Senate Report - Future of Australia's Aged Care Workforce

Last week, the Senate Community Affairs References Committee released the report of its ambitious inquiry into the future of Australia’s aged care workforce.

The Committee’s report reprises the workforce challenges that are well known to the sector.

Its conduct coincided with the Government’s 2017–18 Budget announcement of funding “to establish and support an industry–led aged care workforce taskforce”. The purpose of the taskforce, as described in the Budget documents, is “to explore options to improve productivity in the aged care workforce and contribute to the development of an aged care workforce strategy, including for rural and remote areas.”

The Budget earmarked $1.9 million over two years from within existing Department of Health funds to support the work of the taskforce.

This Budget announcement is germane to the Committee’s report as a significant majority of its recommendations refer issues to the workforce strategy taskforce for further review and consideration.

The Report’s recommendations for the Aged Care Workforce Strategy Taskforce

The Committee’s report recommends that the workforce strategy include:

i. a review of existing workforce programs and resources available for workforce development, including consideration of the NDIS Integrated Market, Sector and Workforce Strategy,

ii. a review of available workforce and related data and development of national data standards that enable comparisons across related sectors,

iii. consideration of, and planning for, a minimum nursing requirement for aged care services,

iv. clear steps to address pay differentials between aged care and comparable sectors,

v. mechanisms to rapidly address staff shortages and other factors impacting on the
workloads and health and safety of workers,
vi. consideration of the role of informal carers and volunteers, with a particular emphasis on the impact of consumer directed care and the projected ageing and reduction in these groups,

vii. consideration of the role of medical and allied health professionals,
viii. the development of industry-wide career structures across the full range of aged care occupations,
ix. working with the Australian Skills Quality Authority to establish nationally consistent minimum standards for training and accreditation,
x. working with the Australian Nursing and Midwifery Accreditation Council to establish aged care as a core part of the nursing curriculum, establish dementia skills training and develop opportunities for student placements in aged care workplaces,
xi. consideration of the service delivery context in which the aged care workforce is expected to perform, including planning for locational and culturally-specific skills, knowledge and experience,
xii. developing a specific strategy and implementation plan to support regional and remote aged care workers and providers to access and deliver aged care training, and

xiii. the development of a coordinated outreach campaign to promote the benefits of working in the aged care sector.

The Report’s recommendations for Government

The first recommendation in the Committee’s report concerns the composition of the Government’s “industry-led workforce taskforce”.

The report recommends that the taskforce be composed of representatives of service providers, workforce groups including nurses, care workers/personal care attendants, medical and allied health professionals, and others, representatives of consumers and volunteers, as well as representatives of workers, care providers and consumers from regional and remote areas.

Minister Wyatt has indicated that planning for the taskforce is well underway, with the taskforce expected to be established next month.

The Committee gives firm views about the role of government.

It considers that the government has a responsibility to ensure that the aged care sector responds to workforce challenges in a way that will make best use of the considerable public funding that supports and underpins the aged care sector. It also considers that the Government “should be more than a mere ‘facilitator’ for an industry-led response to aged care workforce challenges.” It states that “the government must play a key role in the development of the workforce strategy…. something that requires active participation and leadership”.

This is at odds with the current Government’s position as articulated in the Department of Health’s submission to the inquiry. The Department explained that the Government’s position on a national aged care workforce strategy is that it will support the sector in developing a strategy, but that it is ultimately the sector’s responsibility.

Taking a different view, the Committee recommends instead that the government must be an active participant of the taskforce and must take ownership of those aspects of the workforce strategy that will require government intervention and/or oversight. It is noteworthy that the Committee, in the main, does not identify what these areas might be.
The Committee doubles-down on its recommendation that the workforce strategy taskforce include “consideration of and planning for the introduction of minimum nursing requirements in aged care facilities” by also recommending that the Government examines the introduction of a minimum nursing requirement.

The other recommendations to Government include examination of:

i. a national employment screening and worker registration scheme and implementation of the National Code of Conduct for Health Care Workers (matters also picked up in the Australian Law Reform Commission’s recent report on elder abuse),
ii. nationally consistent accreditation standards,
iii. continuing professional development requirements,
iv. an excluded worker scheme, and
v. workforce regulation of minimum duration for new worker training,

with the proviso that none of the cost of the above regulations should be passed on to employees.

The Committee also recommended that the Government:

i. develop scholarships and other support mechanisms for health professionals to undertake specific geriatric and dementia training, and
ii. take immediate action to review opportunities for eligible service providers operating in rural and very remote locations to access block funding.

**The Report’s recommendations for the Department of Health**

The Committee’s report has one recommendation for the Department i.e. that the Department reviews the implementation of consumer directed care (by which one assumes individualised budgets) to identify and address issues as they emerge. The Committee highlights for specific attention any impact on remuneration, job security and working conditions of staff and service delivery in rural and remote areas.

**Submissions to the Inquiry**

An unusual feature of this inquiry that warrants a mention is the number of submissions received that were confidential or anonymous. Of the 309 submissions received, 179 were confidential or anonymous.

**Conclusion**

A strategic response to the aged care workforce challenges still lies ahead. All eyes now turn to the workforce strategy taskforce.

A prerequisite for a strategic response is to have roles and responsibilities clearly articulated and agreed. This piece of work is still to be completed.

A noteworthy aspect of the Committee’s report is that, other than the observation that the introduction of minimum nursing requirements may require additional government funding, it has little direct regard to how a sufficient, appropriately skilled workforce can be afforded in the face of a rapidly increasing number of Australians who will need aged care and support.

In this broader context, there are two major reviews currently in train with the potential to have the greatest impact on the availability and quality of Australia’s future aged care workforce.
First, there is the response by the Parliament and the community to the recommendations of the soon to be completed 2017 independent review of aged care reforms. This review, amongst other things, is addressing the affordability of a consumer-driven and more market-based aged care service industry that will have to respond as demand for services and community expectations rise. There is also the current review of alternative models for funding care in residential settings and the associated Resource Utilisation and Classification Study. These will also have a significant bearing on the future workforce.

If the sector’s services are not adequately priced and funded by government and by those who can afford to contribute somewhat more towards their care costs, it is difficult to envisage a significant change in the current circumstances of the aged care workforce. That said, there is scope at relatively modest cost to significantly improve the quality and relevance of entry-level and post entry-level aged care education and training in response to priorities identified by the sector.

Aged Care Update has written on workforce issues in recent times, including providing perspectives on an aged care workforce strategy and the status of the aged care workforce as assessed by the National Institute of Labour Studies (NILS). The NILS report paints a comparatively positive picture of the current aged care labour market. It must be remembered, however, that its report relates to a period when the sector overall has experienced significant real increases in care revenues per resident. The forecast is much less rosy, including the impact of a significant real increase in minimum wage rates that will not be compensated for through the indexation of care prices.

The relevant Updates can be accessed by scanning the list of Update titles here. Catholic Health Australia’s submission to the Senate inquiry can be found here.

Disclosure statement: The author of this Update, Nick Mersiades, is a member of the Aged Care Financing Authority. The opinions in this Update should not be read as being an expression of the views of the Aged Care Financing Authority.

You can read previous Aged Care Updates here.