



Resource Utilisation and Classification Study – Sector Reference Group

13 June 2019

Agenda Item: 3

Initial analysis of feedback on Consultation Paper

RECOMMENDATIONS

That members:

- **NOTE** the feedback provided to the Department on the consultation paper “Proposal for a new residential aged care funding model”.

ISSUE

The consultation paper submission period has now closed and the Department wishes to relay the feedback provided to the RUCS Sector Reference Group for their contemplation.

BACKGROUND

The consultation paper was open from 14 March 2019 to 31 May 2019 and 90 submissions have been received.

Analysis of submission

- Many submissions welcomed the AN-ACC and residential aged care funding reform as a positive opportunity to separate funding from care planning, and promote reablement and restorative approaches to care.
- The structure of the consultation paper provided stakeholders with an unfettered opportunity to engage in a frank and fearless discussion on the issues and risks posed by the model. Some key considerations raised by stakeholders include:
 - Stakeholders sought more information on the accountability/compliance framework for a future AN-ACC assessment workforce;
 - Stakeholders emphasised a preference for transparency of information, including details on data from the RUCS and further clarity on the National Weighted Activity Unit (NWAU);
 - Stakeholders emphasised that funding sustainability is the primary concern for many residential aged care facilities, with some submissions stating they would reserve feedback until the price of NWAU is made public;
 - Similarly stakeholders were receptive to a fixed/variable funding model, but wanted to better understand the price before they gave full support;
 - Some stakeholders sought clarity on how the work on funding reform would align with any future recommendations made by the Royal Commission into Aged Care Quality and Safety;
 - Some stakeholders sought more clarity on how AN-ACC sat in relation to the Aged Care Roadmap, and the possibility to integrate a continuum of funding between residential aged care and home care;
 - Many stakeholders welcomed separation of care planning from funding, and wanted more information about interface between funding reform and the Aged Care Quality Standards, and the role of the Aged Care Quality and Safety Commission;
 - Some stakeholder sought greater clarification on how the model will support funding for specialist care, such as palliative care, dementia care and the care needs of bariatric residents.

Overall, stakeholders valued the opportunity to contribute their feedback, and discussed their preference for ongoing communication on funding reform, especially regarding impact on IT systems and impact on the aged care workforce (i.e.: disestablishment of ACFI specialists/specific roles).

Many of the submissions received did not provide individual responses to each recommendation, but instead took a thematic approach to discussing what they liked about AN-ACC and what they would like more clarity on. Only a handful of submissions outrightly opposed the AN-ACC. Most submissions put forth qualified support subject to better understanding the minutiae of the trial and implementation.

Some concerns raised by stakeholders included:

- One-off adjustment payment should include respite and transfers – otherwise, it might cause facilities to accept residents initially so they can receive payment and not accept residents wanting to transfer from another facility.
- Some providers questioned the equity of the base tariff rate for MUM 6 & 7, which takes into account place allocation irrespective of occupancy, not also applying across the board.
- Some providers felt a stop loss of 5 per cent too disastrous, and proposed instead a stop loss of 0 per cent.
- Regarding recommendation 16 (facilities not be advised of the resident's exact AN-ACC class until after the person is in care), some providers expressed concern that this limited a provider autonomy in how they run their in-take process. Currently, many facilities will run a pre-ACFI to determine whether the prospective resident is suitable for their facility.
- Many submissions received from allied health care stakeholders expressed concern about the repeal of ACFI's pain management items. In some submissions, there appeared to be general confusion about ACFI direct funding services such as continence aids and appliances.

Submissions received on the topic of pastoral care

Roughly 15% of submissions raised concerns about the identification of limited consideration of the social, emotional, psychological and spiritual wellbeing of residents under the AN-ACC model which contrast with the Commonwealth Government's National Guidelines for Spiritual Care in Aged Care and the Quality of Care Amendment (Single Quality Framework) Principles 2018. These submissions also noted that the proposed funding model briefly mentions behaviour management and depression but does not adequately address the holistic needs of each resident and services for each consumer around supports for activities of daily living in participating in relationships and communities.

Next steps

The submissions have provided excellent insight into the sector's appetite for reform. It is clear from the submissions that the sector are very welcoming of funding reform and decoupling funding from care planning. The enthusiasm for AN-ACC is mixed mostly due to stakeholders seeking further guidance and information on the value of the NWAUs.

Going forward these submissions provide the Department with invaluable insights into future discussion points to explore with the aged care sector.

The Department will continue to analyse the submissions more thoroughly and will provide the feedback on the AN-ACC to Senator the Hon Richard Colbeck, Minister for Aged Care and Senior Australians. Feedback on the AN-ACC will also inform future consultation with the sector and communications around the upcoming trial.