



QUALITY AGED CARE ACTION GROUP INC

**Inquiry into the Aged Care Quality and Safety Commission
Bill 2018 and related Bill
And
Aged Care Quality and Safety Commission (Consequential
Amendments and Transitional Provisions) Bill 2018**

20 September 2018

Introduction

Quality Aged Care Action Group Incorporated (QACAG) is a community group in NSW that aims to improve the quality of life for people in residential and community aged care settings. QACAG is made up of people from many interests and backgrounds brought together by common concerns about the quality of care for people receiving aged care services.

QACAG Inc. was established in 2005 and became incorporated in 2007. Membership includes: older people, some of whom are receiving aged care in NSW nursing homes or the community; relatives and friends of care recipients; carers; people with aged care experience including current and retired nurses; aged care workers and community members concerned with improving aged care. Membership also includes representatives from: Older Women's Network; Combined Pensioners & Superannuants Association of NSW Inc.; Senior Rights Service; NSW Nurses and Midwives' Association and the Retired Teachers' Association.

QACAG members welcome this Bill as it ensures a 'one stop shop' for safeguarding people accessing aged care. However, we are concerned about the lack of transparency afforded through the new arrangements. Consumers have long-suffered at the hands of unscrupulous aged care providers who seek to maximise profit at the expense of good quality care. It is the lack of transparency within the sector and incestuous nature of Government influence from aged care operators that has led to our growing membership. As a group, we do not receive Government funding, all our activities as individuals are undertaken within our own time. Our commitment is testimony to the depth of feeling we carry about the poor standards of aged care we have experienced.

We have read the Aged Care Quality and Safety Bill 2018 and related Bill with interest. We note that aside from the Carnell-Paterson review QACAG, or similar active consumer representative organisation, has not been approached to provide any advice or insights in relation to the development of the newly proposed Commission. We note that many of the limited number of consumer advocacy organisations who are members of consultative committees (current and proposed) also have connections to the aged care Industry, either current or historical.

As stated in our introduction, we do not receive Government funding, nor are we connected to aged care providers. Independent consumer advocacy organisations such as ours must be given a higher focus in Government committees and in the new Commission if they are to truly act in the interests of consumer safety and well-being.

Recommendations:

- Any consultative committee used to inform the Commissioner must be able to demonstrate wide representation from independent and diverse community advocacy organisations.
- Disclosures of conflict of interest described in Section 45 must include disclosure of relationships between aged care providers and consumer advocacy organisations (both past and present).

We believe that information is the key to consumer empowerment and so the more information gained about an aged care facility or service prior to entering into a contractual agreement, the better the chances of finding the right place or arrangement. We believe the proposed arrangements do not go far enough in terms of transparency.

The adequacy of staffing in aged care has featured greatly in both our own experiences, and those reported in Inquires and media coverage. Yet determining what is 'adequate' or 'sufficient' is problematic for consumers. Often all staff look similar and will give the impression they are clinically trained. Unfortunately this masks the true picture. Given the direct-correlation between poor quality care, poor

clinical outcomes and lack of good ratios of staff including registered nurses, informing the public about the staffing profile of a service or facility is a vital quality indicator.

Recommendation:

In terms of the information to be made public, we request that Division 3 – *Making information publicly available* must include information about:

- Staffing models operated by the facility or service
- Staffing ratios and skills mix (registered nurses, allied health and assistants in nursing)
- Clinical outcomes including use of anti-psychotics, pressure sores, falls etc.
- Arrangements for provision of clinical governance at the facility/service

Thank you for receiving our submission.

Margaret Zanghi

President

On behalf of the Quality Aged Care Action Group Inc, NSW

21 September 2018