

11 February 2019

Australian Government Department of Health

Submitted online: <https://consultations.health.gov.au/in-home-aged-care-division/streamlined-consumer-assessments-for-aged-care-ser/consultation/intro/>

Submitted to Streamlined Consumer Assessment for Aged Care

Section 3 Design Principles

1. Are the proposed design principles appropriate for a streamlined assessment model? Are there any other principles that you believe should be included?

Please limit your answer to approximately 500 words or less:

Barriers to access for vulnerable older persons, specifically older persons from CALD communities, need to be identified and addressed by the new streamlined consumer assessment model. The key design principles should; include ease of access, be time sensitive, be responsive and capable delivering a tailored service for each individual consumer. Replacing 'Access' with 'Equity of Access' as a principle, will ensure greater clarity and progress to the goal of achieving equitable outcomes. 'Flexibility' needs to be incorporated into the Design Principles to ensure equality of access and outcomes for all older Australians, including those with specialised service needs related to language, culture, geographic location, sexual orientation and/or periods of severe vulnerability.

A culturally competent assessment workforce will have significant impacts on 'Quality' as a principle. The importance of long-term investment in building a well-trained highly experienced flexible and diverse workforce is key to the success of the model.

It is critical to look at "Independent Assessment", as anecdotal evidence shows some service providers are prioritising their own services and only taking customers who will benefit their own operations. Some transparency measures are already in place for service providers where potential conflict of interest exists. Such measures need to be consistent in the whole system of care.

Integration, from a consumer perspective, provides needed support and services that fit with their life and lifestyle choices. Any assessment and "subsidy"/service delivery system needs to fit the individual person as they will need to "integrate" any health, fitness, work, living etc. into their life. People's needs can change quickly, therefore greater capacity for the key principle of "Flexibility" in short-term assessment and re-adjustment of the level across the spectrum of care is essential.

Section 5: Entry Processes

2. What issues need to be considered for assessment providers to manage intake and triage under a streamlined assessment model? (e.g. staff skills required of a triage function; consistency of operational processes; and resource implications)

Please limit your answer to approximately 500 words or less:

In the current system, several incidents were noted where older persons having gone through inappropriate referrals and unnecessary delays. The capability of My Aged Care contact staff needs to be greatly improved to ensure they are able to determine whether an older person needs a RAS or ACAT assessment. Older people of CALD background do not understand the process of assessment nor the distinct responsibilities of specific providers. For these reasons' clear information and further explanation is critical. Without this, older people will continue to have very little control over what services they receive. For example, in the triage process, overcoming language barriers and being able to facilitate a two-way exchange is critical for effective assessment. Knowledge and practice of cultural safety is also an essential capability for an assessment provider.

There is a potential role for 'Aged Care System Navigators' (soon to be piloted) to establish a benchmark of a culturally adept and linguistically competent service provider. It is evidenced that older CALD people benefit from the option of face-to-face interactions. The ability to speak and exchange in person helps to inform them, address their concerns and overcome any difficulties in navigating the aged care system.

It is also important to put a system in place for review, evaluation and feedback to identify and address challenges among older CALD persons in a timely manner.

3. How can a streamlined assessment model enhance referrals and collaboration between health professionals, My Aged Care and a national assessment workforce?

Please limit your answer to approximately 500 words or less:

A streamlined assessment model will reduce duplication between the RAS and ACAT; facilitate a more effective triaging and assessment; and with improved referral pathways, further broaden access to services among older people. Its effectiveness among CALD older people can be further enhanced with culturally competent screening systems among GPs and better collaborations between and among health professions, My Aged Care and the national assessment workforce.

Assessment providers need to develop their internal competencies by investing in workforce capability. This can be done through structured, quality training and importantly through targeted employment strategies that seek to provide pathways to employment for cultural specialists and/or bilingual and/or bicultural staff. Another method is to engage in collaborative partnerships with accredited interpreting agencies and/or CALD specialist agencies. It is critical for assessment providers to be able demonstrate this capability to be qualified in delivering this crucial part of the aged care/health system.

4. How do you think the triage process should operate to expedite access to a single time-limited CHSP service? What are the risks and how could these be managed?

Please limit your answer to approximately 500 words or less:

Older persons requiring single time-limited CHSP service need not go through the whole process of a long assessment to access timely response. However, this needs to be balanced with the risk of addressing only the presenting issues and not assessing for potential more complicated underlying issues.

This risk can be navigated with respect and sensitivity through the “Aged Care System Navigators” (currently being pilot tested) or Care Managers having a role throughout an older person’s journey in the healthcare system. These Navigators or Managers remain in contact, so they can guide clients of single time-limited CHSP services through the system and explain the value of a comprehensive assessment of their situation. Having a streamlined assessment model as opposed to two parallel assessment processes should:

- Ease the burden of complexity and confusion for the confusion
- enable effective triaging of older people by assessors who are suitably qualified to undertake this role; and
- provide a more cohesive assessment model which facilitates improved referral pathways and collaboration between health professionals, My Aged Care and the national assessment workforce.
- reduce unnecessary duplication between the RAS and ACAT;

5. How can support plan reviews be better managed under a streamlined assessment model?

Please limit your answer to approximately 500 words or less:

The streamlined assessment model needs to be holistic to include, not only biological but also, psychosocial dimensions. A good assessment of a potential or existing breakdown of care at home may help provide a more comprehensive and forward-looking planning for medical and social services across the full continuum of care.

For older people from CALD backgrounds with poor proficiency in English, overcoming language barriers and facilitating effective two-way communication is paramount to effective triage and assessment. The resourcing of formal interpreters as well as bilingual bicultural workers must be factored into the streamlined consumer assessment model whilst ensuring that their different roles are clearly understood and that they are used appropriately. Bilingual bicultural workers may be required to have a more prominent role in rural and remote regions where face-to-face accredited interpreters are not always available.

An older person’s health can change rather dramatically in a short span of time hence, it is important that plan reviews can be facilitated without delay. Providing appropriate language assistance among older persons from CALD communities ensures that they are able to communicate their situation and needs more effectively to the assessment provider.

Section 6: The Assessment Workforce

6. What qualification and competency requirements do you believe are needed for a national assessment workforce? What particular areas of assessment practice require clinical expertise and/or multidisciplinary team-based approaches?

Please limit your answer to approximately 500 words or less:

To achieve optimal outcomes for older CALD persons, having access to culturally competent multi-disciplinary and inter-disciplinary workforce across My Aged care, RAS or ACAT is of critical importance. Systemic barriers related to this have always been a major challenge among CALD older persons hence, it is essential for assessment providers to employ and or collaborate with professionals with cultural expertise.

The healthcare/aged care system already has professionals who are bicultural and fluent in some languages. These skills should be recognised and valued with appropriate remuneration.

Assessment providers tendering for this work must be able to demonstrate how they will ensure equality of access and outcomes for special needs groups such as CALD.

7. What design features will enable assessment providers to operate an integrated workforce which is capable of delivering assessment for people across the full continuum of aged care needs?

Please limit your answer to approximately 500 words or less:

Assessment tool should include holistic bio-psychosocial indicators, delivered by culturally competent assessors and assessed by a multi-disciplinary team. The development of an integrated workforce will be one of the more challenging aspects of the new streamlined assessment model. It is important to establish the essential knowledge and skills sets for assessments relating to each level of care – i.e. CHPS, HCP, residential care. This includes the need for clinical expertise for those with more complex medical and health needs as well as a multidisciplinary team approach across both streams of assessment. Ensuring that the assessment team is closely linked across the health and aged care system is critical. In particular, the current links of the ACAT's, often in co-location within a public hospital will need to be re-formed/re-created. Any loss of that close connectivity is a high risk in a move to a streamlined assessment model that is independent.

8. What training and other initiatives should be considered to build the capability of the national assessment workforce?

Please limit your answer to approximately 500 words or less:

FECCA maintains its position, together with PICAC and the broader multicultural aged care sector, that contact centre staff should undergo a mandatory cultural competency training. The percentage of older persons from CALD background in Australia has grown significantly over the years and will continue to grow. Since the introduction of My Aged Care, FECCA and the broader multicultural aged care sector have advocated for mandatory cultural competency training for contact centre staff. Additionally, the diversity components which are included in mandatory training requirements offer only a broad perspective and do not provide an operational understanding of working in a multicultural/CALD context. The option of 'self-paced learning' for working with CALD older people is unsatisfactory. A comprehensive cultural competency training needs to be embedded in the training programs of My Aged Care contact centre staff and assessment providers.

Such training needs to be delivered by experienced training bodies which are recognised and recommended by FECCA and the multicultural aged care sector as having the required expertise and credibility in providing cultural competency training and development.

9. What assurance mechanisms should be put in place to ensure the achievement of quality assessment outcomes for senior Australians?

Please limit your answer to approximately 500 words or less:

To achieve quality assessment outcomes for older persons of CALD background, the following need to be in place:

- Access to a culturally competent multi-disciplinary workforce who are able to conduct holistic bio-psychosocial assessments and interventions
- Active participation of the CALD community in co-designing the system and process
- Collection of relevant data, disaggregating for CALD indicators, for continuous improvement

- Effective partnership with GPs, hospitals and other key referral sources that facilitate streamlined referral pathways.

10. What should be considered in the design of a streamlined assessment model and a new national assessment workforce to achieve efficiency and deliver the best value for money?

Please limit your answer to approximately 500 words or less:

Efficiency and best value for money is best achieved by making sure all unnecessary duplication and error is avoided through streamlined and culturally-informed intake, triage, assessment, review and reassessment process. Additionally, effective communication channels between and among professionals across the aged care sector together with key stakeholder in the CALD community can help facilitate these outcomes.

Section 7: Assessment in a Hospital Setting

11. How should aged care assessment work for people in a hospital setting under a streamlined assessment model? What issues need to be considered?

Please limit your answer to approximately 500 words or less:

The importance of providing language assistance for patients with poor English proficiency cannot be overemphasized. For processes that are formal / legal in nature (e.g. patient consent, medical assessments and discussions of medical procedures), accredited face-to-face interpreters must be accessible.

Nurses and other healthcare workers can be a source of additional support for CALD older persons and their families. The rapport they have built with their clients are valuable in providing support so that client and family can navigate hospitals and documents with more confidence. The needs and wellbeing of a patient must be a priority at all stages. While a comprehensive assessment may not be feasible, during an older person's hospitalisation, a home-based service supported by culturally competent specialists should be made available in the interim.

Section 8: Assessment in Remote Australia

12. How can a streamlined assessment model support timely, high quality assessments in remote Australia? What flexible assessment approaches would you support and why?

Please limit your answer to approximately 500 words or less:

Personalised contact remains the most viable arrangement especially for CALD older persons in remote Australia. FECCA continues to strongly support the need for a face-to-face assessment as the opportunity to observe older persons in natural home settings can provide valuable insights into potential breakdown in care as well as support systems. To support timely, high quality assessment in remote Australia, FECCA recommends the support of local services to increase their capabilities in providing culturally competent assessment and care including increased resources and face-to-face guidance.

Section 9: Wellness and Reablement

13. How should wellness and reablement be further embedded in assessment practice under a streamlined assessment model? What strategies do you support and how should they be implemented?

Please limit your answer to approximately 500 words or less:

The relatively new wellness and reablement framework needs to undergo more assessment of service providers by end users such as CALD older persons to understand the impact on their respective journeys in the system. For CALD older persons, it is imperative that language assistance and culturally appropriate support are made accessible to achieve their wellness and reablement goals.

Section 10: Linking Support

14. How can more effective and consistent linking services to vulnerable older people be delivered under a streamlined assessment model?

Please limit your answer to approximately 500 words or less:

Linking services provided by community-based groups has been part of connecting older persons from CALD backgrounds to My Aged Care and helping them navigate the aged care system. More importantly, they have been providing critical support for older CALD persons to make informed decisions and have the agency to be in control of their own health and wellbeing choices. Service providers, especially smaller specialist providers, need continued support from the Government for their continued expertise in working with specific needs groups.

Section 11: Additional Comments

15. What do you believe are the key benefits, risks and mitigation strategies of a streamlined assessment model for aged care?

Please limit your answer to approximately 500 words or less:

Please refer to our responses on related questions above.

Avoiding duplications is one benefit to both the older persons and the system however, there are a few potential risks such as—

1. Older persons “falling through the cracks” such as in the case of those requiring only single time-limited CHSP service and would not require comprehensive assessment. New system can explore a potential role for ‘Aged Care System Navigators’ to address this.
2. Wrong or inappropriate referrals due to low level of cultural competency among assessors. As noted earlier, cultural competency training should be required to all contact staff.
3. Mis-diagnosis and/or mis-assessment – poor quality assessment that places the consumer at risk
4. Consistency of implementation which can be mitigated by regular assessments and feedback loops among stakeholders, including the older persons. Will there be potential perverse incentive for assessment providers to assess for the sake of reaching certain number of clients?
5. Inadequate workforce to implement a comprehensive multi-disciplinary assessment.

16. What implementation and transition issues will require consideration in the design of a streamlined consumer assessment model?

Please limit your answer to approximately 500 words or less:

Please refer to our responses on related questions above.