's proposal to explicitly assess for mental, psychological, social, cultural needs in addition to the physical aspects of high quality aged care provision. HCCA hopes this change translates to a more positive, proactive and holistic experience for older people accessing aged care services.

Please do not hesitate to contact us if you wish to discuss our submission further. HCCA would be happy to clarify any aspect of our response.

¹ Social Care Institute for Excellence. "Reablement: emerging practice messages". Social Care Institute for Excellence. <https://www.scie.org.uk/reablement/emerging-practice-messages> (Accessed 7 February 2019)

² Department of Health. "Your guide to restorative care." Australian government. <https://agedcare.health.gov.au/programs/flexible-care/short-term-restorative-care-programme/your-guide-to-short-term-restorative-care> (Accessed 7 February 2019)