



12 November 2020

Royal Commission into Aged Care Quality and Safety

By email: ACRCfinalsubmissions@royalcommission.gov.au

EveryAGE Counts Response to Counsel Assisting recommendations to the Royal Commission into Aged Care Quality and Safety

Rec 1.1

EveryAGE Counts strongly welcomes the recommendation for a new Aged Care Act that is founded around rights based principles (including those listed in 1.1); is organised around older people using aged care and not on the providers; and focuses on outcomes.

However, we argue that the prevalence of ageism in aged care creates a hard barrier to achieving human and consumer rights for people in the care system. The failure to acknowledge or directly address this fundamental issue that drives many of the problems in aged care, will undermine attempts to adopt and embed rights into the system. Its continuing absence from Commission outputs, including these recommendations, is puzzling and worrying given the prominence of ageism explicitly identified as an issue in so many of the submissions and much of the evidence given to the Royal Commission. It is time for the Royal Commission to overcome its unexplained reticence, name this problem directly and respond with concrete recommendations to tackle it.

In addition, a rights based approach in new legislation must not be limited to a set of principles contained in the Objects of the Act, even though this is a critical first step. The current Act contains a Charter of Rights that is disconnected from the other parts of the Act and from implementation throughout the system. This must not be repeated. Each component of the new legislation must be designed with an explicit attention to advance a rights based approach and ultimately tested against its capacity to deliver this. The implementation of a rights based approach at every level of the aged care system must also be built into policy and legislative design, including effective promotion, education and communication around ageism and the rights paradigm and meaningful avenues for complaint and redress around rights violations.

Rec 1.3

In addition to supporting independence for people as they age, the basic definition of aged care should be built around enabling quality of life and good lives with frailty and impairment, as defined by the older person accessing care.

If anything has become clear throughout the Royal Commission process, it is that a narrow focus on clinical, professional and personal care defining both the aged care system and the people accessing it is not enough. These important aspects of the system must be integrated with a

concept of enhancing and enabling individually defined quality of life and end of life decisions, which need to be based around more than physical or cognitive independence.

A major shift is needed in public perceptions if this essential transformation of the aged care system is to succeed. In [our first submission to the Royal Commission](#), in Recommendation 9 we called for:

A broad, sustained Commonwealth government-funded public awareness and education campaign on ageism and its impacts, which:

- aims to shift social norms on ageing and being older to recognise both opportunity and diversity of experience;
- builds on recent government campaigns such as Long Live You;
- recognises all elements of the lifecycle including the possibility of needing, accessing and navigating care and support.

We reiterate this call.

Rec 2.1

The recommended elevation of consideration of the needs of older people to National Cabinet level is welcome and realistic. However, we question the assumption embedded in narrowly equating ageing and older Australians with concerns of care, health and well-being.

EveryAGE Counts, along with a number of other stakeholders, has long called for a whole-of-government, cross-jurisdictional National Agenda on Ageing and Older Australians, and ministerial positions that are dedicated to taking leadership in this cross-portfolio policy response. The emergence of the National Cabinet process, if it continues to work effectively, offers a better platform than the slow and complex COAG processes to prosecute this agenda.

However, in a National Cabinet Reform Committee on Ageing and Older Australians, EveryAGE Counts would expect to see included Ministers for and consideration of employment, retirement policies, social security, business policy (such as entrepreneurship), education, law and justice and more.

Nonetheless, there is a strong case for either a National Cabinet Reform Committee on Aged Care and Health Care for Older Australians, either as a sub-set of a broader committee on ageing and older Australians, or a stand-alone action in light of the momentum generated by the pandemic and the Royal Commission.

Rec 19

EveryAGE Counts welcomes the inclusion of a recommendation on designing for diversity in the aged care system. We especially commend the specific attention given in the suite of recommendations in Part 3.5.

However, the absence of specific consideration of the needs and preferences of people from diverse cultural and linguistic backgrounds (CALD people) is a significant gap in the recommendations. Transforming aged care successfully cannot be achieved without understanding

current and future cohorts of this large, but diverse, demographic group and ensuring that all levels of the aged care system are responsive to their needs.

Rec 20

If our reading of this recommendation is correct, although it uses narrow language around 'planning', it appears to propose a needs based, demand-drive funding system for aged care rather than rationing within capped funding envelopes. If this is the intent of this recommendation, it will be a major rights-based advance for older people. It would place them on the same footing as younger people with a disability and are able to access support through the uncapped NDIS according to individual need.

Rec 32

EveryAGE Counts strongly welcomes the attention to the needs and preferences of Aboriginal and Torres Strait Islander people in this and a number of other recommendations.

Rec 57

A focus on improving the design of aged care accommodation is welcome; as are the passing references to 'small home' models. However, this and related recommendations lack ambition and imagination, and miss the opportunity to transform options for transforming living arrangement and care choices in older age. [In our initial submission to the Royal Commission](#) in 2019, in Recommendation 7, EveryAGE Counts called for:

Establishment of a collaborative Ministerial Taskforce through COAG engaging governments, aged care providers, advocates, aged care users and broader communities in the creation of a new initiative, New Models of Living Arrangements and Care for Older Australians to:

- explore, pilot, test and invest in initiatives that offer contemporary, integrated alternatives to segregated, institutionalised aged care;
- shift government funding models to expand new, evidence-based models of living and care for older Australians.

We reiterate this call.