



11<sup>th</sup> February 2019

Assessment Reform Section  
Department of Health  
Australian Government

Email: [StreamlinedAgedCareAssessment@health.gov.au](mailto:StreamlinedAgedCareAssessment@health.gov.au)

Dear Sir/Madam

### **Streamlined Consumer Assessment for Aged Care**

The Australian Nursing and Midwifery Federation (ANMF) appreciates the opportunity to provide a response to the Australian Government Department of Health consultation on the Discussion Paper: *Streamlined Consumer Assessment for Aged Care*. This consultation seeks feedback on the design issues for a new assessment framework to streamline the consumer aged care assessment process for access to all aged care services, from entry level home support to home care packages and residential care.

The ANMF is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of 270,000 nurses, midwives and carers across the country.

Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals and achieve a healthy work/life balance.

Our strong and growing membership and integrated role as both a professional and industrial organisation provide us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.

Through our work with members we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.

With regard to care of older people, ANMF members work across all settings in which aged care is delivered, including approximately 45,000 members who are currently employed directly in the aged care sector. Many more of our members are involved in the provision of health care for older persons who move across sectors (acute, residential, community and in-home care), depending on their health needs. Being at the fore-front of aged care, and caring for older people

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#### **ANMF Journals**

Australian Nursing and  
Midwifery Journal (ANMJ)  
E [anmj@anmf.org.au](mailto:anmj@anmf.org.au)

Australian Journal of  
Advanced Nursing (AJAN)  
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ABN 41 816 898 298



over the twenty-four hour period in acute care, residential facilities and the community, our members are in a prime position to make clear recommendations to improve the care provided and enhance processes for access to that care.

The ANMF has a strong commitment to achieving the changes required to improve care provision to older persons in residential and community aged care environments. We, therefore, welcome the initiative to introduce a streamlined consumer assessment model for aged care which will bring together the current two processes: Regional Assessment Services (RAS) and Aged Care Assessment Teams (ACAT). The streamlining of RAS and ACAT into a single model is an important step toward equity of service for all people and the opportunity to reduce duplication of service and improve efficiency.

We foresee the benefits this simplified, 'one source of truth', assessment process will have for consumers of aged care services, their family or other carers, for health and aged care service providers, and, for the workforce involved from referral, through initial triage, to assessment for appropriate care requirements. Recognising the benefits to flow from a single pathway raises a degree of frustration that the existing parallel assessment arrangements will not be replaced with the new model until 30 June 2020.

Rather than address individual questions posed in the discussion paper, our response focusses on workforce matters. The quality of the assessment is perhaps the key element in the process in ensuring appropriate care for the needs of the older person at particular stages of their later years. Having said that, the ANMF takes this opportunity to highlight that the proposed new model for assessment is just one of a range of reforms urgently required to improve aged care services to an acceptable level of safety and competence. The success of the assessment model is largely dependent, then, on it being able to be embedded within the broader reforms for aged care being called for by the ANMF and many other organisations, as well as the community at large.

Once having entered aged care services, older people need to have assurance that their care will be respectful of their individual needs be they physical, mental, spiritual, gender (including sexual and gender diverse persons), social, or cultural (including Aboriginal and Torres Strait Islander peoples and those from CALD backgrounds); and, will be provided by a workforce qualified to understand and meet those needs.

### **Assessment**

To be truly effective the assessment needs to be a living document that is able to be updated as the consumer progresses through their life journey. That is, it is the consumers assessment record and not constrained by the service within the healthcare sector that the consumer interacts with. It is an electronic record so it must fit within the digital health record agenda.

'A one source of truth assessment approach' is the only way to achieve a consumer centric care model in line with current consumer expectations. It also provides opportunity for a longitudinal record of the consumer and eventual integration with both personal and institutional electronic health records. This would help with data collection and analysis to inform innovation and improvement in this



component of the aged care sector. There should also be consideration in the model for the role of the primary healthcare sector i.e. practice nurses who are likely to have done assessments for care recipients throughout their life especially those who have chronic health conditions.

### **Registered Nurse**

The ANMF asserts that registered nurses with experience in aged care are eminently qualified to be assessors to undertake the “Complete Aged Care Assessment” under the proposed streamlined model. Registered nurses have completed a program of study approved by the Nursing and Midwifery Board of Australia (NMBA) that leads to registration. They are required to work within the NMBA’s Professional Practice Framework as a regulated health professional<sup>1</sup>. These nurses are not only educationally prepared to undertake holistic assessment of the person, they have an intimate understanding of the full continuum of care needs of the older person and of the most appropriate environment in which this care can be provided.

A registered nurses practice is based on person-centred and evidence based practice and involves physical, mental, social, cultural and spiritual care as well as supporting the individual's family and friends as required. Nursing practice encompasses: assessment of the care of individuals as well as preventative strategies to promote, maintain and improve health through:

- planning nursing practice
- implementing and delegating nursing practice in order to achieve the best possible outcome for the individual
- providing continuity of care
- evaluating nursing practice outcomes and instituting further nursing interventions as necessary
- implementing research methodologies to continually advance nursing practices and the environment.

The advantages of an assessment workforce of registered nurses experienced in aged care are:

- The ability to formulate a comprehensive picture of the older person regarding all aspects of their physical and mental capabilities - can assess the person’s physical status and therefore whether they need care in their home with supports and the nature of these supports, such as home help/domestic chores assistance/meals on wheels/ shopping assistance; or health care supports, such as medicines administration assistance, wound care, continence care, mobility supports, palliative care; or, if more complex care is required on a 24 hour basis in an aged care facility; as well as psycho social support (such as, regular attendance at a day care facility, occupational therapy, referral to a social worker);
- The comprehensive assessment means improved timeliness of decision making as all information about the person is gathered in one set of documentation;
- They can accurately assess the current situation as well as identify the anticipated pathway of progression of health status to the next stage of care, and document this at the time of initial assessment, rather than waiting for this to occur and the older person needing to undergo a second assessment. Repeated assessments are stressful for all concerned, time consuming, and lead to unnecessary delays in the older person having their altered care needs met.



- Registered nurses are adept at introducing consumers to advance care planning to ensure this discussion is integrated within the assessment pathway
- Where repeated assessments are deemed appropriate these should be attended in a timely manner to minimise under and over servicing.
- They work closely in care teams with other health care professionals such as the older person's General Practitioner (speak the same language thus improved messaging of person's care needs) and with the wider multi-disciplinary team members. Nurses understand the roles of the other members of the multi-disciplinary team and can effectively refer on to, and collaborate with, the most appropriate health professional/non-clinical provider to meet clinical and non-clinical needs.
- The assurance of a qualified and regulated workforce which practices under the governance of the *Health Practitioner Regulation National Law Act* (2009) and a risk mitigating Professional Practice Framework which includes standards, codes and guidelines.
- They present sound value for money. The further rural and remote you travel, nurses are the most prevalent qualified and regulated health professionals available. They understand the unique challenges of rural and remote communities. It makes good economic and geographic sense, therefore, to use these people as the assessors. They are known and trusted by the local community, rather than bringing in a health professional who is unknown to the older person or their family/carers. This is especially important in Aboriginal and Torres Strait Islander communities where the nurses have established trust relationships. In addition, in these settings the nurses work collaboratively with Aboriginal and Torres Strait Islander workers and practitioner colleagues, to provide culturally appropriate aged care.
- They understand the care requirements and how to document the outcomes of the assessment in a language that will be understandable to clients and their families/carers to assist in making informed choices regarding ongoing place and provider of that care.
- They are well used to involving the person and their families/carers in designing and implementing care plans to ensure continuity of care within a home or facility, as well as discussing the need for referral to other healthcare professionals or transfer to more appropriate services.

The recent work being completed in the Resource Utilisation and Classification study by the Australian Health Services Research Institute (AHSRI) agree that Registered Nurses are best placed to complete these assessments in a thorough and efficient way<sup>ii</sup>. This research also highlights the need for a comprehensive induction for registered nurses to ensure they understand the complex aged care system and assessment processes required.

In addition to a skilled assessment workforce comprising of registered nurses, it is imperative that appropriate and sufficient support resources, both human and infrastructure, be in place to ensure that a single assessment framework functions in an efficient and timely way. This involves:

- ensuring that My Aged Care Contact Centre staff have the skills, knowledge and training to respond to inquiries and offer assistance. Feedback from ANMF members would indicate that this is not always the case. For example a contact centre staff member calling a care recipient directly for an appointment time who has known advanced dementia.



- having multiple contact pathways for older Australians and their representatives, mindful of the fact that not everyone is Internet literate, mobile or has capacity.

The proposed streamlined model for assessment has the potential to improve timeliness and consistency in approach for those older people needing to enter aged care services at various levels. It is our view that registered nurses with experience in aged care are well placed for the role of assessor within this model, due to the comprehensive nature of their assessment skills and knowledge base. Appropriate funding will be essential to ensure: adequacy of staffing numbers, appropriate remuneration for assessment services provided, and continuing professional development; and, to ensure timeliness of the assessment process following initial referral and triage.

We appreciate the opportunity to participate in this consultation process and provide our feedback on behalf of our membership. We look forward to further assisting the ongoing process for the development of an assessment model which will greatly improve the experience of older people whose care needs necessitate entry at some point into the aged care service sector.

Should you require further information on our response, please contact Julianne Bryce, Senior Federal Professional Officer, ANMF Federal Office, Melbourne on 03 9602 8500 or [julianne@anmf.org.au](mailto:julianne@anmf.org.au).

Yours faithfully

A handwritten signature in black ink, appearing to read 'Annie Butler'.

Annie Butler  
Federal Secretary  
ANMF

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<sup>i</sup> The Nursing and Midwifery Board of Australia (NMBA) Professional Practice Framework includes and is available at <http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx>

- Standards for practice – registered nurse (2016)
- Registration standards – recency of practice; continuing professional development; professional indemnity insurance arrangements; criminal history; English language skills; endorsement as a nurse practitioner; and endorsement for scheduled medicines for registered nurses (rural and isolated practice)
- Code of Conduct for nurses 2018
- International Council of Nurses (ICN) Code of Ethics for nurses 2018
- Decision making framework (DMF)
- Guidelines for registration standards

<sup>ii</sup> Professor Kathy Eagar, Australian Health Services Research Institute at the University of Wollongong, presenting on the Resource Utilisation and Classification Study and the Australian National Aged Care Classification at the Department of Health's Stakeholder Forum on 19 November 2018. [https://agedcare.health.gov.au/sites/default/files/documents/12\\_2018/kathy\\_presentation\\_-\\_transcript\\_-\\_final12dec\\_0.pdf](https://agedcare.health.gov.au/sites/default/files/documents/12_2018/kathy_presentation_-_transcript_-_final12dec_0.pdf)