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Australia's leading aged services magazine
Autumn 2023 | www.accpa.asn.au

DRIVING QUALITY CARE

**How to build
a better ageing
experience**

**Minister Wells
reflects on progress
on the second
anniversary of the Royal
Commission's report**

IN THIS ISSUE

- ▶ Preparing for in-home aged care reform and supported bargaining
- ▶ Tailored training programs for your workforce
- ▶ The important role played by allied health – from music therapy to exercise
- ▶ How to turn a profit while providing quality care
- ▶ Co-design, upgrades and new builds – get insights from the experts

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RETURNS TO
FACE-TO-FACE
EVENTS**

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- Maris Naish CEO



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EDITOR'S NOTE

Welcome to our Autumn issue of *Aged Care Today* – the magazine of the Aged & Community Care Providers Association (ACCPA).

It's been two years since the Aged Care Royal Commission published its Final Report, which has encouraged sweeping reforms across the industry.

We're seeing a greater focus on upskilling workers and providing proper remuneration, more emphasis on quality care and increasing innovations in service delivery, along with a commitment towards a more home-like environment in aged care homes.

For organisations that are ready and willing to change, there are significant opportunities to become both trailblazers and employers of choice, strengthening their viability and sustainability.

This issue provides fantastic insights for providers that truly want to stay ahead of the curve.

As always, thanks to our fabulous contributors for sharing their knowledge and awareness about how we can create a better ageing Australia.

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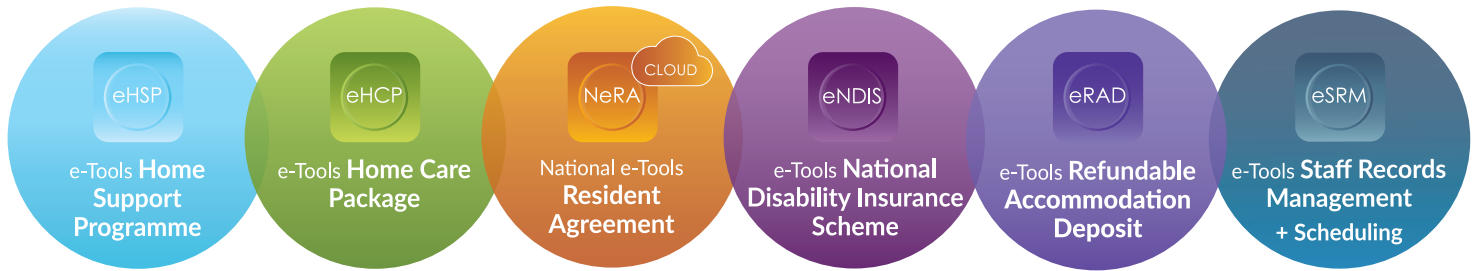
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Participants in the 2022 pilot of the Rural and Remote Aged Care Management Training Program, funded by the Department of Health and Ageing (see page 23 for details).

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[^] Azure AD & DocuSign are additional integration options, not part of NeRA Cloud's standard package price inclusions.

The new ACCPA, into the future

Engagement and collaboration will be key



Welcome to the first edition of *Aged Care Today* for 2023. It will be our first full year as the Aged and Community Care Providers Association – ACCPA – the stronger, and united voice of aged care in Australia.

Our team has been working hard over the past few months at completing the necessary changes such as the transfer of Members, assets and staff from the former organisations into the new entity of ACCPA.

We now have in place a permanent Executive Team which is working on setting out ACCPA's plans for the future, aligned with the strategic pillars set out by the board in 2022.

This is truly the beginning of a new era of co-operation among aged care sector representatives. We can rightly look back with pride on the achievements of recent years, particularly under the co-operative banner of the Australian Aged Care Collaboration (AACC).

It was the success of the AACC that led to the decision to unify and the successful 'yes' vote taken almost 12 months ago.

As a larger organisation ACCPA has greater resources to provide support and guidance for our 1,100+ Members. The continuing challenges faced by aged care providers mean that the experience and expertise ACCPA can offer is needed now more than ever by providers in the sector.

Among these challenges is COVID-19 which is still having a significant impact, along with the acute workforce shortages and the worsening financial viability of a majority of providers.

Added to these is the continuing reform resulting from the Royal Commission into Aged Care Quality and Safety. Even though we are two years down the track from the delivery of the final report there remains much work to do and many issues raised by the Commission are yet to be dealt with.

These issues affect all of our Members – those that deliver home and community care, residential aged care, seniors independent housing and retirement living.

Following on from the success of ACCPA's inaugural national conference last October, we intend to engage our senior leaders in state-level conferences which will provide outstanding opportunities for learning and networking. These conferences will focus on local issues, build local knowledge and create connections.

We will also be holding our national conference once again in Adelaide in October, which promises to be even bigger and better. Please keep an eye on the ACCPA website for details of this outstanding event.

ACCPA has been delighted to be part of the Care and Ageing Well Expo again this year, held in Perth over the past five years, and also in Melbourne this year. These expos provide a fantastic opportunity for consumers to meet in person with our Members and Partners, with exhibitors getting an opportunity to showcase their creativity and innovation in this sector.

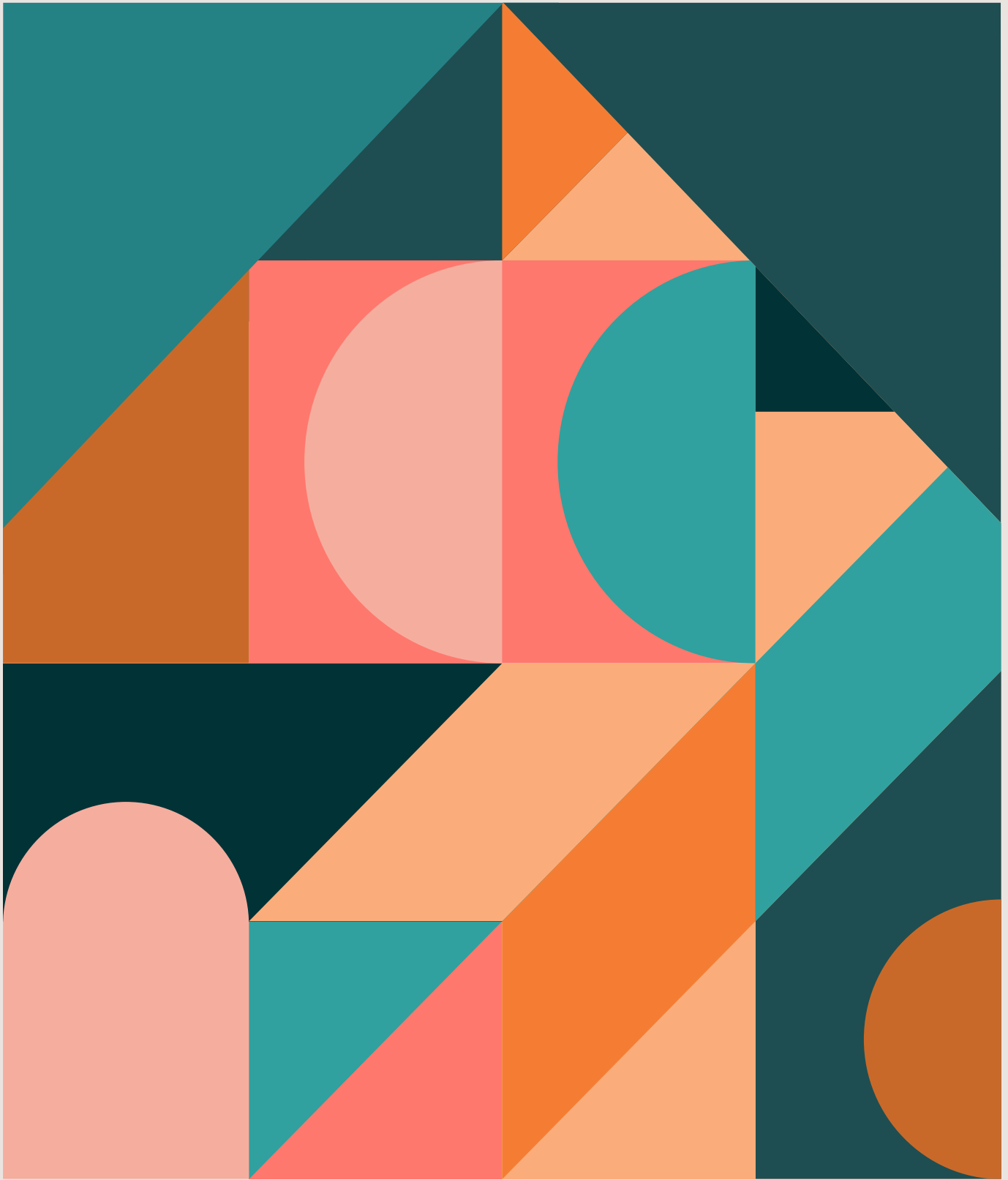
While COVID-19 is still a constant presence we have gradually been getting back to normal face-to-face interactions and want to use these opportunities to continue the conversation about how to improve the system and help older Australians age well and live well.

We at ACCPA want to foster this engagement among our Members and like-minded sectors and encourage collaboration so that we can achieve even higher levels of quality and safe care for older Australians.

Our goal remains helping older Australians to live healthily and to live their best lives as they age.

I look forward to an engaging, informative and successful year for aged care in Australia.

**Dr Graeme Blackman AO FTSE FAICD, Chairman,
Aged & Community Care Providers Association
www.accpa.asn.au**



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ACCPA advocacy gears up

Looking forward to a positive future for aged care



2023 promises to be a truly exciting year for Australia's aged care industry. As we shape our direction, I want to let you know that despite all of the challenges we face in delivering high quality care and supports to older Australians, we have much as a sector to be proud of, and much to look forward to.

We want to spend more time talking about the future, putting forward positive solutions to the problems we face and highlighting the great work our sector does. That means we are developing a new way of advocating for you, our Members, and a more nuanced way of engaging with our key stakeholders, chief among them the Federal Government.

You will notice some changes in the way we do things. But we intend to bring our Members along with us by keeping you fully informed. You will also have plenty of opportunities to tell us what you think and ask questions along the way.

Aged care providers have spent a third Christmas-New Year period working long hours to ensure older Australians are protected from COVID-19. While this summer break, thankfully,

was nowhere near as bad as the last, providers and their staff were again stretched to the limit.

Out in the community things feel almost back to normal but in aged care – as it is for healthcare – the risk of infection remains high and PPE, testing and vaccinations are still a feature of daily life.

We can be thankful that the Federal Government late last year, and following significant advocacy, promised to maintain financial supports for providers managing COVID-19 outbreaks into the foreseeable future. We can also be thankful that the Government has reiterated its promise to fully fund the pay increase granted by the Fair Work Commission in the work value case.

But these pledges do not come without their own challenges. Firstly, we continue to call on the Government to improve the COVID-19 outbreak reimbursement process. It is clearly not acceptable to have providers waiting more than six months to have their COVID-19 spending reimbursed. If the new scheme continues this trend, it will make an already significant problem even worse.

Secondly, on the wages front we are yet to see the real colour of the Government's pledge to fully fund the outcome – a promise first made by the then Labor Opposition during the

election campaign last May. Until the Fair Work Commission finalises its decision on how and when the pay increases will be paid, and to whom, we will not get this detail.

And pay increases are only a part of the puzzle. We also need to focus on ways to speed up the entry of new and skilled workers to our workforce



ACCPA CEO Tom Symondson on Channel 9's Today show talking about the ongoing reality of COVID-19 in aged care, 6 February 2022.

and to help those already working in aged care to undertake training to improve their skills.

Then there is the challenge of creating a sustainable funding model for aged care that places our sector on level ground into the future.

The latest StewartBrown data from December shows that the financial viability of a majority of providers continues to worsen with residential care providers losing an average of \$21 per resident per day, or \$1.4 billion per year.

This is why we have put to Government in our Budget submission proposals aimed at supporting providers to meet the needs of older Australians. For example, an immediate injection of funding to make up for the lack of adequate indexation since the report of the Royal Commission recommended such additional funding.

We are also calling for investments that will immediately help older people receive the care they need, such as \$853m to clear the national home care package queue ahead of the new home care program in 2024.

Since its election in May 2022, the Albanese Government has picked up the pace of aged care reform. Aged Care Minister Anika Wells says there has been an overall 12 per cent increase in aged care funding to \$16.4 billion a year, and that funding per aged care resident under the new AN-ACC

residential aged care funding model has risen by 10 per cent to an average of \$85,000 per resident.

These increases are incredibly welcome. But they are not enough to stem the losses which are the product of decades of underfunding. They are also intended to fund delivery of new initiatives such as 200 minutes of care, rather than address the underlying shortfall.

But the Government is under huge financial pressure of its own. That is why we need to begin a national conversation about how we fund aged care. We also need to consider potential solutions long seen as taboo, like asking those who can afford it to contribute more towards the cost of their care.

The current low caps on consumer contributions and the exclusion of the family home from the asset test mean taxpayers are bearing the burden of funding those who could afford to pay more.

At a time when our sector is barely keeping its head above water, ACCPA intends to play a key role in the debate about the true cost of providing excellent care for older Australians, and how to meet that cost.

Surely, they deserve that much.

**Tom Symondson, Chief Executive Officer,
Aged & Community Care Providers Association**
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Progress on aged care reform

The Albanese Government's ambition for a better ageing experience



Two years have passed since the historic tabling of the Royal Commission into Aged Care Quality and Safety's final report. It was a document that started an uncomfortable but important national conversation about aged care in Australia.

The Albanese Government proved in our first six months, when we addressed 37 Royal Commission recommendations, we are ready for the enormous challenge of repairing aged care.

A new Aged Care Act, together with the implementation of in-home care reform, will address an estimated 35 additional recommendations.

The sector has worked collaboratively with us on our journey, with most providers approaching changes as an opportunity rather than punishment.

There are years of hard work ahead that will require a joint effort between the government, providers and stakeholders.

We must walk the same path for the betterment of older people in Australia, so that they can enter an aged care system they trust.

This is why you will constantly hear me say I have ambition for aged care. We should all seek more innovative experiences for care recipients.

I have visited more than 20 facilities since becoming Minister and have been incredibly impressed with the passion and hard work of the management and staff I have met.

They are faced with challenging conditions, including workforce shortages, but have inspiring determination to care for the vulnerable.

Which is why we are so proud to see the highest ever pay rate increase for Australia's hardworking aged care workforce.

Aged care workers deserve more than a thank you, more than a pat on the back, they deserve a pay-rise and that's why the Albanese government will fund the Fair Work Commission's decision.



Minister for Aged Care Anika Wells MP speaking with aged care workers and residents at Menarock Life - Claremont Aged Care in Tasmania.

This decision will help deliver more staff and more care so we can do what the Royal Commission asked of us.

A 15 per cent wage increase for registered nurses, enrolled nurses, assistants in nursing, personal care workers, head chefs and cooks, and recreational activities officers (lifestyle workers) will make a significant difference.

The personal care workforce is the largest occupation group in

the aged care sector and these workers are delivering one-to-one care, every day.

It is difficult work, yet a personal care worker with a Certificate III qualification is earning only \$940 per week.

The interim 15 per cent wage rise will take their pay to \$1,082.

This pay-rise will also help close the gender pay gap as women make up more than 85 per cent of Australia's aged care workforce.

Going forward, the Albanese Government will put the funding arrangements in place to deliver on our commitment to fund this wage decision, and more detail will be announced in the 2023–24 Budget.

Reforming Australia's aged care system demands a valued workforce, equipped with the right skills and knowledge to deliver care to older people.

We are right now assessing ways to boost the numbers of aged care workers, helping aged care providers recruit and train thousands of personal care workers to care for older people at home or in residential facilities, reforming in-home aged care and working on the National Dementia Action Plan.

I'm also pleased that people working in aged care will share their stories of the rewarding relationships between workers and the people they care for, as part of the 'A Life Changing Life' campaign which is already underway.

We must all continue to pursue the issues that matter the most to people and make sure older Australians are treated with the dignity and respect they deserve now and in the future.

The Hon Anika Wells MP
Minister for Aged Care and Sport

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Home services in focus

Commission's resources help home services providers to manage risk



Home services make a huge contribution to the wellbeing of older Australians and represent a substantial segment of the aged care sector. Well over 800,000 older Australians across the country benefit from Commonwealth-funded home services – which include Home Care Packages, Commonwealth Home Support Programme services, and flexible services delivered in their home. These services play a vital role in enabling individuals to continue living safely and as independently as possible in the community, for as long as possible.

As the regulator of home services, the Aged Care Quality and Safety Commission is always looking for new ways to ensure that home services providers are aware of their obligations under aged care legislation. We work hard to ensure providers have access to guidance and resources that not only assist them to comply with those obligations, but also encourage them to reach for continuous improvement so that every consumer has a great experience of care.

Recognising the pivotal role of governing bodies and senior managers in overseeing the performance of home services, the Commission has produced guidance specifically targeting this group – *Quality and Safety in Home Services – 5 Key Areas of Risk* – to help home services providers to develop and maintain effective governance, systems and processes to deliver safe and quality care.

From our analysis of complaints, performance assessments, compliance outcomes and other data and intelligence, the Commission has identified the following key areas of risk in home services:

- **Organisational governance** – Where a lack of oversight or inadequate organisational governance means that a provider is less able to identify deficiencies and continuously improve.
- **Care planning and assessment** – Where a failure to undertake appropriate assessment and care planning can deprive consumers of the care and services they need.
- **Clinical care** – Where poor clinical governance can result in poor outcomes for consumers (even where clinical care is not being delivered).
- **Vulnerable consumers** – Where a failure to identify (and appropriately support and monitor) vulnerable consumers can lead to particularly poor outcomes for consumers who are already at risk.
- **Management of package funds** – Where inappropriate use of Home Care Package funds or failure to consult with consumers regarding fees and charges can result in consumers receiving care and services that do not meet their assessed care needs.

The guidance document goes through each of these areas of risk, exploring what providers should consider in reviewing their performance, what they need to focus on, and where they can get further information. At the end of the document, we provide a risk checklist tool that home services providers can use to critically examine their organisation's performance and identify areas for improvement.

It is important to note that as the Commission undertakes monitoring and assessment activities – to assess risk and to determine compliance with the Quality Standards – we will be looking at the same types of evidence as a governing body should be examining to assess their own organisation's performance. In undertaking this self-assurance process, governing bodies can proactively identify issues and concerns that can then be addressed by the organisation.

The Commission is keen to work with providers to lift performance in the home services sector, including by embedding a culture of self-assurance where providers routinely and independently review their performance and ensure that they are meeting their obligations.

This will help providers successfully implement the reforms recently introduced in the sector and those yet to come. For example, fully leveraging the benefits of the Serious Incident Response Scheme in home services is only possible if a governing body is paying close attention to the organisation's compliance with requirements under the Scheme, including having an effective incident management system in place in the service. Similarly, the introduction of the Aged Care Code of Conduct applying to all approved providers, governing persons and workers provides a great opportunity for an organisation to take stock of its workplace culture and take initiative to address any areas for improvement in collaboration with staff and also consumers.

Home services providers and the Commission have the same goal – for aged care consumers to receive safe, quality care that supports and promotes their wellbeing and quality of life. The Commission recognises that it shares responsibility with home services providers for ensuring that they know and understand what they are required to do, and have access to relevant guidance and other resources to help them to comply with those requirements.

The Commission's website www.agedcarequality.gov.au offers a wide range of resources to help providers on their journey towards excellence. We are looking to home services providers, and in particular their governing bodies and executives, to make good use of all available information and assistance to enable them to become high performing organisations.

Janet Anderson PSM
Commissioner
Aged Care Quality and Safety Commission



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Preparing for a new in-home aged care program

What home care providers need to do now

Over the last 12 months, aged care providers have seen activity to progress the design of a new in-home aged care program unfolding. While there is still some detail to be confirmed on final program design and transition, the Department's more recent sector engagement provides considerable insight into the shape of future program design.

With the design needing to be finalised for the Federal Government's consideration prior to the May 2023 Federal Budget, and additional expenditure required across 2023–24 to bring the new program to fruition by July 2024, there will certainly be a considerable progress to communicate in a short period of time.

Now, providers are asking what they need to consider to prepare for the new program.

Home care price capping

Capping arrangements commenced recently and included adjustment of the definitions for package and care management, as well as cost assignment in engaging third-party services and supplies.

The new care management definition excludes rostering and provides 'line of sight' on how care management services will likely be structured in the new program. Capping arrangements also highlight the need to develop all-inclusive service prices, structured to account for balancing the demand for services that span both in-house and third-party services and supplies.

Determining price structures matched to these changed arrangements will help align your current service offerings and pricing with those of the new program. Investing time to get this right can help prevent the need for further substantive price restructuring later when other competing demands will be apparent.

Grant funding

Proposed grant funding arrangements for the new program will likely target service providers of thin or niche markets; specialised support services; goods, equipment, and assistive technology (GEAT) services; and services with high capital costs. There has even been exploration of care management being funded through a grant arrangement.

Current Commonwealth Home Support Programme grant funding arrangements provide insight into the way grant funding for the new program may be progressed. This includes targeting the delivery of services against contracted outputs at set unit prices matched by evidence of cost. There may also be routine performance reporting on delivered outputs.

In this context, the option for grant agreement reviews within the term of the grant and applying variations to agreements when required will ensure the efficient use of funding to improve funding performance in addressing targeted service needs.

By implication, providers likely to apply to deliver grant funded services will need to maintain robust unit-level cost and demand data for their targeted services. This may require procurement of essential ICT infrastructure if not already being utilised.

Workforce

Growth in demand for in-home age care services in the context of an ageing population has been, and continues to be, one of the single biggest challenges facing the aged care sector.

Forecasting indicates that demand for care and support services in Australia has already started to outpace the supply of care and support workers. This burgeoning supply-demand gap will continue to grow.

In this respect, staff recruitment and retention will be a key area for ongoing provider investment alongside workforce development and training.

Research has identified that the two most important determinants of consumer choice of aged care service providers is their experience of respect and dignity in receiving services, and aged care staff having the skills and training needed to provide appropriate care and support.

Providers will also need to account for the outcomes of the Work Value Case and any corresponding funding changes relative to a future program focus on efficient pricing while growing their care and support workforce.

Quality

Activity can also commence in terms of strengthening service quality aligned to the revision of the Aged Care Quality Standards that is currently underway, noting the Commission's pilot of the draft Standards application during 2023.

OUR SENIOR CONSULTANTS



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Service quality attainment by providers needs to be mapped against the Standards with services priced efficiently and competitively, noting the new program will drive competition based on quality matched by an efficient price.

Monitoring current pricing schedules across the various in-home care programs will help in understanding where efficient pricing will likely land relative to the revised Standards.

Pressure is also emerging for the future convergence of efficient pricing and harmonisation of regulation in the context of continuing workforce supply gaps across Australia's broader human services sector.

While the preceding observations highlight some specifics where home care providers should be investing their time and resources in preparation for a new in-home aged care program, a watching brief on the broader reform implementation approach will be essential for successfully managing change.

**Troy Speirs, Senior Policy Advisor,
Aged & Community Care Providers Association
www.accpa.asn.au**



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A job well done deserves a helping hand

With the ongoing COVID-19 pandemic, providers need better support and faster compensation

Three years ago, the world changed. Aged care providers had to deal with something quite unexpected that was on a grand scale.

Not only did COVID-19 affect the people they provide care for and their families, it also affected every aspect of providing aged care. It affected staff and their families, contractors, volunteers, suppliers, their community and even the ability to get to work – all at a time when governments and researchers were urgently trying to understand what COVID-19 was and how best to respond.

It is testament to all that in 2023 we are now talking about managing COVID-19 as business as usual while understanding there is a heightened need for continued action to minimise the chance of infection and manage any cases. Aged care providers cannot do this alone and need care recipients, their families and friends, as well as the community, to take positive actions to protect older Australians, such as getting vaccinated, wearing a mask, taking a rapid antigen test and not visiting when unwell.

While the world has changed and it is likely COVID-19 is here to stay for a very long time if not forever, aged care providers are now more resilient and better prepared than three years ago, not only to manage COVID-19 but also other infectious diseases.

But things have changed. Aged care providers need to remain vigilant ensuring staff are trained regularly in infection prevent and control; care recipients and families need to understand what a COVID-19 outbreak might mean for them; preparedness and outbreak management plans must be regularly reviewed and updated as necessary; sufficient levels of personal protective equipment need to be maintained; and staff and care recipients must have access to vaccines and medicines.

The big challenge of course is getting a good understanding of the options available to secure additional staff resources when staff are unable to work. There are no easy answers to this issue, but providers should continue discussing options with their staff and consider involving their community including volunteers, other aged care providers and other health professionals.

A significant issue for many aged care providers over recent months has been the delay in the assessment and payment

by the Government of their COVID-19 aged care support program extension grant applications.

There have been significant delays (more than six months) by the Department of Health and Aged Care in the processing of grant applications lodged by aged care providers seeking reimbursement of additional expenditure incurred in managing COVID-19 outbreaks. Such delays place financial pressure and stress on aged care providers – at a time when they need more support to provide quality care.

Members have told us these delays have resulted in increased interest; stress in managing daily cashflow including working capital; financial reporting issues that for some meant the difference between recording a surplus and a loss; had a negative impact on financial viability; and difficulties with making normal or reasonable business decisions on the allocation of funds.

The Government has indicated to ACCPA that the delays substantively relate to errors and data omissions in the grant applications it has received from providers. We believe it is the responsibility of the Government and the Department to put in place a system whereby providers are paid appropriately and in a timely way for the additional costs necessarily incurred in managing COVID-19 outbreaks. Anything else is not good enough.

ACCPA understands the Department has recruited additional assessors and is streamlining processes and looks forward to there being a noticeable reduction in the time it takes for providers to be paid for the additional costs reasonably incurred in managing COVID-19 outbreaks.

The Government has also announced there will a new COVID-19 aged care support grant for aged care providers for expenditure incurred between 1 January 2023 and 31 December 2023. However, at the time of writing, the details of this new grant have not been released, leaving aged care providers unaware of what additional expenditure will be eligible for reimbursement under the new grant.

Ultimately, ACCPA would like to see a simplified arrangement put in place where providers are paid a daily rate per care recipient for the increased costs incurred in managing COVID-19 outbreaks. This would reduce the administrative burden on providers in preparing grant applications and on the Government in assessing grant applications. Such an approach would significantly reduce the time it takes for providers to be paid so they can get on with providing quality care.

Aged care providers have done an outstanding job protecting older Australians during the COVID-19 pandemic, and should be congratulated, not placed in a position where they experience further undue stress.

**Derek Dittrich, Principal Policy Advisor,
and Deidre Gerathy, Senior Policy Advisor,
Aged & Community Care Providers Association
www.accpa.asn.au**

ELDAC Dementia Toolkit

The ELDAC Dementia Toolkit offers evidence-based resources about palliative care and advance care planning that can assist you and your organisation in supporting the end of life needs of people with dementia and their families.



The toolkit is designed for health professionals and aged care staff and is a free online resource that is user-friendly, evidence-based, and developed by aged care experts. The Dementia Toolkit contains 2 main sections with information, tools, and downloadable resources to use across care settings.

Clinical Care

- Information on dementia
- Clinical assessments and resources for palliative care and advance care planning organised according to the ELDAC Care Model's 8 clinical care domains
- Best practice management of pain, nutrition and responsive behaviours
- Resources for families.

Education and Learning

- Opportunity to evaluate your dementia knowledge
- Dementia Personal Learning Plan to focus your education needs
- Recommended dementia education and resources to meet your learning goals
- Links to online websites and resources.

**The Dementia Toolkit is
available on the ELDAC website:
www.eldac.com.au**

Supported bargaining in the aged care sector

What every employer needs to know

On 7 December 2022 the *Fair Work Legislation Amendment (Secure Jobs, Better Pay) Bill 2022* became legislation. This new legislation has brought a number of significant changes to how employers, employees and unions will interact in the employment environment. The most significant of the changes are in relation to enterprise bargaining and, for the aged care sector, the Supported Bargaining and Single Interest Enterprise Bargaining provisions.

The aged care sector is no stranger to enterprise bargaining as there are a large number of enterprise agreements in place, however many have passed their nominal expiry dates. This will bring to the fore the changes to the legislation governing bargaining and the making of new agreements.

From 6 June 2023 (if not proclaimed earlier by Minister Burke), the new Supported Bargaining and Single Interest Enterprise Bargaining provisions will become operative. Both will impact on the aged care sector however this article will focus on the Supported Bargaining provisions.

The Supported Bargaining provisions are specifically aimed at aged care, disability care and early childhood sectors which are seen by the Government as sectors that have employees and employers who may have difficulty bargaining at the single-enterprise level, and are aimed at increasing wages in these sectors. It is unclear as to how this will occur and what, if any, additional funding would be provided by the Government to facilitate the increase.

There are provisions for the main funding body (e.g. the Department of Health and Aged Care for the aged care sector) to be brought into the bargaining process by the Fair Work Commission (FWC). The FWC cannot however direct the Department agree to provide a particular level of funding to employers to cover the costs of increased wages under a new agreement.

An enterprise agreement made under the Supported Bargaining provisions is an agreement that covers two or more employers and has resulted from a Supported Bargaining Authorisation. An Authorisation can be applied for through the FWC by a bargaining representative or an employee organisation.

The FWC will need to be satisfied that it is appropriate for the employers and employees to bargain together (as per a set criteria), that the employers don't have agreements that are still within their nominal expiry dates, and that the employee organisation covers at least some of the employees involved. The views of the employers and their bargaining histories would be taken into account but the Authorisation can still be made if the employers are not consenting to their participation in bargaining for this agreement.

Employers can also be drawn into coverage of an agreement made under Supported Bargaining by an employee organisation (e.g. the Health Services Union or the ANMF) making an application to the FWC. These applications can be made when the majority of employees want to be covered under such an agreement. If the employer wants its employees to be covered by that agreement then this is an easier way to move on to a new agreement.

If however the employer does not want its employees to be covered by the agreement then there is the high potential for an adverse outcome. Under this process the Department may or may not be brought in by the FWC given that no Authorisation would be in place but the FWC does have other powers that could be utilised for that purpose.

It is of great concern that a union or unions can apply for a protected action ballot under Supported Bargaining and this can apply to a number of employers involved in the bargaining. If the ballot is successful then protected industrial action can be taken by union members employed by an employer or multiple employers covered by the outcome of the ballot.

Overall there are many aspects of this new legislation that are of concern to employers in the aged care sector. ACCPA did much advocacy when the Bill was before Parliament and will continue to take up any opportunities that arise for advocacy on this front.

ACCPA will support its Members with any issues around enterprise bargaining that they may encounter, and Members can access this help by calling 1300 222 721 and asking to be transferred to employment relations. It's important aged care employers get the right support and advice.

**Claire Bailey, Workplace Relations Manager,
Aged & Community Care Providers Association**
www.accpa.asn.au

Accelerate your learning

Leadership training for busy people

There's no doubt training at all stages of your career is a good thing, but when it comes to leaders and managers, we can sometimes forget that a promotion doesn't come with a how-to manual.

For the vast majority of people, leadership skills are not innate, they must be learned. When it comes to leadership in aged care, it can look very different to leadership in other industries. There are issues and experiences that are very specific to the aged services industry, and they must be carefully managed to get the right outcomes.

With ongoing workforce pressures and constantly changing regulations, the job of an aged care leader is especially challenging and multi-faceted. From repositioning your brand to transforming your workplace culture, and providing a high level of quality care to older people, the consequences of getting it wrong are significant.

It goes without saying, that leaders in aged care need support, not just to perform in their role to a high level, but also to give them a safe place to explore the possibilities, and opportunities for networking with their peers.

It might take a village to raise a child, but it also takes a village to support our leaders. That's why Aged & Community Care Providers Association (ACCPA) has stepped in, to provide a range of supports specifically designed for aged care leaders and managers, providing insights that will sustain them in times of crisis and competition.

ACCPA has two tailor-made programs – the six-month ACCPA Comprehensive Leadership Program and the fast-tracked three-month Leadership Accelerator Program. While the ACCPA Comprehensive Leadership Program involves online coursework and coaching for a deeper dive into the core practices of leadership in aged care, the ACCPA Leadership Accelerator Program can be completed with six two-hour interactive workshops.

The ACCPA Leadership Accelerator Program allows you to 'pick and pack' the modules you wish to undertake, or you can register for the whole set. It also comes with optional CILCA 360 analysis, which assesses leadership capability by combining data from self-assessments as well as feedback gathered from peers to identify strengths and opportunities for development.

The ACCPA Leadership Accelerator Program is ideal for new and emerging leaders who want to grow their professional leadership capacity quickly, simply, and practically. It's also a great way for seasoned professionals to refresh their understanding and update their leadership toolkit. The program is designed to cultivate key leadership criteria and skills outlined in the Australian Aged Care Leadership Capability Framework.



Leadership Accelerator Program facilitator Bruce Williams says the program is designed to equip leaders to be their best

The series is just as suitable for those in operational and clinical roles who may be supervising others for the first time, as well as those in corporate roles who have more experience.

Packed with hands-on experiences and real-world applications, participants will also have access to a toolkit of supporting materials and resources for ongoing personal reflection and development.

Facilitator and leadership expert Bruce Williams, who has over 40 years' experience in delivering leadership programs and executive coaching, says the program is underpinned by established and contemporary leadership theories, which are tried and tested. Along with practical strategies, tip sheets and resources lists, participants can apply the learning immediately.

"Nothing excites me more than helping people discover they already have everything they need to show up, step up and speak up in service of others like the leaders they know in their hearts they want to be," says Bruce.

Rated 4.7 stars out of 5 by previous participants, it has strong support from people in the business. Michelle Wallis, Quality Assurance Officer at Amana Living, is one of many for whom the course has been extremely helpful.

"Bruce is an engaging and entertaining speaker, he knew how to get maximum engagement from the audience, even with the added challenge of being 100 per cent online," she said.

"The content was easy to understand and I'm looking forward to applying the learnings to my role."

With the first ACCPA Leadership Accelerator Program for 2023 already underway, there are two more scheduled for the year: 4 May to 13 July and 12 September to 21 November. Register online on the ACCPA What's On Training Calendar.

Linda Baraciolli, Aged Care Today Editor & Communications Advisor, Aged & Community Care Providers Association
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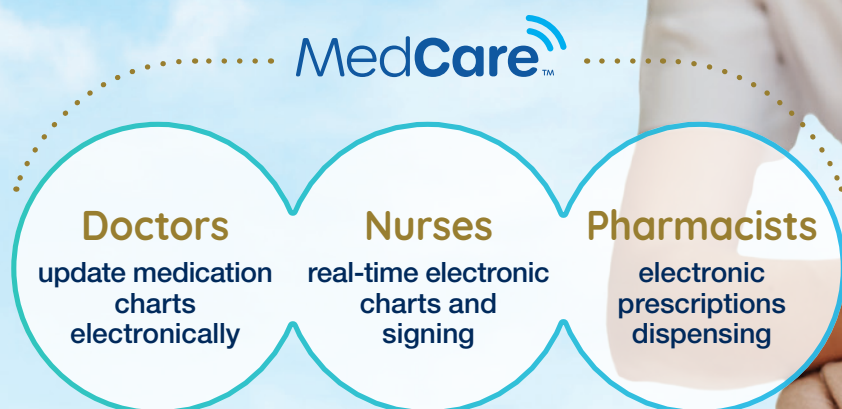
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Workforce roadmap for aged care providers

Creating cultures that make yours a workplace of choice

A motivated workforce is integral to effective service delivery; however, you may be surprised to know that the single most important predictor of a positive client experience is the employee experience.

In this climate of skill shortages, employers of choice are creating cultures that embrace, empower and provide meaningful engagement, where workers can experience the satisfaction of making a real difference.

The aged care sector offers a wealth of opportunities for personal enrichment, both in roles that include direct daily interaction with older Australians or as a part of a team delivering governance, leadership, management or administrative functions.

But how do you create an employee experience that attracts new employees to your organisation and enriches your current workforce?

One way is to understand your employee's journey, from onboarding, mentoring and performance development, through to functioning as a member of a high-performing team and primed for career advancement.

Underpinning employer of choice cultures is psychological safety, which fosters a 'growth mindset', creates greater connection between employees and those who they serve, and encourages a learning culture where robust discussions can occur safely to identify best solutions for the delivery of quality and safe care.

Aged & Community Care Providers Association (ACCPA) has developed a new training series to help aged care providers become employers of choice, by providing a clear roadmap for leaders and managers.

Designed as accessible short learning bites, the Fostering an Employer of Choice Culture program will give aged care providers the latest tools and understanding to help them attract, recruit and retain 'right fit' employees.

The short 'Learning Bites' format – a selection of 10 information videos – is ideal for the time-poor professional who is keen to implement cultural change or as a tool for human resources professionals to promote linked strategies for recruitment and market positioning.

You can 'pic n mix' the Learning Bites that are most relevant to your specific workforce challenges, to make the most impact.

Delivered by experts in leadership and human resource recruitment and management, participants get to explore key strategies, with each video designed to stimulate thinking and

act as a springboard for team discussions. Each learning bite has an accompanying tip sheet for practical application, and a reading list for the series is provided for further exploration.

Five of the 10 Learning Bites are delivered by experts from ACCPA Industry Partner Above & Beyond Group, a leading recruitment and human resources consultancy which provides workforce strategies and solutions for the aged care sector.

Above & Beyond Group CEO Laura Sutherland says, "The Learning Bites we've delivered are in response to what we're hearing from aged care providers about where they need the most support in the current environment.

"The series spans across attraction, engagement and retention. It showcases practical and actionable steps you can take to stand out as an employer in the job market. Because we're in the midst of a severe skills shortage, we want to give you the edge to compete for talent in a highly contested market.

"We also explore strategies for tapping into wider, broader talent pools with a future-focused lens. The series then dives into engaging your staff on a deeper level, how to really get that magic out of them and get them invested in your organisation, so that retention and productivity can improve."

Tegan Roberts, WID Product Development Manager at ACCPA, says the the Fostering an Employer of Choice Culture program is ideally suited to those organisations that want to get ahead.

"The series explores how to attract the 'right fit' workforce, leverage your organisation in a contested market, maintain connections for remote workers, apply a local employment advantage, promote inclusivity, celebrate diversity, and foster creativity and innovation," says Tegan.

"Knowing how to engage individual employees and create flexible cultures that support psychological safety, training opportunities, job enrichment and growth opportunities, ensures that your employee value proposition is by design and not default, and you are 'living your brand', showcasing your point of difference to attract employees that are 'right fit' for your service delivery needs."

The Learning Bites series is accessible on desktop, tablet or mobile devices and offers practical strategies for immediate application in the workplace. Access to the Fostering an Employer of Choice Culture program is free to Tasmanian and Victorian providers that are registered in the Home Care Careers workforce support program.

Linda Baracioli, Aged Care Today Editor & Communications Advisor, Aged & Community Care Providers Association
www.accpa.asn.au/professional-development



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Learning opportunities in aged and community care nursing

ACCPA supporting new graduates

Aged and community care nurses are already one of the most in-demand professions in Australia. This demand will grow as aged care providers prepare for upcoming sector reforms from 1 July 2023 when providers will have to ensure that at least one Registered Nurse is on site, and on duty, at all times at a residential facility.

Committed to supporting the aged care workforce, Aged & Community Care Providers Association (ACCPA) has developed a tailored training program for newly graduated Registered Nurses and Enrolled Nurses to prepare them for a career in aged and community care, as well as for experienced Registered Nurses who are new to aged care.

Our Nursing Transition to Practice Programs support participants with an encouraging environment, engagement, training, networking opportunities and inductions.

There are many opportunities for career progression, practising of clinical skills, leadership development and lifelong learning in aged and community care nursing.

Xinjian Song joined the program in February 2022 as a newly graduated Registered Nurse and is currently working at Hardi Aged Care in NSW. Reflecting on his time in the program, he said, "I feel extremely lucky to join such a professional transitioning program in the aged care sector. So many experts share their knowledge and experiences, which has supported my learning journey."

As a new staff member at the residential aged care facility, Xinjian was more than willing to embrace the theoretical and practical learning opportunities on offer.

In aged and community care, nurses build strong relationships with doctors, specialists and other medical professionals who rely on their experience with the patient and work with them to achieve the patient's health goals.

"I have gained a wide variety of knowledge on clinical care topics including dementia care, wound care, palliative care, common diseases, and advance care directives as well as the legal aspects of residential aged care," said Xinjian. "I now have an overall idea of clinical governance and essential



Registered Nurse Xinjian Song (left) says the ACCPA training program boosted his confidence.

clinical leadership skills which I had never previously heard of. Both help me understand preventable harm, governance, compliance and complaints management, and building organisational cultures of learning.

"On top of dementia care and restrictive practice updates, I have strengthened my understanding of communicating with family members and care recipients.

"One of the most interesting experiences was learning how to differentiate between feedback and complaints. I now understand behaviour management in an aged care facility and the legal requirement of a behaviour support plan."

Xinjian also recognises how the program has helped him realise that there is so much more to learn, and he is eager to discover more about career pathway opportunities for Registered Nurses in aged and community care.

"It is challenging, and you'll come across many different settings and situations. I strongly recommend ACCPA's Aged Care Nursing Transition to Practice Program because after participating for 12 months, I feel it has covered all the subjects I need to learn. I've gained great confidence and knowledge working as a Registered Nurse in the sector," he said.

There is no denying the integral role of Registered Nurses in delivering high quality care for our older Australians. In aged and community care, there are opportunities to help older Australians achieve their care goals in an holistic way and experience a sense of fulfilment that is difficult to find elsewhere in nursing.

The next ACCPA Aged Care Nursing Transition to Practice Program starts on 28 August for newly graduated Registered Nurses or Enrolled Nurses and Transitioning Nurses looking to start a career in aged and community care.

Alexandra Harrison, Workforce & Industry Development Information Coordinator & Helen Li, Service & Sector Capacity Information Officer, Aged & Community Care Providers Association
Nurses register here: www.employment.agedservicesworkforce.com.au/acttpp_nursing
Organisations register here: www.employment.agedservicesworkforce.com.au/acttpp_organisation

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What does excellent care look like and what do we need to deliver it?

Boost your ability to steer your organisation in the right direction by joining one of ACCPA's 'Driving Quality Care' State Conferences.

With topics across residential care, home care and retirement living this is an excellent professional development opportunity for CEOs, executive teams, managers and care workers. There will also be a comprehensive Trade Exhibition and plenty of valuable networking opportunities.

With four conferences across Australia, you won't need to travel far to experience our outstanding speakers, panel sessions and provider showcases – we're looking forward to supporting your organisation in driving quality care.

ACCPA State Conferences are designed to equip you with the skills and insights you need to navigate new regulations and expectations in 2023, including:

- how to achieve and maintain quality care
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ACCPA events kick off in 2023

ACCPA returns to face-to-face networking, starting in Melbourne

After a two-year delay due to COVID-19, the Melbourne Care & Ageing Well Expo was held at the Melbourne Convention Exhibition Centre 11-12 February, kicking off a program of face-to-face events for the Aged & Community Care Providers Association (ACCPA).

Australians are growing older, with more than 4.1 million Australians – almost 16 per cent of the population – aged over 65. By 2057, this will rise to 8.8 million – or 22 per cent of the population – and by 2097 it will reach 12.8 million people, or one in four Australians.

The Care and Ageing Well Expo – established in Perth in 2017 – is focused on providing the latest information about aged care to senior Australians.

Having built a strong reputation with five Expos held in Perth over recent years, ACCPA CEO Tom Symondson says as the conference expands across Australia, it will play a key role in advocating on important issues affecting older Australians, into the future.

“The Care & Ageing Well Expo aims to inform and enable older Australians and their families to explore how to age well with confidence,” said Tom.

“The way we care for older Australians, new technology, different styles of in-home care and different options for aged care homes are supporting older people to live healthy and productive lives, the way they want.”

Commissioner for Senior Victorians Gerard Mansour believes the expo platform is an important way to connect people and develop insights within a jurisdiction.

“Ageing in Victoria today should be an experience characterised by connection, respect, purpose and support, however that’s not the case for every person,” said Gerard.

“I’m passionate about sharing insights shaped by senior people across the state, about how we as a community can



Jean Kittson was at the Melbourne Expo for book signing.



The Expo provided the latest information for seniors.

better support every person to age well.”

The expo allowed visitors to compare products and services, talk to experts in their fields and attend the many seminars that will address everything from legal services to healthy eating.

More than 80 exhibitors including residential care, home care, retirement living, equipment, service providers, health care, legal and financial, medical, consultants, technology and support groups participated, while the Lifestyle Stage provided a continuous stream of information from industry

experts and discussion panels, to allow audiences to ask questions.

The next major events on the ACCPA calendar will be aimed at industry leaders, and will provide outstanding opportunities for learning and networking.

State conferences are able to focus on local issues, and equip participants with invaluable knowledge, as well as help build connections with peers working alongside them in the same jurisdiction.

This year’s ACCPA state conferences will focus on the theme of driving quality care, and the many aspects around that, from innovation to financial sustainability.

They will be held in the Gold Coast 18-20 April, Sydney 29-31 May, Melbourne 13-15 June and Perth 28-30 June. These will culminate in ACCPA’s National Conference in Adelaide 25-27 October.

“There is no better opportunity for industry leaders to come together to be strengthened, supported, and learn,” said Tom.

“We’re delighted to be able to bring back face-to-face programs in 2023, and look forward to strong attendance across Australia.”

Linda Baracioli, Aged Care Today Editor & Communications Advisor, Aged & Community Care Providers Association
www.accpa.asn.au/professional-development

Why outsourcing payroll is a good idea

ACCPA provides outstanding support

Many aged care providers are not adequately resourced with a full-time dedicated payroll team, and this can create a host of issues, so it's worth considering the alternatives.

Usually, aged care facilities have one person doing different tasks including payroll, and if the staff member is on leave, then staff pays get affected or could be at risk. When there are delays with the processing of pay, there are likely to be impacts on staff morale and the way your organisation is perceived as an employer.

Overtime and shift allowance can be complex, and errors can have an impact on individual staff pay. There is also the issue of applying the correct tax rate and superannuation, based on the Tax File Number and Australian Taxation Office requirements.

Not just fortnightly, organisations need various pay runs, month-end, and year-end reports, to manage their back-end finance requirements. Australian Tax Office's new Single Touch Payroll (STP) Phase 2 also has a lot more reporting requirement than previously.

In addition, we are seeing continual changes in legislative compliances, with award pay increases usually coming at short notice. Organisations need to bear the cost of payroll system implementation and ongoing maintenance to keep up with legislative requirements. If you do not have staff monitoring these changes and applying them, you risk becoming non-compliant.

Outsourcing payroll can relieve some of the burden in your operations. By accessing an experienced and dedicated team to take care of your payroll externally, you can ensure the processing of timely and accurate pay, and importantly, maintain compliance and uphold your reputation.

Aged & Community Care Providers Association (ACCPA) is highly experienced in payroll accounting. Working closely with an in-house employment relations team, the ACCPA payroll team is proficient in interpreting the complexity of awards and enterprise agreements and applying them accurately.

Our team is experienced to apply any changes as and when they occur. If retrospective payment is required, then back pays are calculated accurately as well. We ensure all required reports are provided on time to support your finance team, and we can provide *ad hoc* reports as required.

We ensure employees are enrolled in the correct leave accrual, enter leave applications as advised and maintain and provide accurate leave balances. As some leave entitlements can vary between jurisdictions, we ensure we are aware of the appropriate entitlements.

We update superannuation guarantee each year as per the legislation and ensure that the correct superannuation is paid, as super shortfall can be very costly for employers. Each month we provide accurate super contribution reports to our clients.

We have a dedicated team, and our team works across various awards and agreements, thereby mitigating risks for our clients. By outsourcing payroll to ACCPA, clients save on all systems related costs and any other configuration issues, staff are paid accurately and in a timely manner, and management gets all-important peace of mind.

If you're considering outsourcing your payroll in 2023, talk to ACCPA to find out how we can help.

Jaideep Jhala, Payroll Manager,
Aged & Community Care Providers Association
www.accpa.asn.au/payroll-claims-billing

The ACCPA Symposiums have been designed with Aged Care Board Directors, Executives and Management from across Residential Aged Care, Home Care, Retirement Living and Seniors Housing Providers in mind. The program will include a range of speakers, presentations and important industry updates as we continue navigating the current reforms and discuss how we can continue to deliver excellence in aged care.



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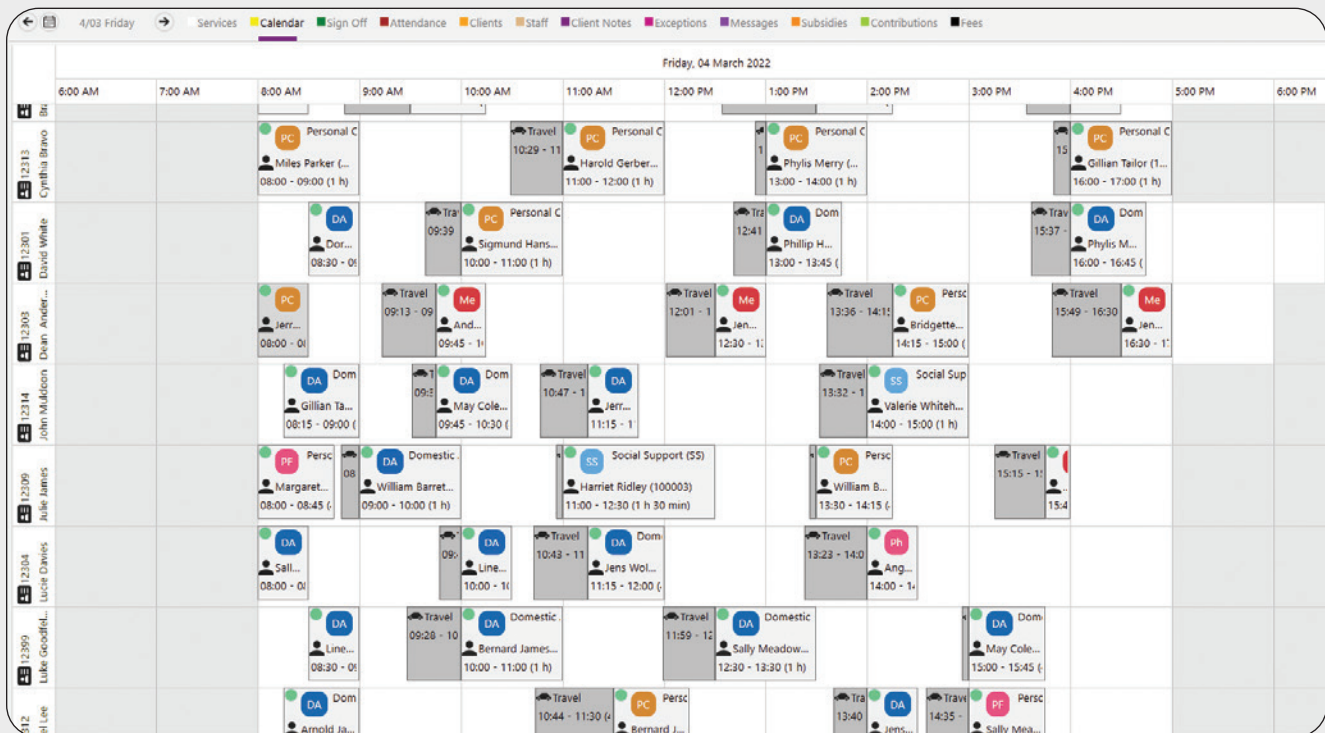
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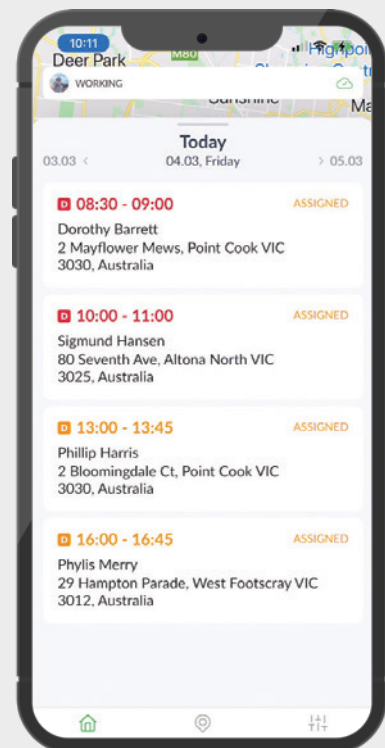
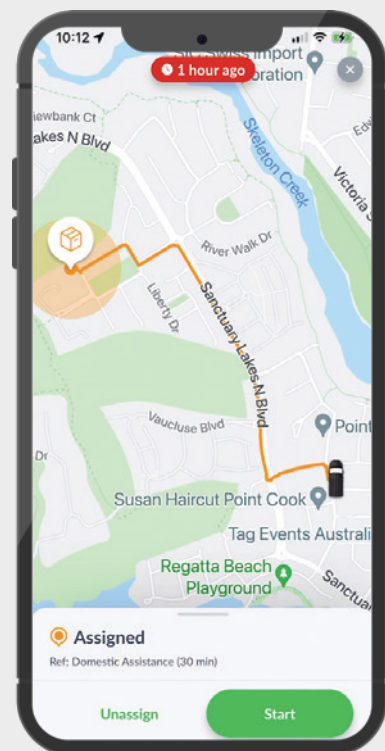
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Meaningful consultation is vital

Understanding the full story for best-practice dementia care

Dementia Australia's *Half the Story*, a guide co-authored by people impacted by dementia, was developed to support organisations to engage in meaningful consultation with people living with dementia, their families and carers.

Meaningful consultation can include any activity where the primary aim is to seek out, affirm and ratify the voices of people living with dementia, their families and carers. You may see this type of activity often described as engagement, participation or involvement. Those who take it on will often find it requires them to work differently than they did in the past, although often only involving simple but impactful changes.

Whichever way you describe it or go about it, meaningful consultation at its core is a genuine commitment to giving people impacted by dementia a voice which is listened to, respected and valued.

Meaningful consultation is necessary to understand the full story. As an advocate living with dementia told us during the process of creating *Half the Story*, "You cannot feel what it is like inside our minds. Without us, you only have half the story."

People impacted by dementia can experience negative stereotyping, stigma and discrimination. They are also at risk of having their decision-making power taken away.

When we consult in an accessible way we then have the opportunity to remove or reduce the physical, environmental and societal barriers that prevent people living with dementia from participating.

People living with dementia, their families and carers have important things to say about life with the condition, their hopes for the future, and areas where better support is needed. Through meaningful consultation, you can identify opportunities for improvement and develop solutions together.

Meaningful consultation respects advocates' dignity and human rights, recognises their knowledge and skills, amplifies voices that need to be heard, and involves people in decisions that will affect their lives. It can also dispel myths and misconceptions about dementia. It ensures your project is ethical and meets the needs of people living with dementia, families and carers.



Half the Story is a guide co-authored by people impacted by dementia.

Participating in meaningful consultation is empowering for people impacted by dementia. It is an opportunity to become a community champion, create positive change and break down discrimination.

As of 1 December 2022 all new aged care providers, and all existing providers from 1 December 2023, are required to offer to establish a consumer advisory body at least once every 12 months (this requirement does not apply to state or territory approved providers or authorities or to local government authorities). Aged care providers must also establish a quality care advisory body to support and inform the governing body in adherence to the dates listed above. To this end, *Half the Story* – available for free from the Dementia Australia website – provides a really useful resource.

Organisations that engage in meaningful consultation can receive a world of benefit in return. People living with dementia, families and carers are experts in 'lived experience'. They can provide unique insights and ideas to improve your service provision. They can identify shortfalls, gaps or unmet needs.

Meaningful consultation may mean that you need to work differently, put in extra effort and be open to new ideas and processes. This will allow people living with dementia to continue to participate in and shape the communities in which they live after diagnosis in a way that has them respected, valued and accepted.

Maree McCabe AM, CEO,
Dementia Australia
www.dementiafriendly.org.au

Maximising quality of life

How an enriched model of support can help those with dementia

According to the Australian Institute of Health and Welfare, the number of Australians living with dementia will more than double by 2058 – from 386,200 in 2021 to 849,300 in 2058.

In 2020, dementia was the second leading cause of death in Australia, accounting for 14,500 deaths (or 9.6 per cent of all deaths). It was the leading cause of death for women and the second leading cause for men, after coronary heart disease.

Dementia is a progressive cognitive disabilities condition, with Alzheimer's disease being the most common cause. People living with dementia are more likely to require care and support at home as well as residential and hospital care for age-related ill health plus additional support as the condition evolves.

As the person's dementia journey progresses it's likely that, without an enriched support model, they will experience Behavioural and Psychological Symptoms of Dementia (BPSD). This may include apathy, sleep problems, irritability, depression, anxiety, psychosis, aggression, wandering and increased levels of distress and agitation, which can be distressing for those living with dementia, their carers and family members.

Because of BPSD, older people living with dementia are more likely to see their condition adversely impact their quality of life compared to those without dementia.

A better, evidence-based approach

Poor understanding of the cause and impact of BPSD is more likely to increase levels of carer anxiety and naturally prompt

them to become risk averse, conservative or restrictive in the care and support they provide.

Therefore, it's important for anyone in a caring role, whether professionally or otherwise, to understand how the person's specific dementia affects them, not only day-to-day but in the longer term.

This enriched model of support ensures carers know how to provide person-centred approaches so that symptoms of BPSD are reduced rather than just accepted as an inevitable consequence of the condition.

It helps carers better understand the person's unique journey, their life, their relationships and the personal impact dementia, which results in a reduction in BPSD while restrictive practices can be eliminated or minimised.

The person-centred approaches also help carers tailor care and support to families and loved ones of the person with dementia. By empowering carers and families with the essential knowledge, skills and approaches to use an enriched model, there is a direct impact on the quality of life of the person living with dementia.

The evidence on the positive impact of an enriched model of support is clear; without an enriched approach, symptoms of BPSD can become unmanageable, resulting in greater use of restrictive practices such as environmental and physical restraint, as well as increased use of antipsychotics and sedatives.

The symptoms we're talking about here are not an inevitable consequence of dementia but more likely a result of care and support that is not tailored to the unique needs of each person living with dementia.

In my experience, after over 40 years in the health, social care and education sectors, I've seen the value of mitigating and minimising restrictive and coercive practices. In my role today, I focus on helping organisations implement the enriched model, bringing great relief to carers, loved ones, and most importantly, people living with dementia.

The Crisis Prevention Institute offers training programs designed to assist organisations reframe the way they manage BPSD, and stands ready to help aged care providers with all their learning needs. You can find out more at the Crisis Prevention Institute's YouTube channel or our website.

**Chris Stirling, Senior Vice President,
Crisis Prevention Institute
www.crisisprevention.com**



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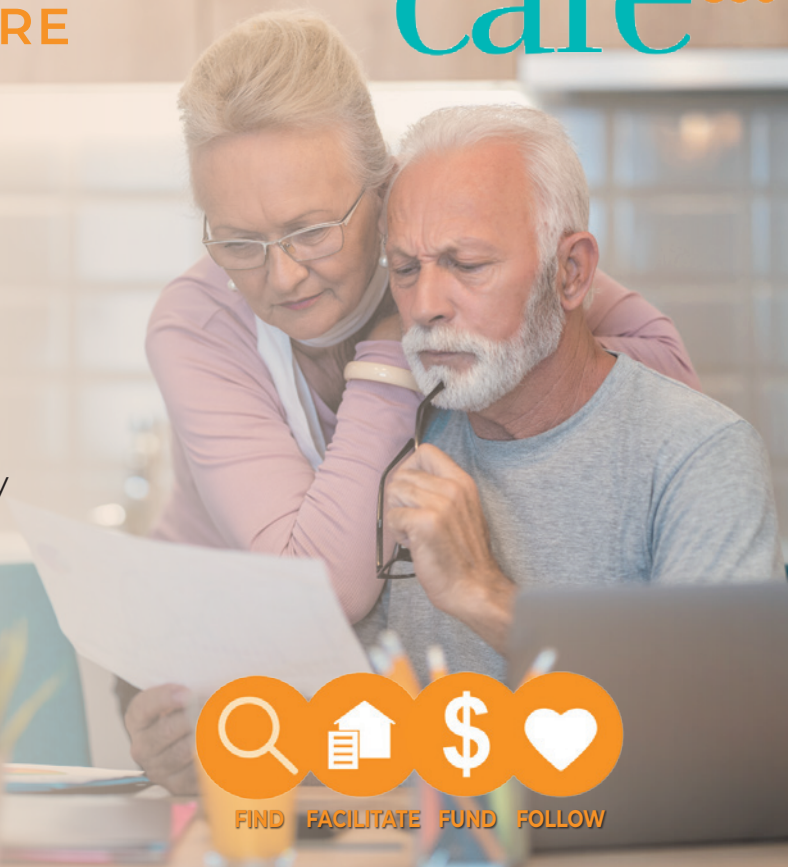
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Giving recovery a boost

Combining the convalescence mindset of the past with modern tools and strategies

‘Get better soon!’ It’s a well-used refrain, but have you ever considered what it implies? In today’s fast-paced society, we face immense pressure to speed up the time it takes to recover and ‘get back to normal’ following illness, surgery or time in hospital.

But recovery doesn’t always happen overnight and taking time can be far more important than returning to business as usual as quickly as possible.

At the National Ageing Research Institute (NARI), we have been researching the history of recovery and how we can use new models, technologies and even what we’ve learned from the pandemic to optimise the approaches to recovery, particularly for older people.

Throughout history, cultures have recognised the importance of recovery. Essential factors for recovery included specialised care, along with fresh air, good food and the right balance between rest and activity. In years gone by, resting and an extended period of recovery time were prioritised.

However, with the political and economic shifts of the 20th Century came a

turn away from the ‘convalescence’ component of recovery, instead focusing on finding ways to reduce hospital-stay length and return to activity. If one is not immediately back to full function, there is a risk of being seen as a failure.

For older people, this can be particularly harmful.

Older people are not always able to return to full function or full health following an acute illness or injury, and often view injury or illness as a threat to independence. A more robust view of recovery can address this.

Recovery of ‘function’ should not be limited to walking, dressing and showering. It should also include working, driving, banking, holidaying, socialising and leisure pursuits.

Recovery must consider emotional wellbeing, hidden impairments or non-obvious disabilities, the need for strong support networks of friends, family, carers and health and medical professionals, and of course time.

Allowing more time for recovery does not necessarily mean longer hospital stays. In fact, with the focus on length of stays and costs, there has been greater understanding of the impacts of hospitalisation. For older people

in particular, ongoing hospitalisation can lead to functional decline, loss of skeletal muscle mass and strength, infection and complications of bed rest.

In other words, when an acute illness has been addressed, hospitals are not always the safest place for older people to recover. Care provided

at home and hospital-bed substitution programs are becoming increasingly more common.

Care at home is certainly not a new concept, but combining the ‘convalescence’ mindset of the past with modern tools and strategies may lead to improvements in recovery, and efficiencies for the health system.

‘Out of hospital models aim to improve the health of individuals while reducing burden on the health system, allowing for urgent care to be delivered to those who need it the most, while providing appropriate care to people whose needs are less acute.

Advances in technology are further driving the recovery phase occurring in the community.

For example, community-based recovery can be enhanced through technological advances in monitoring and communication, with tools such as wearables and real-time monitors.

During the pandemic we saw greater opportunities to finesse and strengthen the strategies used for recovery at home. Virtual health options became more widely accessible, services were implemented for those isolated, and COVID-19 pathways highlighted how algorithms could guide the provision of effective care.

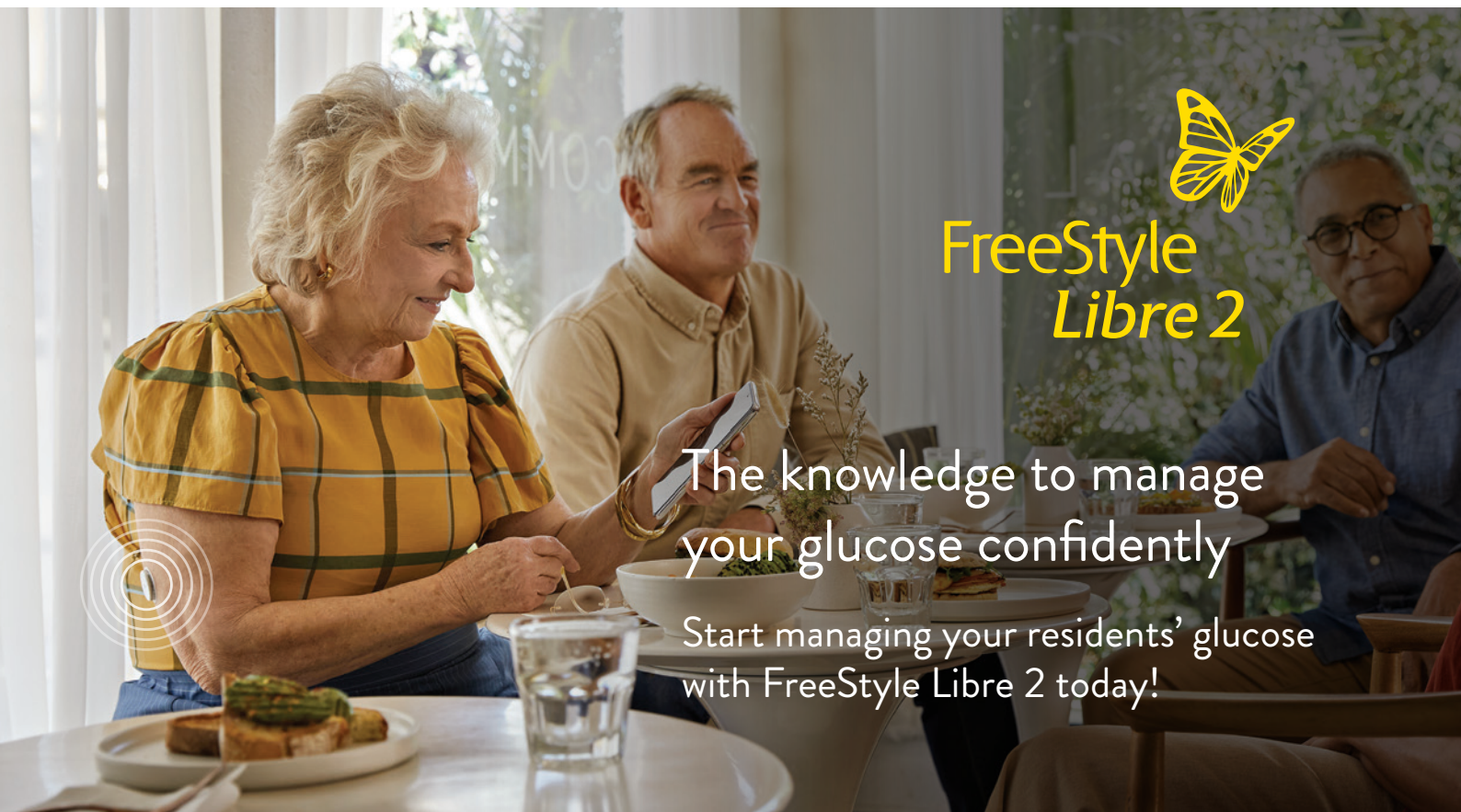
While this has significant potential, it is important to consider whether the use of technology could lead to excluding older people from services, or a so-called digital divide. If older people do not have the same access or experience in technological devices or procedures, they may not receive equitable care.

Supporting recovery in older people starts with fostering a culture of ‘time as a healer’ – including appropriate levels of activity, rest and good nutrition. We must develop more accessible and comprehensive community-based models of recovery, incorporate new technologies and, as always, put the needs of the patient first.

**Sue Williams, Senior Policy and Practice Fellow,
National Ageing Research Institute
www.nari.net.au**



Convalescence combined with new strategies improves recovery as well as healthcare efficiencies. Photography by Halfpoint



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Advisory Boards In Aged Care - Are You Ready?



From December 2023, aged care providers will be required to have implemented two types of advisory bodies that focus on 1. Consumers and 2. Quality Care. This new legislation is a direct response to the recommendations from the Royal Commission into Aged Care Quality and Safety, requiring both home care and residential aged care providers to strengthen their governance processes.

The clock is ticking, and with only nine months to go, preparation needs to commence now. Anchor's Certified Advisory Board Chairs have developed a step-by-step guide that will support your governance structure. The best practice and evidence-based guide will assist you in setting up and meeting not only the compliance requirements for your organisation but help you build a stronger consumer-focused culture that delivers high-quality care.

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Why strength training should be standard

The benefits are obvious, so what are you waiting for?



Residents Henny and John enjoying the gym at the Henley on Broadwater.

The new year has started with a great focus on active ageing, as the American College of Sports Medicine (ACSM) reports that the top fitness trend for Australia is 'Fitness Programs for Older Adults', based on surveys distributed to health and fitness professionals.

The leader of the investigation in Australia, Chris Alexander, stated that Australian industry professionals recognise the need for fitness services to support the health and welfare of older Australians, as the average age of the population increases.

ACSM also recently published a paper on the health benefits of resistance exercise, in which they discussed the role of strength training in relation to mobility and falls, cognitive function, cancer, metabolic health and mortality.

The authors recommend that strength training be presented in physical activity guidelines together with aerobic training, due to the beneficial impacts on physical and cognitive function, among others. They also added that the positive effects, such as prevention of disability, reduction of falls and improvement of cognitive ability, are likely to be high motivators for resistance training.

Previously, in 2021, *The Journal of Nutrition, Health and Ageing* published a literature review giving detailed guidelines around appropriate exercise modalities for optimising exercise to slow down physiological signs of ageing, as well as prevent and treat disease. The authors' message was clear: exercise is medicine when prescribed appropriately and controlled for the individual, just like any other medical treatment.

The final phrase of the article should be a guideline to everyone in the industry: *"Considering the accumulated evidence of the benefits of exercise in frail older adults over many decades, it is not justifiable to not prescribe physical exercise to these individuals, and one of the main challenges for the future is to integrate exercise programmes as a mandatory part of the care of pre-frail/frail older patients in all hospital, outpatient, and aged care settings."*

Over time this is becoming more apparent to providers across Australia – from community care, retirement living and residential aged care sectors.

A successful community care model is Southern Cross Care (SA, NT & VIC) Inc, which has rolled out their Health and Wellness program, 'Better for Life', across multiple locations with six sites fitted with a gym and offering exercise physiology services.

While in retirement living, the Henley on Broadwater retirement village at Southport (QLD) is a wonderful example of an active retirement community, with more than 100 residents out of 131 signing up to their health club and training almost daily at the gym, reaping the benefits.

In relation to residential aged care, providers can look to the Sunbeam project – an evidence-based strength and balance program – which was recommended as a suitable allied health program by the Australian Government in 2021, following outstanding results from the pilot. Research findings showed a 55 per cent reduction in falls, as well as verified cost savings. This program is now rolled out in hundreds of residential aged care sites.

When considering setting up a gym for older people, the kind of equipment selected is important. The Sunbeam research study used HUR equipment, with the maintenance program also using flexible modalities. Designed for the older market, HUR strength training equipment uses air pressure to create resistance allowing for a close to zero starting load and 100g increment progression of resistance, with the equipment designed with the ease of access in mind. Due to these features, HUR has become a global leader in providing equipment for older adults – whether for home or in community living.

With greater awareness of the value of exercise as medicine, and the fact that it can benefit quality of life enormously, there really is no time like the present, to consider how your aged care services can support exercise and strength training programs. Should you wish to discuss your needs with HUR Australia, our trained allied health professionals would be only too happy to help.

HUR Australia
www.huraustralia.com.au

Brightwater wins national HESTA Award

Innovative falls prevention program recognised

Recently, the team from Brightwater Care Group were honoured with a HESTA Award for 'Team Excellence in Aged Care', in recognition of their Falls Improvement Program.

Brightwater's Falls Improvement Program was created to help lower the number of falls across Brightwater's residential aged care homes. Demonstrating what the program has achieved, within only six months of launching, there has been a 28 per cent decline in the rate of falls.

The case for falls prevention

Brightwater's Allied Health Manager Andrea King said that while the rate of falls had remained static for several years, the team knew they needed to do something different if they wanted to see a reduction in preventable falls.

"Our primary goal was to truly understand the falls situations, the skill and expertise of our teams, the best evidence practice we should be using – and then run an entire change management process with the goal of shifting the perception that falls were normal in order to make real change," said Andrea.

"There are many proven ways of prevention, but not all are implemented – and this is what we wanted to change. This included the translation of knowledge among our staff who care for our clients. We needed a concentrated, resourced effort, which our organisation recognised, and so our Falls Improvement Program was born."

In addition to professional development and education sessions for staff to minimise risks and hazards and to help prevent falls, the team also introduced weekly exercise sessions for residents and hosted Zoom Chair Yoga sessions each week during Falls Month 2022.

HESTA Award recognition

It was a proud moment for the Brightwater's Falls Improvement Program's team to win a HESTA Excellence Award, which included \$7,500 in prize money to be used for further education, service improvement or team development, courtesy of longstanding HESTA Awards supporter ME.

Launched in 2021, the Excellence Awards highlight the extraordinary work being done across the disability, allied health, aged care and community services sectors to enhance the health and wellbeing of individuals, families and communities.

The Awards also provide an opportunity for HESTA to celebrate its members, of which more than 200,000 work



L-R: Accepting the HESTA Award are Chelsea Rudd, Senior Physiotherapist, and Andrea King, Allied Health Manager, Brightwater Care Group.

or have worked in the aged care sector to deliver care for older Australians.

"This award is one that acknowledges the hard work of our whole team and also is a positive step in helping change the culture – not only for organisations like Brightwater – but for people across Australia," said Andrea.

"It's amazing to be recognised for our positive results. It reinforces that to be innovative, you have to be supported both from a resourcing point of view, and through your organisational culture."

HESTA CEO Debby Blakey thanked the team for their inspiring work.

"We are so grateful for the contributions these professionals make each day to support our communities. It's a great honour for the HESTA team to help recognise their vital work," she said.

What's next for the Falls Improvement Program?

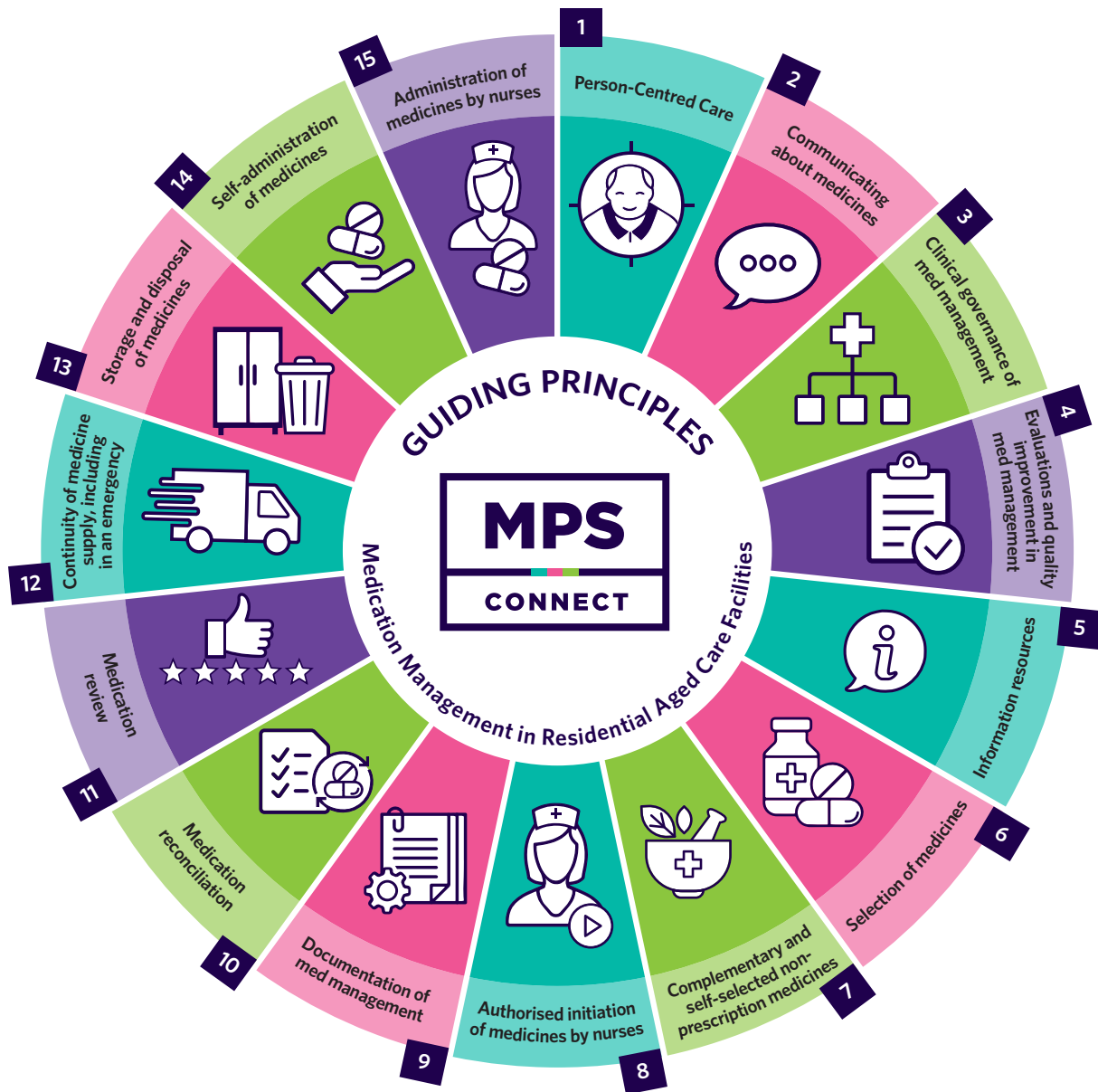
The team will take part in further training to ensure more progress is made for falls prevention by training their therapy assistants and physios to deliver more effective programs. The team will also explore technology in falls prevention and improve their falls risk screening process and falls prevention care planning processes.

"We want to have falls as everyone's responsibility and make an even bigger improvement on our falls rates – falls don't have to be part of getting older, they can be prevented," said Andrea.

HESTA

www.hesta.com.au/awards

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Prioritising oral health in residential aged care

Better training for aged care workers is vital

The aged care sector has copped a massive battering in the last few years – firstly with horror stories coming to light over treatment of elderly people in residential care from the Royal Commission into Aged Care Quality and Safety, swiftly followed by the onslaught of COVID-19 which saw thousands of deaths of older Australians and aged care home shutdowns.

Then there were calls for aged care sector workers to be more fairly paid and most recently, news that many aged care owners are operating at significant losses.

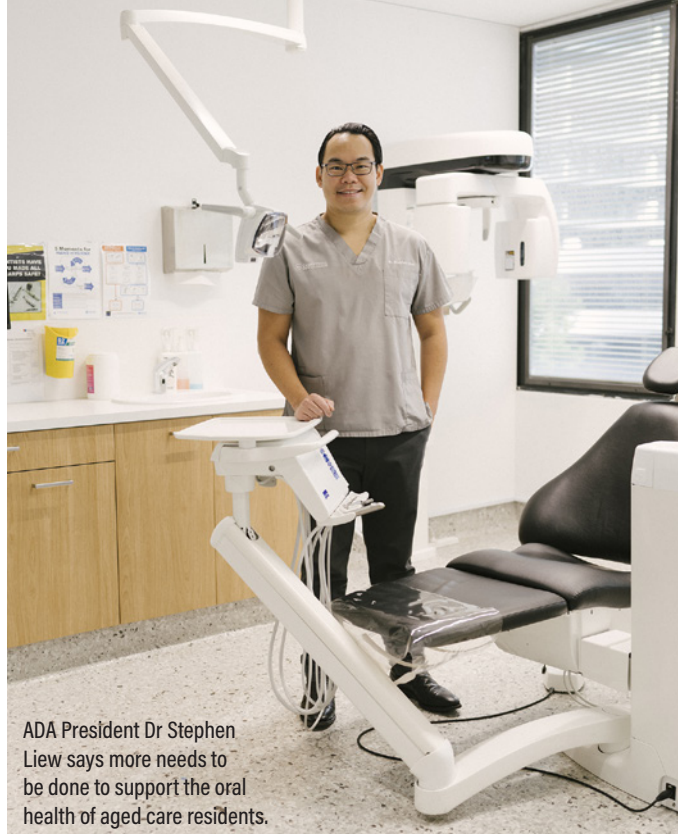
Against this grim backdrop possibly the most pressing need is for greater numbers of better paid and better trained aged care staff. From the Australian Dental Association's (ADA) perspective, that also means training in oral health care and mandated time attending to resident's oral needs on a daily basis.

The Royal Commission heard horror stories of teeth not being cleaned for weeks at a time, of advanced tooth decay and oral abscesses among a roll call of neglect.

These all pointed to the need for staff to have more time devoted to twice daily teeth cleaning and denture cleaning, for regular inspections of the oral cavity, for people with cognition and dementia issues to have an advocate who checks inside their mouth to ensure that teeth and dentures are working as they should, and if issues like gum disease and decay are being treated and managed.

As it stands, very few workers have the time to do this and one of the big election promises of the Albanese government was to devote 200 care minutes a day to each resident, including 40 nursing minutes a day, from October this year, though oral care was not mandated as part of this quota.

The ADA has enshrined in its *Older Persons* policy position paper that 'staff in residential aged care facilities should have appropriate training and an appreciation of the need for dental care of older people and should be able to assist in the maintenance of oral hygiene of residents'. Also, that 'aged care workers should be educated on the basic oral health care needs of older people'.



ADA President Dr Stephen Liew says more needs to be done to support the oral health of aged-care residents.

ADA President Dr Stephen Liew said they have been advocating at length for inclusion of oral health in regulatory requirements for residential aged care providers.

"In addition to advocating for mandatory inclusion of oral health in aged care worker training, we highlighted in the Royal Commission hearings in 2022 the need for residents to have care and management plans which include oral health care needs, a structured oral care system including formal oral healthcare policies, practice guidelines, and dental referral pathways instituted by every facility.

"We also advocated that residential care facilities provide essential equipment for daily oral hygiene.

"Unfortunately none of these have been set in motion in the years since the Commissioners released their findings and recommendations.

"We are waiting to see what Federal Health Minister Mark Butler does in this area and we have made representations to the Department of Health to see what their intentions are.

"If it gets the go-ahead, compulsory education through Aged Care Certificate training will provide aged care workers with the basics to understand the mouth and oral health. With dentists providing oral health care plans, these appropriately educated aged care workers could enact daily care routines to provide the residents with the oral care they deserve.

"In addition, increased integration of dental practitioners into residential facilities will allow for aged care workers to gain training that would enable them to exercise such skills with confidence and efficiency."

The ADA is ready to support aged care providers that would like to know more about how they can provide a better level of oral health care to their residents.

**Jenny Barlass, Federal Media Advisor,
Australian Dental Association
www.ada.org.au**

Nutritionally balanced meals for healthy seniors.

With over 235 meals developed by dietitians and prepared by chefs, Lite n' Easy offers a delicious, food-first approach to promoting independence, choice & health for older Australians.

Lite n' Easy have also introduced a new range of meals called My Choice which have been designed to meet the specific nutritional needs of older people who may have a reduced appetite. My Choice meals provide the same energy and protein (an essential nutrient for seniors) as our standard dinners but in a smaller portion, making them easier to finish.

Lite n' Easy partners with many Home Care Package providers across Australia, so that seniors can have access to even more affordable healthy, delicious meals. If eligible, HCP recipients could save 70% off the cost of their meals.

Lite n' Easy's service is flexible with no lock-in contracts or subscriptions, so customers are free to order week-to-week as needed.

In addition to supporting HCP providers and recipients, Lite n' Easy is now also supporting the broader Aged Care sector by providing meals in bulk to respite centres, residential aged care facilities, hospitals and many other organisations looking for alternative healthy meal solutions for their employees and residents.

For an effective and affordable meal solution to suit your business needs, please email Lite n' Easy at: agedcare@liteneasy.com.au

Visit www.liteneasy.com.au/my-choice or call 13 15 12 for more information.



"It's given me back my independence. It's given me back my health. It's just wonderful."

Auntie Barb & her daughter/carer, Yoni



"The meals from Lite n' Easy are a tremendous help for my health and independence - one of the best food delivery services I have tried."

Penny - QLD NDIS participant

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Without a song or a dance what are we?

Why music therapists should be part of aged care services

Hayley Antipas (pictured far right) says music therapy should be incorporated into wellbeing programs for older Australians.

ABBA said it best in 1977 with their famous lyrics: “Thank you for the music, the songs I’m singing. Thanks for all the joy they’re bringing. Who can live without it? I ask in all honesty, what would life be? Without a song or a dance what are we?”

When we turn this lens to aged services, access to personalised and meaningful music experiences is essential. In fact, music is one of the most powerful neurological and psychological stimuli humans can experience with convincing social implications. Yet, many individuals accessing aged services either have too much or too little music in their lives which often neglects their agency, and is not personalised to their needs, goals or preferences.

The Australian Music Therapy Association describes music therapy as a research-based allied health service where a Registered Music Therapist (RMT) uses music within a therapeutic relationship to support people to improve their mental and physical health, functioning, wellbeing and quality of life. As a dual RMT and qualified Neurologic Music Therapist (NMT), personalising music (and often dance) experiences to bring joy and support people to live well, is at the core of what I do.

Why does music therapy work? Music stimulates widespread brain activity associated with speech and language, self-expression, cognitive and executive functions, motor planning and functioning, memories and psychological health. Music influences mood including reducing depression and anxiety, sensory perception, identity, behaviour, focus, sleep and relationships, and can even enhance feelings and behaviours of trust, empathy and cooperation.

Given the power of music, there can be value in almost all music experiences. However, for people accessing aged services who often have cognitive differences including dementia, Parkinson’s disease, stroke survivors and people with psychological ill-health, research suggests their unique needs must be considered when engaging with music to maintain positive wellbeing outcomes.

For example, someone with depression may listen to music and ruminate in negative thought patterns. Working with a RMT, they may learn to intentionally use music to regulate and improve their mood and thoughts. A person with dementia may engage in strategically designed music experiences in

music therapy to maintain their identity and functional capacity. Or a stroke survivor may regain their upper limb function, walking or speech capabilities.

RMTs are therefore a vital allied health service for older adults. They facilitate direct music therapy services and offer clinical guidance and recommendations for evidence-based use of music by other health and care professionals. Emerging evidence suggests music therapy skill-sharing with non-RMT aged care professionals (indirect music therapy) may increase the mental health and capability of the workforce, which in turn improves the quality of care provided to consumers and has the potential to improve retention and engagement.

One study by Bittman and colleagues in 2003 even reported annual cost savings of USD\$89,100 per annum per 100 bed facility through the implementation of a music program. This innovative field of practice is the focus of much current music therapy research, including my PhD.

For me, from a young age there were always two career paths – a professional concert musician or a health/science professional – so when I discovered the profession of music therapy nearly a decade after my music undergraduate degree, I knew I had finally found my career.

Music therapy uniquely sits at the intersection of music, psychology, neuroscience and medicine and I found my passion working in aged services where I can sing songs and share joy every day, and it’s why I established my business Attuned Health. So, in response to ABBA’s 1977 questions: no, I couldn’t live without music, and for many of the people I work with, their lives would be considerably less fulfilled without music therapy services.

AN-ACC presents a unique opportunity for progressive providers to include music therapy as a mandatory component of their allied health services, a move that was recommended by Commissioner Briggs as an outcome of the Aged Care Royal Commission, and which is backed by a mountain of evidence.

While people with a Home Care Package can already access music therapy to support their wellbeing and independence, now is the time for change in residential services.

Hayley Antipas, Registered Music Therapist, Neurologic Music Therapist & PhD Candidate
www.attunedhealth.com.au

Families and grief when a resident dies

New resource now available

Ageing is intimately and inevitably associated with dying and grieving, and staff working in residential aged care have an important role to play in supporting people with grief and bereavement. Now, a research project by Flinders University is providing targeted resources to help make a difference.

Moving to residential aged care is generally a move to a person's last home before they die. The death can be expected and occur relatively quickly after entering care, or can occur several years after moving into an aged care home.

This can be a difficult time for families as they navigate the complexity of decisions, emotions and changes, and they experience grief arising from the loss of their loved ones. One Australian review suggested that bereavement in residential aged care and its effects on staff, residents and families is under-recognised and underacknowledged, and remains a silent experience.

As members of the Research Centre for Palliative Care, Death and Dying at Flinders University, we received a grant from SA Health to develop resources that would help families to recognise their emotional responses and to share ideas from families and staff on dealing with bereavement.

We did this by looking at the experience of loss and grief associated with a move into residential aged care and the later death of the resident, and elements of the transition which complicated or relieved loss and grief for families.

We were also interested in how staff engaged with families across the changes and how this complicated or relieved loss and grief for families.

This research enabled us to better understand the loss and grief needs of families and the people most immediately connected to the resident.

We started the work with a rapid review of the literature examining grief, loss and bereavement needs of family and caregivers of older people who died in residential aged care. We then conducted interviews with members of the community who have a family member living in residential



**When someone dies in residential aged care:
Grief and loss for families**

aged care to identify specific grief and loss related needs of family members and caregivers.

We also talked to people working in residential aged care services on what they saw as important when supporting family and caregivers' grief and loss related needs. These studies provided us with a greater understanding of the issues.

Bereavement needs and bereavement supports are important and complex. In the residential aged care context, grief and loss is experienced not only as a result of the actual bereavement but can be experienced in the months or years before the death.

Emotional challenges are felt as families grapple with the need for placement, and they continue during the actual entry into an aged care home and adaption to changed living circumstances. Grief and loss recur as families confront deterioration in health, decline and eventual death.

A lack of information around what happens and limited acknowledgement of emotional responses to these life changes can leave older people and their families unprepared for the future, which is why projects like this are so important.

A key finding of the research is that staff working in residential aged care have an important role to play in supporting older people with grief and bereavement, and that their care can help residents and their families.

Underpinned by the findings from the review and from the interviews, we have now published guidance for families on how to approach grief in aged care settings. Available on the GriefLink website and also as a booklet distributed to all residential aged care homes in South Australia, it aims to build community awareness and help prepare families practically and emotionally to acknowledge and address decline, dying and grieving.

Aged care providers across Australia can order or download a copy of the booklet at www.palliated.com.au.

Professor Jennifer Tieman, Matthew Flinders Professor & Director, Research Centre for Palliative Care, Death and Dying, Flinders University, and Dr Priyanka Vandersman, Research Fellow (ELDAC), Flinders University
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palliAGED is funded by the Australian Government Department of Health and Aged Care and managed by CareSearch, Flinders University.



New award-winning device helps patients breathe easy

Why Australian innovation AirPhysio should be in your toolkit

If you're an aged care or healthcare provider, you're always on the lookout for better ways to help your clients or patients. When it comes to respiratory health, there's a new device that's making a difference to those who are impacted by lung or respiratory conditions, and it's worth considering.

AirPhysio is an all-natural Oscillating Positive Expiratory Pressure mucus clearance device that is suitable for anyone suffering from conditions such as asthma, cystic fibrosis, chronic bronchitis, chronic obstructive pulmonary disease (COPD), bronchiectasis, emphysema, respiratory syncytial virus (RSV), pneumonia or even the common cold or flu.

Listed on the Australian Register of Therapeutic Goods, the device uses the same airway clearance techniques that doctors have been utilising on patients in hospitals for years. Simple and easy to use, the air physiotherapy mechanical device is an effective lung training tool that loosens and mobilises the thick, stubborn mucus in the airways which makes it hard to breathe.

How AirPhysio works

AirPhysio helps to clear blocked airways and clear mucus from the lungs. As the patient breathes through the device, it creates a positive pressure which causes a stainless-steel ball to vibrate. This turbulence helps to loosen mucus, enabling them to cough and expel it out naturally.

While results vary from person to person, based on their physical fitness and severity of disease, with continued use, the device has the potential to slow down the progression of respiratory conditions such as asthma, COPD, bronchiectasis, and cystic fibrosis.

Daniel Seldon from Aussie Pharma Direct who distribute AirPhysio, says that the device offers aged care providers with another tool to care for their patients.

"Clearing airways and facilitating easier breathing is vital for the overall health of older patients," he says.

"The beauty of AirPhysio is that it is completely drug and chemical free so does not require a prescription. It is not

an inhaler, nebuliser, spirometer, spray, or puffer so is safe to use.

"And as it doesn't require any refills or batteries, it also causes no unpleasant side effects like headache, nausea, or dizziness.

"This award-winning Australian innovation puts the power back into the hands of the user and is an invaluable tool for patients suffering from congestive lung diseases and laboured breathing conditions. Plus, it's great for healthcare providers to have another option to offer relief to those they care for."

Products for every need

There are four different types of AirPhysio which cater to different lung capacities.

Low Lung Capacity is designed for people affected by lung or respiratory conditions such as asthma, cystic fibrosis, chronic bronchitis, chronic obstructive pulmonary disease (COPD), bronchiectasis, emphysema, and RSV. It also aids in the recovery from pneumonia, colds and flu and is suitable for individuals with respiratory muscle weakness and low lung capacity due to advanced age.

Average Lung Capacity is ideal for teenagers and adults who want to improve their day-to-day breathing and lung capacity.

AirPhysio for Children is designed to help children breathe easier so they can live, play, and learn without being impacted by congested lungs. Suitable for ages five and up, it's ideal for children who are affected by respiratory conditions such as asthma, the common cold, flu, pneumonia, bronchiectasis, cystic fibrosis, and COPD.

AirPhysio Sports is for professional, elite, and amateur sportspeople aged 13 and over. AirPhysio Sports is a drug-free performance enhancer and lung expansion device that helps users achieve personal best results and a competitive edge by optimising lung capacity and increasing O₂ and CO₂ gas transfer to reduce recovery time.

**Daniel Seldon, Managing Director,
Aussie Pharma Direct
www.aussiepharmadirect.com.au**





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Our origins started in Melbourne, however, our people centred design, our long-term networks, and valued repeat clients have enabled smith+tracey architects to create valued projects nationally. Our culture of learning harnesses the energy and enthusiasm of our passionate team and ensures individual knowledge becomes our collective strength.

As we move forward our team continues to preserve our design principals to support and enhance livable environments for our aging population, carer workplaces and a variety of community focused built outcomes providing opportunities to gather, recreate, meet, grow, celebrate, reflect and share life's values.

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Electronic medication prescribing systems reduce risk and improve efficiency.

Adapt and adopt but don't compare apples with oranges

The eNRMCM offers many benefits, but ask questions before making your choice

Twenty-two years ago, I invented Jade Charts – the first computer-generated charting system designed specifically for residential aged care homes. This innovation combined technology and system design to make significant advances to the old manual charting systems.

James Milson Nursing Home was the first to adopt Jade Charts and we were all very excited when they received a Highly Commended evaluation from the Australian Government due to the innovation. So when the National Residential Medication Chart (NRMCM) was implemented in 2014, our computer-generated RxMedChart was market ready and operational.

Jade Charts has now been superseded by more sophisticated systems and technological advancements, forming the end-to-end and interoperable Webstercare Medicare.

But the original purpose remains the same: to reduce consumer risk and improve system efficiency. For our partners already using Webstercare systems like MedSig, the transition is easy and supported.

Today we can connect the entire medication care team with Cloud-based, centralised medication profiles and seamless communication. All participants access one real-time 'single source of truth'.

Clinical information can be captured, updated and reported at any time, from anywhere. Resident profiles and charts are always current and accessible, the risk of error is minimised, complex processes are simplified, and less time is spent checking different sources of information.

The maxim of the right medication and the right dose, to the right patient at the right time, has never been so assured.

Improved consumer safety and workflow efficiency

Doctors love the new system because they can work from anywhere. The system provides mobile access to doctors and they, in turn, can send their medical orders from anywhere – even S8 medications like psychotropics are electronically prescribed and fully paperless. (I spoke with one aged care doctor who was able to change and maintain medication supply while in Europe.)

Pharmacists also love the system because it removes many sources of medication misadventure due to human error and significantly improves workflow efficiencies, especially in communicating with the aged care home via the system.

Aged care workers report greater confidence and less stress during medication rounds. They no longer need to scan and send medication charts to the pharmacy each time a medicine is dispensed or changed. Everyone wins with more efficient and accurate workflows. Medication orders are computer-

generated, not hand-written, so there is less chance for comprehension error.

All steps in the process are prompted and captured in real-time by the system. This leads to greater transparency, accountability and no intermediate manual steps or workarounds.

Medication data is gathered and analysed to improve overall governance by supporting monitoring, reporting, auditing and medication optimisation. This makes it easier to meet accreditation reporting responsibilities.

Managers will also have greater confidence that medications are being prescribed in line with best practice, regulation and policies, which is important for reporting and compliance.

Choosing your eNRM provider

It makes a lot of sense for aged care homes to transition to an electronic prescribing system, and the Department of Health and Aged Care has produced a useful Residential aged care services information pack for those that are ready to make the change.

When choosing an eNRM provider, the market is not homogeneous and it pays to ask questions to ensure you're not comparing apples with oranges.

To give you peace of mind, make sure your provider can fulfil the following requirements:

- All medicines, including S8s, can be prescribed without a paper-based prescription.
- Data access is real-time, supported by the Cloud, but can also operate offline in WiFi blackspots. This is especially important in rural and remote areas.
- It is an end-to-end system that supports direct communication between the aged care home, the prescriber and the pharmacist. Having to use phone, fax and standard email adds confusion and unnecessary steps in the process.
- There is flexibility in the type of medication packing systems available to meet the differing needs of consumers.
- There is interoperability throughout the system and its components.
- The functionality is streamlined so no need to log in and out of system components.

Gerard Stevens AM,
Pharmacist and Managing Director, Webstercare
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Are you feeling the pressures of NDIS registration?

Are you a residential aged care (RAC) provider with NDIS participants under 65 in your care? Are you reviewing the pros and cons of having to maintain your NDIS registration and whether you'll meet and demonstrate your obligations for participants who are in your care?

The Government's Young People in Residential Aged Care strategy creates obligations on the sector's service delivery, compliance, policies and governance when caring for young people with disability and NDIS participants. Understanding how to meet these requirements can be difficult.

The Summer Foundation can provide clarity around what these requirements mean for you and provide FREE support through its RAC Engagement Project. We especially want to support those RAC providers not investing long term in NDIS registration.

The project aims to create a community of alliance, support and collaboration to make a long-lasting and positive impact so the strategy targets are met, the sector is strengthened and the pathways to RAC for young people are closed.

Alicia Baltra-Ulloa, who runs the RAC Engagement Project says: "Getting support from the project is a no-brainer for providers facing the formidable challenges of the strategy obligations, on top of the major aged care reforms of the past couple of years. With our free guidance and advice, we can make the whole process much smoother."

The Summer Foundation is also recruiting participants for a RAC-specific research project that will provide insight into the factors that impact young people in residential aged care (YPIRAC).

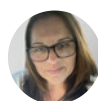
This research will strengthen our support and increase our insight in this area so we can better support you and the people you care for.



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For us a successful alliance is one that considers the individual goals of the NDIS participants it connects with, prevents new admissions of young people to RAC, and supports those that decide to stay in RAC. It also prepares and supports those aged care providers to continue to care for them.

Contact Alicia to talk about how the Summer Foundation can support you:



Phone: 1300 508 945

Connect: [linkedin.com/in/aliciabaltraulloa](https://www.linkedin.com/in/aliciabaltraulloa)

Email: racengagement@summerfoundation.org.au



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How we support aged care staff and their residents:



Dietitians

Up to 60% of aged care residents are likely to be at risk of or experience malnutrition. Our Dietitians will combine clinical and food service expertise to optimise nutrition and good health for these residents.



Speech Pathologists

Approximately 70% of residents in aged care experience dysphagia. Our Speech Pathologists specialise in the assessment and management of swallowing difficulties and can provide support and education to carers and aged care staff.



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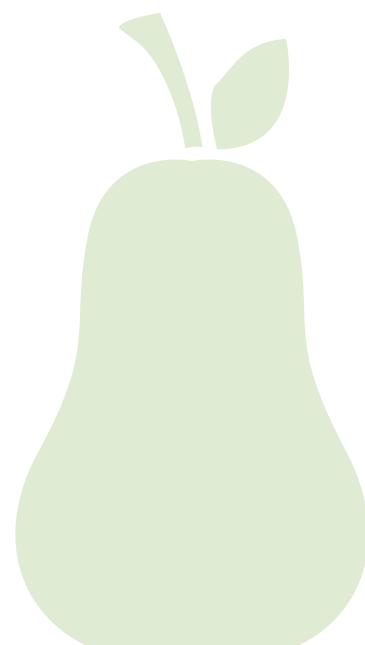


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Managing plate waste in aged care

Supporting health and reducing costs

Food waste is a large problem in residential aged care. In New South Wales alone, it is reported that residential aged care homes discard one third of the food served as waste. According to Unilever Food Solutions, this equates to a massive 15,230 tonnes of food wastage per year at an estimated cost of \$1,000 per week per facility. Altogether, this equates to over \$50,000 on food waste per year.

Aside from economic costs, food waste is of concern in terms of sustainable development bringing with it a plethora of challenges including environmental and social impact.

In aged care, food waste may occur at many steps in the process from the purchase of goods to the meal on the plate. Waste occurs in purchasing, spoilage, preparation and serving.

The ageing population in residential aged care has their own set of specific nutritional needs with many factors affecting appetite and food intake. Food provided is the sole source of nutrition for many residents, so it is critical that we get it right.

We know that food provided is only valuable to residents if it is consumed. Unfortunately, studies have reported levels of plate waste of between 7 per cent and 27 per cent.

Food and plate waste in aged care can be caused by a myriad of factors so it is not simply a matter of reducing meal portions to manage waste. This, in fact, may result in higher levels of malnutrition. The underlying cause of the plate waste must be determined before solutions can be developed.

Potential issues impacting plate waste include:

- the palatability and quality of meals
- the visual appeal of meals
- whether standardised meal sizes are offered to ensure that residents are receiving a suitably sized meal
- the temperature of the meals when received by residents
- whether choice and variety have been built in to menus in line with resident's preferences
- the level of assistance provided to residents at meal times
- whether meals are a suitable texture for residents to enable consumption



- the time lag between ordering of meals and service of meals
- the dining environment.

Dietitians and Foodservice Dietitians are well placed to assist you with managing areas where food waste can be a problem. They come with an expert knowledge of:

- food safety
- recommended meal/drink/mid-meal portion sizes
- the ability to manage food satisfaction through resident food focus groups and resident surveys
- expertise in menu management
- the ability to audit and report on factors in the dining environment that are impacting on intake.

With their expertise in menu management, they can help determine optimal nutritional adequacy while minimising waste and labour costs, and through the development of suitable vegetarian options, finger food menus and meeting IDDSI requirements all in line with the base menu.

Given the high level of food waste in aged care, it is beneficial for homes to find a Dietitian partner such as Food Solutions Diet Consultants and work with them to tackle the waste issues while also ensuring a high quality, nutritious and plated dining experience for their residents. We're passionate about our work, and would only be too happy to help.

Food Solutions
www.foodsolutions.com.au

Continence care matters

A critical part of aged care that's often overlooked

Incontinence affects over 70 per cent of residents in aged care, and continence care is an essential purchase, yet many of our aged care workforce enter the industry with little or no continence education or experience.

Best-practice continence care and maintenance requires ongoing day-to-day management to ensure individuals are comfortable and safe and that staff time is efficiently utilised, however with minimal formal education about incontinence and its management, employees who are inexperienced or incorrectly educated can sometimes make mistakes.

Inefficient care can take up to 40 per cent of care time and can create several avoidable issues including: pads needing to be changed more often; residents feeling uncomfortable; skin concerns becoming prominent; and laundry and waste costs increasing due to leakage and pad wastage.

Incorrect management of incontinence is a major cost driver residential aged care homes, costing the industry billions of dollars for people who need assistance with both incontinence and toileting in residential care.

Effective continence care requires an investment but will generate savings in the longer term as costs associated with laundry and labour, treating Urinary Tract Infections, Incontinence-Associated Dermatitis and pressure injuries are reduced.

It may be viewed by some that wet beds and skin issues are an inevitable part of aged care, however this does not have to be the case. Choosing a solution that is high quality and endorsed by third parties can improve both the resident and carers experiences when it comes to incontinence care, and decrease the likelihood of wet beds and skin issues.

Since 2015, the Aged Care Quality and Safety Commission has listed continence management in the top five complaint categories. When managed poorly, incontinence affects not only the resident, but the carer, families and the residential aged care home. With many residents entering aged care due to incontinence problems, it is critical that its management



and the education around it is a priority for procurement and clinical managers.

Delivering high quality continence care requires care staff to have specialist knowledge and skills, particularly in continence management, continence assessment, skin and wound care, and dementia care.

Continence management and dementia care are not currently covered in sufficient depth in undergraduate nursing degrees, therefore nurses entering the aged care sector are not adequately equipped to deal with these issues, while aged care workers also receive only limited education on these topics in their courses. Today, this specialist knowledge is learnt 'on the job', along with 'trial and error'.

However, there is a need for us to do better as an industry. Quality continence management must start with a comprehensive assessment, with the help of new technology solutions that can provide more accurate assessments to deliver truly person-centred care.

We need to encourage residential aged care providers and managers to make continence education and experience mandatory skills for employment. This will ensure that this critical element of aged care is not overlooked – supporting the dignity of residents and also making a significant difference to operating costs. It's a win-win.

**Karen Fuller, Marketing Manager,
TENA Services
www.TENAprofessional.com.au**

Who's missing?

Planning for Diversity workshops



OPAN's Planning for Diversity workshop series and online training is available to all aged care providers.

It offers **practical information, tools and strategies** to make your services more inclusive of older people from diverse and marginalised groups.

Planning for Diversity helps you to:

- differentiate your service to better engage older people and families from diverse groups
- identify and address barriers for older people in your aged care planning region who would like to access your services but are missing out
- demonstrate you are working towards **Aged Care Quality Standards** and your commitment to the Charter of Aged Care Rights
- identify specific actions and embed diversity within Continuous Improvement Processes.

Who is the training for?

The **Planning for Diversity workshop series** is aimed at the person in your organisation who is responsible for quality improvement, service planning and/or compliance.

Our **online training sessions** are for senior staff and managers responsible for improving the person-centred experience for older people from diverse backgrounds.

For more information:

Visit **opan.pub/diversity1** or scan the QR code below.



For more information or to register scan the **QR code** or:



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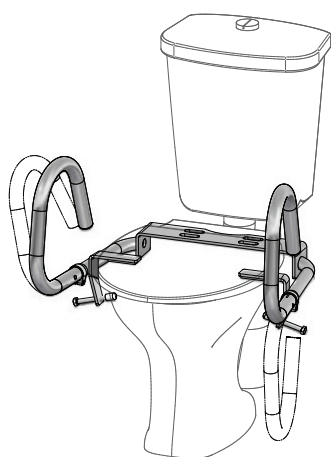


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New campaign shines a light on pain

Improving quality of life with better pain assessment

Care providers from across Australia are sharing their first-hand experiences of the realities of caring for residents in pain, and the critical importance of pain assessment and management in enhancing people's quality of life.

Australian Registered Nurses Alvin Carlos and Parbati Pun have joined a troop of aged care professionals in a new campaign created by Australian company PainChek® to shine a light on the effect of pain on people living in aged care.

Alvin Carlos works alongside a team of nurses and doctors to provide care for 102 residents at the RAAFA Alice Ross-King Care Centre in Bull Creek, Western Australia.

"About 90 to 95 per cent of our residents experience pain and effective pain assessment is one of the key challenges," says Alvin, who cares for residents with a variety of health issues, including dementia.

"Some of our residents don't really complain about it but are in fact experiencing pain most of the time. It could be that they don't want to show they are in pain, or it could be masked by pain relief medication. Some of them are physically and cognitively declining and may not be able to tell us about their pain level."

The Alice Ross-King Care Centre introduced a digital pain assessment tool for both verbal and non-verbal residents with dementia or cognitive impairments. Residents' pain can now be assessed quickly and objectively, and pain assessment data helps inform care and pain management plans, including appropriate pain relief.

"We had a resident who had just arrived as a new admission," Alvin says. "Initially she wasn't on any pain relief, although her records showed she has arthritis in her hip and was getting agitated at night-time."

"Our digital pain assessment tool helped us identify that the resident was actually in severe pain even although she couldn't tell us. So we were able to develop a care plan with pain relief rather than just giving her psychotropic medication to help her sleep. Being able to assess what they're actually experiencing allows us to give residents better quality of life."

The tool, PainChek®, is a point-of-care pain assessment solution that enables care teams to quickly identify when someone is in pain, regardless of whether or not they can self-report, and quantify the severity of that pain to guide appropriate pain relief and treatment. The PainChek® smartphone-based app uses the device's camera and AI to identify micro-facial expressions indicative of pain.

Accurate pain assessment not only has important implications for aged care residents' treatment outcomes and quality of life, but also for giving their loved ones peace of mind. Parbati Pun, Registered Nurse at OneCare, a not-for-profit aged care organisation in Tasmania, explains why.



"Pain not only has a significant impact on residents, but also their loved ones and carers. If a resident is in pain, then they are in distress, and that is understandably upsetting for their loved ones and carers to see as well," she says.

"It's important to keep family members and loved ones updated on the resident's ongoing care plan – what has changed in terms of pain over the last few months, if there's any new pain or pain management."

Alvin and Parbati's stories are just two of several showcased in the new campaign from PainChek® – 'Managing Pain, Improving Lives' – as PainChek® CEO and Managing Director, Philip Daffas explains, "The campaign shines a light on all those affected by pain, whether it be the individual themselves, their loved ones, or their caregivers."

"Pain is a deeply personal and multifaceted experience, and affects people in different ways. Across all care settings, there are multiple people involved in the process of managing a person's pain."

"By listening to the voices of these people, we can highlight the need for a more holistic approach to pain management, and foster an environment where pain is better understood, better identified, and ultimately, better managed."

The campaign is the latest in PainChek®'s global initiatives to increase awareness of how effective pain management can positively impact people's care, quality of life and wellbeing, and empower the care sector and healthcare professionals to deliver the highest level of care to those in need.

With more than two million pain assessments completed globally using PainChek®, clinicians are convinced of the benefits of digital pain assessment.

To read more real stories and learn how effective pain management has enhanced the quality of life of individuals across the world, visit: www.painchek.com/improving-lives/

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Let's talk about cultural diversity in ageing

The new 'One size does not fit all' podcast series

A podcast is an easy way to increase understanding and expand learning, particularly for people who lead busy lives and are time-poor, which represents a lot of the aged care workforce.

Developing your understanding of cultural diversity in ageing can really enhance the provision of quality care, and now the Centre for Cultural Diversity in Ageing is making it easier with their new 'One size does not fit all' podcast series.

Sharing the insights of aged care sector experts and industry leaders, it provides practical advice around diversity and inclusion, and features stories to inspire and promote good practice. The first season started in 2022 with four episodes which are available to download on Spotify, Apple and Google, with four more episodes currently being created.

Episode 1: Introducing the Centre for Cultural Diversity in Ageing

Lisa Tribuzio, Diversity and Inclusion Consultant (previous Manager) and Nikolaus Rittinghausen (the current Manager), who are part of the Centre for Cultural Diversity in Ageing, share their experience and insights into the services the Centre offers to aged care providers.

With combined experience of over 30 years, Lisa and Nikolaus have developed diversity webinars, resources and the Diversity Mentoring Program to guide providers in supporting diversity in aged care. In addition, they have represented the Partners in Culturally Appropriate Care Alliance at the Department of Health and Aged Care's Diversity Consultative Committee.

Lisa discusses the *Aged Care Act 1997* and the impact it has in catering to the 10 special needs groups that are identified in

the Act. She also talks about the Diversity Framework, which sets out how the aged care system can better meet the needs of different aged care communities to give consumers choice and dignity.

Episode 2: Free Translations in Aged Care Project

In this episode you will hear about the Free Translations in Aged Care Project 'Better connecting with diverse audiences', which is now called 'Different languages, same aged care'.

Our expert friends Sam Fletchers, Bec Rohan-Jones and Kwabena Ansah discuss this new government-funded project that has been offered to the aged care sector.

Sam, a Senior Director of ICON Agency tells explains the partnership with LOTE Agency for this project; Bec brings her expertise to this podcast as a strategic council for ICON agency; and Kwabena talks about LOTE agency and their aim to integrate and engage with multicultural organisations from the aged care sector which he says makes them "more than just a translation agency" because they want to meet the diverse requirements of consumers.

Episode 3: Professor Bianca Brijnath on dementia care research for CALD communities

In this episode we talk with Professor Bianca Brijnath on her contribution to the aged care sector particularly in the area of dementia care. We also discuss her book and work in Gerontology and on culturally inclusive care.

In 2022, Professor Bianca Brijnath won the Dr Olga Kanitsaki AM Award from the Centre for Cultural Diversity in Ageing for Individual Excellence, for her work to improve quality of life for older culturally and linguistically diverse Australians.

Bianca discusses the co-design approach while working on the 'Moving Pictures' project. Her work in dementia was also promoted internationally in India, China Vietnam Indonesia and New Zealand.

When asked what diversity means to her she says, "It means voice, it means representation."

Episode 4: Uniting NSW/ACT approaches to diversity

In this episode we have our special guests from Uniting NSW, Margaret Teuma and Lana Richards, who have worked hard to design policies and programs that promote culturally appropriate care for seniors.

Margaret, who is a Diversity and Inclusion Specialist, and Lana, who is an Executive Manager for Uniting, talk about the challenges they face and the difference they are making in their organisation.

Lana also highlights that it is important to "recognise the lived experience, working with older clients, to get to know their personal stories, to understand people's lives".

Nikolaus Rittinghausen says the podcast series offers an easy way for aged care workers to expand their knowledge about culturally inclusive care.

"We are living in an era of significant aged care reforms, but it's important to take time to slow down and gain new insights, particularly when it comes to learning an appropriate and inclusive style of care," he says.

"Our podcast series is free, you can access in your own time and you can review it as needed, so we hope aged care managers promote it to their staff, and many people take up the opportunity to expand their knowledge of diversity, equity and inclusion."

The Centre acknowledges the contributions of the podcast participants for their significant work to advance inclusive care.

**Biljana Grbevaska, Project Administration Officer,
Centre for Cultural Diversity in Ageing
www.culturaldiversity.com.au
www.culturaldiversity.com.au/news-and-events/podcasts**

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Supporting dignity at every stage, for everyone

Are you making the most out of person-centred care?

The shift to person-centred care in Australia is about increasing the capacity for aged care providers to provide custom, quality, individualised care. For providers, it creates an opportunity to be a cut above the rest for customer service.

As aged care providers, this is your opportunity to not only meet the milestones and targets set by the government, but to adopt a framework that helps make you more attractive to families while providing the service your clients want.

You can't plan goals without understanding what a person values. Making sure you have an accurate picture of the goals your clients have as they age is all about understanding what matters on a short-, medium- and long-term basis.

Providing dignity and choice to clients while reducing your risk should be the cornerstone of how you operate, founded in rights-based care and person-centred care.

Putting dignity of risk at the heart of your planning

Create a culture that supports the dignity of the individual provides the opportunity to:

- Understand the values of the individual in your care in an intimate and informed way
- Provide a customised care experience that is unique to that person's wishes
- Articulate what is not acceptable on an individual level with care choices, treatment options or if the person loses capacity and cannot make care-based decisions for themselves

- Reduce the risk of removing someone's autonomy or dignity by understanding what risks they find acceptable to achieve personal well-being.

When you offer customised care matched to the person's needs, wants and wishes, you can allay their fears not only about your centre but also about the industry.

Breaking down the stigma associated with care facilities and making them a more attractive, viable choice for Australian families is a necessary part of creating a functioning care model.

We all have a duty to ensure that Australians don't deprive themselves of quality care through misinformation or fear.

The importance of documentation

Person-centred care with documented care plans gives you:

- A tangible roadmap for the social, psychological, emotional, physical, intellectual and spiritual wellbeing of a person
- The ability to tie that roadmap to actionable ideas and activities families can understand
- Information to support the aged care, palliative care and end-of-life experience
- The opportunity to listen to the family while still advocating for the individual in care
- The opportunity to educate family members about aged care.

The wider benefits of person-centred care

Person-centred care has the following positive outcomes:

- By creating a care experience your clients love, you can share client

testimonials for public relations opportunities.

- By providing better outcomes for people who make use of aged care through the customisation process, there is lower resistance to entry, and earlier adoption of support services.
- By championing person-centred care, you can help raise awareness of the positive steps the aged care industry is taking, and normalise the use of aged care services.
- By providing appropriate care plans for life in aged care or end-of-life, providers have a genuine opportunity to reduce the effects and potential for trauma for thousands of Australian families.

By using person-centred and rights-based care, we're developing a model that sets a new gold standard in aged care provision. With the shift to values-based, person-centred care, Australia is reforming the aged care landscape, which can help:

- Promote the Australian quality approach to other lucrative markets within Asia-Pacific
- Test and develop models that raise the dignity of people with disabilities
- Reform aged care in Australia to be more inclusive of the Indigenous, Person of Colour and LGBTQIA+ experience.

When you think about it this way, compliance has provided an exciting opportunity to create better relationships with your teams, clients and their families.

ExSitu has worked with individuals and a range of aged care providers to investigate and capture thousands of care plans. Our easy-to-use online platform creates a blueprint of the individual's care needs, and we offer both DIY and facilitator-led options, as well as training for providers.

We're proud of our award-winning person-centred care plans, that are providing a vital blueprint for supporting the wellbeing and dignity of older Australians.

April Creed RN BN,
Executive Director, ExSitu
www.myexsitu.com

A forgotten group

Issues facing older people leaving prison



When we think of the diversity of older Australians, most of us probably give little thought to older adults who are ageing in or leaving prison.

There has been a marked increase in the number of older people in prisons across Australia and elsewhere, and the population of older prisoners is growing faster than that of younger prisoners.

This increase cannot be attributed only to population ageing. Rather, it is a combination of factors including overall population ageing, mandatory sentencing, standard non-parole periods, improved forensic techniques and a spotlight on historical offending.

In a recent report, *Issues facing older people leaving prison: Recommendations*, the Australian Association of Gerontology (AAG) detailed the challenges faced by older adults leaving prison.

Like the general population, older people who are currently incarcerated represent a diverse group of individuals with unique backgrounds. They often come from marginalised backgrounds and have endured significant disadvantages prior to entering prison.

Their complex health, social and aged care needs make them vulnerable to 'premature ageing' and the early onset of ageing-related conditions such as falls, functional and cognitive impairment, and immobility.

As a result, people ageing in Australian prisons are usually considered to be 'older' once they turn 50, or 45 for Aboriginal or Torres Strait Islander people.

Given the increasing rates of older people entering and leaving Australian prisons, there is a pressing need to better understand their experiences to enable better transition planning and post-release support.

To date in Australia, there are very few programs that prepare older people in prison for life 'on the outside', especially for those with ageing-related health and social needs.

Specific challenges for this population include lack of continuity in health and aged care support, poor social networks, long-term effects of trauma, absence of identity documents, and barriers to obtaining employment.

As a result, it is hardly surprising that many aged care providers across Australia feel ill-equipped or unable to accept people who have been in prison.

Fortunately, there is promise in emerging practice in transition and pre-release planning, and post-release programs for older people leaving prison. At the systemic level, these include:

- challenging perceptions about ageing prison leavers as inherently 'dangerous' and 'high risk' through evidence-based communications and training programs
- strengthening local linkages between correctional services, aged care assessment teams and aged care providers
- expanding medical transition programs to include psychological, financial and social supports
- tailoring transition programs to older Aboriginal and Torres Strait Islander people

- providing fit-for-purpose housing for older people leaving prison, including options for community aged care
- referral to intensive case management services for older people leaving prison
- offering trauma-informed services that recognise the complex biopsychosocial concerns that older people in prison face and the consequences of these issues before, during and after incarceration.

Policy and funding change takes time. In the meantime, older people who were previously incarcerated experience incredible hardship on release from prison, depriving them of opportunities to age well, even after they have served their sentence.

As the number of Australians ageing in prison continues to grow, the need to better understand the problems and the gaps associated with the experience of leaving prison has become increasingly important. While recognising the significant challenges faced by aged care providers, there are some practical steps that can be taken at the local level to provide an equitable opportunity for older people leaving prison to age well and with dignity. For example, providers might:

- recognise that they are in a position to support older prisoners through their home care or residential services
- break down stigma and discrimination by referring to older prisoners in their diversity resources and training, and extend trauma-informed service provision to include older prisoners
- engage with prison transition and post-release services, such as the Community Restorative Centre in New South Wales or the Victorian Association for the Care and Resettlement of Offenders (these services are easily found through an online search).

Dr Amber Mills,
Policy and Research Manager,
Australian Association of Gerontology
www.aag.asn.au



Resident Cath enjoying time at the Star Café with her daughter Trish.

Café serves up intergenerational meeting place

A place where everyone is welcome

A new café located within an aged care residence on Victoria's Surf Coast is bringing a slice of 'normality' to residents and their loved ones, with an intergenerational twist. It is also providing incredible work skills opportunities for people with disability.

Star Café is a social enterprise run by for-purpose aged and disability services organisation VMCH. Opened in December 2022 at VMCH's Star of the Sea Aged Care Residence, the café gives young trainees with disability vital job skills on their pathway to finding paid employment.

Recent figures from the Australian Institute of Health and Welfare show working-age people with disability are twice as likely as those without disability to be unemployed. Insufficient work experience is one of the most common reasons people with disability have difficulty finding work.

And while the social enterprise aspect of the café is delivering invaluable experience for trainees, it's the older customers and their families who have really embraced its introduction.

Customer Nonie says sharing a coffee and morning tea at the café with her husband Ken, who is a resident, has brought them "such pleasure".

"The café has opened up opportunities for all residents to extend their friendships with residents from each unit, which is such a lovely way for them to interact, and then families arrive. It is so nice to see the socialising across the board, and lots of chatting and laughing," Nonie says.

"The added plus is for residents is to be among different generations while sitting in the café."

Café Coordinator Cathy Rundle agrees the intergenerational aspect has been a lovely bonus. She's set up toy baskets and a colouring in station, and has provided highchairs to entice local mother's groups, young families, and residents' visiting grandchildren and great-grandchildren.

"We had a family in the other day with their little girls and a few of the residents just sat there smiling at the kids. The residents' faces just light up – it's beautiful to see."

Carlyn is one of Star Café's first three trainees and says interacting with older customers has already helped to build her confidence. The intergenerational relationships hit close to home, with Carlyn's own nan, Linda, a resident.

"I like seeing Nan on a Monday morning. I'm enjoying my time here, especially having hot chocolates and iced chocolates, and when Cathy brings her dog Rosie to visit the café," said Carlyn.

The café has also been a drawcard for people seeking residential aged care.

Resident Aurel, who meets his two mates Ron and Wayne at the café each morning, says his son Pete chose Star of the Sea because of the café.

"He picked this place over two others because he knows I love my coffee, and it's good coffee too!" Aurel says. "The café has given us a nice place to meet away from our rooms."

Cathy says Aurel, Ron and Wayne are known around the café as 'the boys club'.



Café coordinator Cathy Rundle with Connor, one of the trainees.

"I have watched them become good mates who now meet every day at 10am. They take turns shouting rounds of coffee and sometimes Aurel's son will pre-pay for them. According to Aurel, it's also a great place to meet some ladies!"

Ron's family are also appreciative of the café, especially its pet-friendly aspect.

"They frequently bring their dog to the café's courtyard," Cathy says. "The excitement when the beautiful golden retriever sees Ron is incredible, and Ron's daughter is so happy to have this as a meeting place for their family."

Cathy says the café also helps to dispel stigma around aged care residences.

"It's great to see locals pop in and be pleasantly surprised at what they experience. You can almost see any misconceptions they may have about aged care melting away."

For Nonie, the café has been a game-changer after a very tough few years.

"COVID-19 has changed us all, and for this café to bring some normality of the things residents enjoyed prior to entering aged care and lockdowns is wonderful. As the life we once had has changed, Star Café has brought us such pleasure. What a bonus to have this available to

all residents, their families, grandchildren and friends."

Star Café is located at Star of the Sea Aged Care Residence, 1290 Horseshoe Bend Road, Torquay.

Cassie Zlonzak, Communications Manager, VMCH
www.vmch.com.au



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Be Connected and stay safe

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beconnected.esafety.gov.au

BC

Giving tech gifts like home assistants and smart phones may be very welcome and well intentioned, but these electronic devices can also be overwhelming and risky for older Australians if not set up securely.

The eSafety Commissioner, Australia's independent regulator for online safety, is encouraging everyone to support the older Australians in our lives by taking the time to check their device settings and reinforce the importance of online safety, with help from their Be Connected initiative.

"Technology and electronic devices can help open up a wide and wonderful new world for older Australians – from facilitating video calls and connection on social media, to introducing new hobbies like listening to podcasts or playing online games," eSafety Commissioner Julie Inman Grant said.

"Access to services and social connection through digital technology and the Internet is empowering. However, we know that it can also be overwhelming to an older person who may not feel confident online and doesn't know what to look for when setting up a new device or signing up for a digital service.

"Even those of us who use technology on a daily basis can find it challenging to create strong passwords and review privacy settings across our devices and accounts. For older Australians who haven't had as much exposure to the online world, this can be an even more intimidating process full of confusing tech jargon."

Be Connected provides a wide range of self-paced courses to help improve online safety and security settings, accompanied by easy-to-follow instructions with short videos and summary sheets to download and use as helpful reference tools. This makes it a useful resource to help older Australians, and those who support them, to keep their online skills sharp and increase their confidence using the Internet and digital devices.

"No matter our age or digital skill level, we all need to be careful about the amount of personal information we disclose online, especially as technology evolves and new devices

have the potential to collect extensive location and biometric information including fingerprint logins," says Julie.

"In connecting our loved ones through new devices and online services, we need to make sure devices and accounts are set up securely, so we don't unintentionally open them up to scams and other vulnerabilities."

Be Connected is an Australian Government initiative implemented in partnership by the Department of Social Services, the eSafety Commissioner and Good Things Foundation Australia, committed to improving the online confidence, skills and safety of older Australians.

Aged care providers are encouraged to share this information with their clients and team members, with hundreds of free online safety resources available on the Be Connected website.



ONLINE SAFETY TIPS

- Make your passwords strong and unique, and set up multi-factor authentication on accounts.
- Don't share more information than you need to: when signing up for online services or registering an account, remember that you can choose to skip fields marked as optional.
- Adjust your privacy settings on social media platforms to help protect your personal information and be mindful about how much information is in the photos or videos you share.
- Be aware of scams: there are many online, email and phone scams out there, so it's important to stay vigilant. Remember, if something looks too good to be true, it probably is.

eSafety Commissioner
www.beconnected.esafety.gov.au

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Fijian workers Mala, Seru, Kuini, Mere and Rae are helping to fill workforce shortages at NoosaCare.

Overseas workers are back

NoosaCare welcomes Fijian team members

Not-for-profit residential aged care provider NoosaCare, located on Queensland's beautiful Sunshine Coast, welcomed five overseas workers from Fiji to assist with delivering care and support to residents at both their Carramar and Kabara sites at the end of last year, with an additional eight Fijian women commencing employment in March.

In a welcome return to migrant workers, who have traditionally helped fill a gap in Australia's aged care workforce, the new Fijian staff members arrived in December and have been a wonderful addition to what is already an incredible community.

While blending cultures can take time and proper onboarding is critical to success, a beautiful message from one Fijian worker about her time at NoosaCare demonstrates how seamless the transition can be.

"We are a lucky lot to be here among the most considerate, dedicated and versatile team of people. From the NoosaCare management who made sure we had a smooth transition, to the team leaders, teaching us how and leading by example, to the carers and residents who have made us feel welcome and part of the Kabara family," she said.

New CEO Grant Simpson said, "We see their engagement as one element of our strategy to address the critical staffing shortages in our region.

"Like all aged care facilities, our ability to recruit and retain staff been affected by COVID-19, government directives, wages and the high cost of living.

"To make sure we can continue to deliver outstanding services, we have had to be creative in our thinking and explored options that have previously never been considered.

"Fiji has a culture of caring for family and the elderly so we are very confident that our new recruits will fit into our organisation and broader community easily.

"But there will undoubtedly be new experiences for them and different ways of doing things, so we are very focused on ensuring a proper welcome, induction and onboarding process."

The recruitment of the personal carers was made possible through NoosaCare's participation in the Pacific Australia Labour Mobility (PALM) scheme – an Australian Government program to assist organisations facing workforce shortages. The workers were selected by private firm Health X and are likely to be in Australia for at least two years.

Mr Simpson said, "We are so grateful that these Fijian workers chose NoosaCare to be part of their working family. They are boosting morale one smile at a time."

NoosaCare has been a part of the Noosa Community for over 35 years. Carramar in Tewantin and Kabara in Cooroy are peacefully nestled in the beautiful Noosa hinterland and are just a short drive to Noosa River, Gympie Terrace and other popular local attractions. Both locations offer care and comfort reflective of the lifestyle that our residents choose, with low-, medium- and high-care options, as well as respite and dementia care.

Kate Bristow Executive Assistant, NoosaCare Inc
www.noosacare.com.au

Free learning program for aged care staff

Upskill your workers from a non-English speaking background

A free and flexible education program designed to improve staff communication skills, confidence and loyalty is being offered to aged care service providers across Australia.

With about one in three of Australia's aged care workers coming from a non-English speaking background, Navitas Skilled Futures is promoting its 'Foundation Skills for Your Future' program to the aged care industry to help improve workers' skills and boost quality of service and staff retention.

The industry-specific professional development program delivers tailored training, usually with a focus on language, literacy, numeracy and digital skills.

Navitas Skilled Futures Executive General Manager Michael Cox said, "Once a business approaches us for training, our team works closely with managers to identify gaps in their employees' skill set. This allows us to design and deliver a tailored program to improve workforce capability and productivity."

Mr Cox explains that with industry-wide staff shortages and the demand for aged care services increasing, it is a good time for providers to consider upskilling current staff through learning and professional development to increase skills, morale and loyalty while boosting overall workplace productivity.

"The outcome for employees is greater confidence and job satisfaction, which in turn is a benefit for organisations, who are more likely to retain and attract a happier and more effective workforce, and who feel appreciated and well supported," he said.

Navitas Skilled Futures is an award-winning education and work skills provider that has been delivering government-funded programs to Australian migrants and refugees for more than 30 years.

Its flexible 'Foundation Skills' program can be delivered on-site or online, over a period of weeks or months, at a time that suits participants. Programs are accredited or non-accredited up to Certificate II level.

Navitas Skilled Futures has successfully delivered the Foundation Skills program to a range of employers in the healthcare sector, as well as industries such as hospitality and manufacturing.

Multicultural community service provider CASS Care recently recorded a 100%

satisfaction rate by all participants in its Foundation Skills course for its workers across child care, aged care, disability services and settlement services.

Positive feedback from CASS noted the combination of good planning, excellent training, stability and communication with Navitas Skilled Futures.

"Navitas working with us in planning and coordinating the whole process, plus the actual high-quality delivery of the training, meant we met that goal of having more staff being upskilled to do the work they need to do," said CASS Senior Executive Officer Dorothy Hung.

"For Navitas and CASS we are dealing with a lot of people from non-English speaking backgrounds and I think we do have that same focus in assisting this vulnerable group of people who are skilled, but then because of their English levels they may have some hiccups.

"We were grateful to the trainers for their flexibility to be able to review the program and make changes accordingly to suit the individual needs of our cohort."

The Foundation Skills for Your Future program is funded by the Australian Government. The average length of a program is three months with an average class size of 15 people, with programs accredited or non-accredited up to the Certificate II level. For more information or to check your eligibility, please visit the website.

Navitas

www.navitas-skilled-futures.com.au/FS



CASS Care migrant workers were able to access Government-funded learning.

Aged care delivery outside major cities needs specialist know-how

New Government-funded aged care training program offers managers 'blueprint for best practice' in rural and remote delivery and culturally appropriate care

Ask managers about their work in aged care delivery in rural and remote communities and most will tell you the work is complex, rewarding and meaningful. But challenges persist, and are often tied to professional isolation, high turnover rates and limited access to culturally appropriate training that ensures standards of care are being met.

This is why a dedicated training program for aged care managers in rural and remote Australia is so important, and why the Australian Government engaged Barbara Schmidt and Associates to develop a Rural and Remote Aged Care Management Training Program through the Department of Health and Aged Care. After a successful 10-week pilot of the program in 2022, the department is now funding a much larger roll-out for service providers in rural and remote communities, beginning in late February 2023.

The program provides aged care managers and leaders with practical skills to deliver culturally appropriate training and implement culturally safe care in relation to First Nations communities, with mentoring to provide ongoing support to participants.

10 weeks of vital learning and networking

The first week features a compulsory introductory webinar where the program is unpacked, with a focus on context and the role of the manager.

The second week is where the all-important five days of face-to-face learning happens. The focus here is about meeting aged care standards to ensure quality outcomes for Aboriginal and Torres Strait Islander peoples.

Being together, in-person, is a deliberate strategy meant to combat professional loneliness and excite learners through their shared experiences.

Weeks three to 10 see all participants supported through structured online mentoring sessions. Managers work through learning tasks, designed to utilise their new knowledge.

The big goal is clear: implement the systems and processes required to meet the Aged Care Quality Standards and legislative compliance requirements.

Experienced trainers

Our cross-cultural team of trainers, including Aboriginal and Torres Strait Islander educators, are experienced in rural and remote aged care services.

We are focused on successful succession planning that sees managers live, work, and stay connected in their home communities.

We also commit to walking with all participants every step of the way.

Outstanding feedback

All participants in the 2022 pilot program reported the experience was overwhelmingly positive.

Feedback included:

- "The attendance mix, realistic content, mentor follow-up is the blueprint for best practice."
- "The program was motivating and encouraging."
- "I was finally able to be around a group of peers experiencing the same issues and barriers that I've experienced."
- "I don't feel as alone as before."
- "I cannot rate this highly enough."

Get involved

Over the next 16 months February 2023 to May 2024, we will offer eight workshops.

Face-to-face delivery will be held in Adelaide, Broome, Darwin and Cairns.

The training program will be delivered at no charge for services located in remote and very remote locations (MMM 6 and 7) and on a case-by-case basis for services in rural areas (MMM 5).

The cost of travel and accommodation will also be met for eligible participants.

If you are interested in accessing a customised Rural and Remote Aged Care Management Training Program, please visit the website to complete an application form or call 1800 305 080 for information.

Barbara Schmidt, Director, Barbara Schmidt & Associates www.barbaraschmidtandassociates.com

Search 'Remote and Aboriginal and Torres Strait Islander Aged Care Service Development Assistance Panel (SDAP)' on the Department of Health and Aged Care website, www.health.gov.au

Expanding the allied health workforce

An innovative program attracting allied health graduates into aged care

South Australian aged care provider ECH (Enabling Confidence at Home), is not only making a difference in the lives of its clients, but also impacting the university graduates of today.

ECH, the largest integrated provider of retirement village accommodation and ageing care services in South Australia, is achieving this by offering graduate applicants from allied health a guaranteed 12-month contract to start them on their chosen career journey.

While similar opportunities have existed at ECH for past graduates, this is the first time the allied health graduate program is being offered as a consolidated program.

Through the program, graduates work within a multidisciplinary team, get direct client exposure, build a client portfolio, and are provided with structured supervision as well as an attractive graduate salary and comprehensive induction and onboarding.

ECH Human Resources Manager Narelle Milne says the organisation's commitment to mentoring and supporting graduates is an investment for the future.

"We see attracting graduates as a great opportunity to introduce them to aged care. Our main objective is to change the perspective of what aged care is, in the eyes of our graduates, that it's not purely residential," says Narelle.

"Graduates get the invaluable opportunity to join a vibrant and driven team that provides them with support and mentoring to develop their skills."

The process started in August and September last year when ECH advertised for applications from final year allied health students at universities.

"It takes the pressure off them because they know they have a job at the end of their qualifications," she says.

Throughout the program, graduates gain guided support and knowledge from clinical leads and senior allied health professionals, as well as the

opportunity to work in the community to deliver services and meet clients.

Previous graduates coming through ECH have expressed positive feedback of their experience of working at the profit-for-purpose organisation.

Expanding the program, which offers roles in physiotherapy, occupational therapy, exercise physiology, podiatry and massage therapy, is a long-term goal for ECH as the organisation expands and has greater capacity to mentor more people.

"It can be quite stressful looking for employment after graduating, so they are grateful for this opportunity and also the invaluable exposure of meeting clients and working with them," says Narelle.

"ECH is all about keeping people in their homes and living their best life, and we give these graduates the opportunity to contribute to that, making an easier and better life for older Australians, so there's an enormous altruistic reward, too.

"They get to be part of a supportive environment and a team that is really close, giving them the best experience as they start their employment journey in a career they have worked hard for."

ECH
www.ech.asn.au



ECH client Colin enjoying his workout with ECH Fitness Leader Diana Scalzi.

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Traineeships help ease the workforce crisis

Investing in your workforce is one of the best ways to build loyalty

Training your own workforce has long been a solution to chronic staff shortages but in an era of high staff turnover and the ‘portfolio career’, where staff members often have more than one employer, management can sometimes think it’s too difficult.

Staffing the aged care sector was a challenge long before the pandemic, but COVID-19 has amplified the problem – and that’s reflected in the series of retention bonuses offered to staff in aged care services owned by the Federal Government.

The first rule of crisis leadership is to identify what you can and can’t control in managing the problem – we cannot control the wind, but we can adjust the sails, as American activist Bertha Calloway observed.

Clearly the aged care workforce crisis, so long in the making, cannot be solved easily given external factors, but there are some practical strategies for building your workforce.

Human resource research shows that investing in people – particularly in training – is one of the best ways to build a loyal workforce.

A 2018 LinkedIn Workplace Learning Report found 94 per cent of employees would stay at a company longer if it invested in their career development.

And, in an economy characterised by post-COVID workforce restructuring, offering people on-the-job training where they can earn while they learn – in metro and regional areas – is a major drawcard, particularly for people looking to re-train.

Retaining staff will also increasingly require a workplace culture that connects with the values of employees – particularly as the choices of Millennials and Gen Z who make up 46 per cent of the workforce are motivated by values such as diversity, personal development, wellbeing and authenticity.

Traineeship partnerships with a group training organisation significantly reduce the risk, cost and hassle of setting up training opportunities, and could be part of the solution for aged care providers faced with critical staff shortages.

Maxima Group Training – one of Australia’s leading not-for-profit training and staffing agencies –partners



with Host Employers to recruit and train the right staff for their organisation.

In the business for more than 35 years, we’ve identified the aged services industry as an area of crucial community need and we’re investing in a specialist team to develop a certified, nationally recognised qualification to build our aged care workforce.

Our aged care traineeships not only provide trainees with best-practice technical and soft skills while they are getting paid – they make them feel valued and supported.

As Jenni, an Individual Support trainee in the Riverland region of South Australia, says, “When I go home at the end of my shift, I feel satisfied that I’ve really contributed to the wellbeing of older people in my community, not only helping them with their daily personal needs, but connecting socially.”

While aged care organisations might feel that they don’t have the resources to manage trainees, partnering with a relevant training program, like Maxima’s Group Training Program, takes the pressure off, providing mentoring, onboarding, monitoring and performance support.

Training partners usually manage everything from advertising, testing, interviewing and short-listing candidates to the legal aspects of employment including insurance, superannuation and providing personal and protective equipment. Maxima also works with Nominated Training Organisations (including employers’ preferred training providers) to equip trainees with a Certificate III in Individual Support for in-home and residential care settings.

Training costs through Work Ready Training Providers are subsidised and Host Employers may be able to access government incentives, including Aboriginal and Rural Funding Arrangements.

It’s not a silver bullet for the industry’s workforce challenges, but Maxima’s traineeship model could be a practical way of building a certified, nationally recognised professional workforce for the future.

Nicole Buksh,
Apprenticeship and Traineeship Consultant, Maxima
www.maxima.com.au



**Apprenticeships
& Traineeships**

GROW YOUR OWN

Apprenticeship and traineeship partnerships with a Group Training Organisation (GTO) significantly reduces the risk, cost and hassle of recruitment and employment. This could be part of the solution for organisations faced with critical staff shortages.

It is proven that investing in people, particularly in the area of training, is one of the best ways to build a loyal workforce.

Maxima Group Training, one of Australia's leading not-for-profit GTOs, partners with Host Employers to recruit and train the right staff for their organisation – and we've been doing it for more than 35 years.

Contact Maxima today to find out more!



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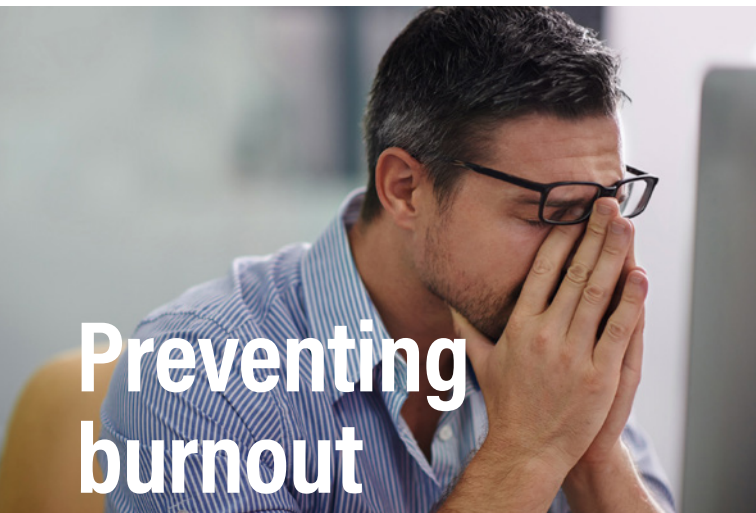


Maxima acknowledges the Traditional Owners and Custodians of this country. Through our actions we respect cultural heritage and recognise their connection to lands, waters and community. We pay respect to Australia's First Peoples and to their Elders past, present and emerging.



Who do you need?

- » Trainee Individual Support
- » Trainee Business Admin
- » Trainee Cyber Security/IT
- » Trainee WHS/HR
- » Apprentice Cook



Preventing burnout

Fighting fatigue for optimal resident outcomes

Burnout and fatigue in the aged care sector have been long-time industry concerns, on the back of staff shortages and overburdened resources, however it's now worse than ever.

Extraordinary stress and pressure experienced by healthcare workers over the past three years during the COVID-19 pandemic has taken its toll, leading to more than 80 per cent of primary care nurses reporting higher-than-normal fatigue levels, according to the Australian Primary Health Care Nurses Association.

While other industries have taken action to combat fatigue, the aged services industry has largely been left behind due to the increasing demand for care and service delivery, and limited resources.

In order to effectively tackle fatigue, and significantly improve their ability to provide high quality care, organisations require insight into the underlying root causes and key patterns behind workplace stress.

Implementing modern workforce management solutions can provide insights into the underlying causes and patterns of fatigue, empowering organisations to take the necessary action to proactively manage the issue, thereby improving employee satisfaction and retention and ultimately, the delivery of quality care.

There are three critical ways that aged care organisations can monitor and positively influence fatigue in the workplace effectively, which can boost workplace morale and prevent burnout.

1. Identify and control fatigue-related risks

Work schedules that limit the time employees can physically and mentally decompress may cause fatigue. For example, early shift start times or late finishes, short breaks, overtime,

double shifts, or not enough rest breaks during a shift are contributing factors that take their toll on staff.

To support staff wellbeing, work schedules need to include shifts with appropriate gaps to ensure employees can get adequate rest and personal time. Intelligent workforce management tools can continuously monitor work schedules and mitigate potential issues with shift times that could lead to compounding staff burnout. These tools also provide invaluable insights at managers' fingertips.

2. Analyse fatigue trends

Certain trends that can indicate fatigue include increased absenteeism and agency use, excessive overtime and poor work performance.

Education on the effects of fatigue, strategies to increase alertness, and more breaks can reduce the risk of employee burnout in the short-term. However, long-term exposure to heavy workloads, long shifts and fast-paced schedules increases the chance of fatigue, so it's important to be proactive in dealing with these risks.

Real-time, on-demand data analytics empower employers to track trends and identify systemic fatigue risks, such as specific shifts or times of day where exhaustion is repeatedly reported. In turn, this information can be used to address the risk by providing measures such as a day off, more rest time between shifts, or a break from normal duties.

3. Notify managers of increased fatigue risk

Aged care facilities continue to face severe pressure while battling escalating understaffing issues. This means that managers are unlikely to have the resources to constantly monitor their team for signs of mental and physical exhaustion. Therefore, it's crucial to implement a system that proactively informs managers when their team members are experiencing heightened levels of tiredness and disengagement.

The cost to the organisation for giving a team member time off, or a longer rest break to recuperate from a prolonged shift, significantly outweighs the cost of a serious incident, negative care outcome or losing the employee at a time when staff are already scarce. The right workforce management tools can improve communication and alert managers to take action to reduce the signs of burnout and fatigue sooner.

By reducing the risk and likelihood of fatigue, there are fewer workplace incidents and injuries, reductions in absenteeism and staff turnover, and better decision-making and productivity, leading to higher quality care.

If you're ready to take the next step in fighting fatigue in your workplace, or if you'd like to know how to leverage workplace management tools to proactively manage exhaustion and prevent burnout, contact our healthcare solutions specialists to find out how we can help.

**Darren Kilmartin, Director of Healthcare,
UKG (Ultimate Kronos Group)**
www.ukg.com.au



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Prioritise planning now

With more changes on the horizon, preparing for future demands on service delivery is vital

Like many in the aged services industry, I also feel overwhelmed with the amount of change that we have recently undertaken while managing to keep our heads above water. The unsurprising news is that this unrelenting pressure is not about to be released anytime soon.

Motivational quotes on change are great for giving me the framework and impetus to maintain momentum in my work designing and delivering education to inform and empower our aged care industry.

The singular motivational quote that resounds with me right now is by Deepak Chopra, “All great changes are preceded by chaos.” Well, that certainly is true. Our chaotic world of aged care has undergone an extraordinary amount of change over the last 10 years, even more so after the most recent Aged Care Royal Commission, and it can feel like an out-of-control roller coaster sometimes.

The ability to plan, either strategically, personally or for business is a critical skill right now for managers. Taking the time to plan how you are going to address what is not only right in front of you each day, but also what is going to change this year and next year for aged care, should be at the top of your list of priorities.

Our entire workforce and all contractors who are exposed to aged care will be affected by the cultural change influenced by the integration of Consumer Directed Services (CDS). Separate to Consumer Directed Care (CDC) – we love more acronyms don't we – CDS will have the biggest effect

on our industry and models of care that we have seen for quite some time.

CDS is the collaboration between consumer and provider to deliver services in the right way, at the preferred time and with the preferred person, while CDC is the transparency and collaboration with the consumer on planning and delivering care with their goals and preferences.

CDS will need a structure established to identify what services the consumer would like to access, if it is able to be provided or negotiated, and the costs clearly detailed in evidence for transparency and communication to the consumer. The transparency of costs and funding is part of CDC definition and will be critical in compliance by 2024.

Looking at the Australian Government's planned changes to aged care, we have a new *Aged Care Act*, new Aged Care Quality Standards out for comment, a new funding tool, CDC practice (it is no longer just a policy or principle) and last but not least, the change in funding to the consumer not the provider.

These plans require cultural change for our workforce and how they deliver services or approach our consumers. Language, behaviour, documentation, and consumer service skills take time to learn, manage, oversee and embed.

It certainly isn't a toolbox talk and code of conduct that will establish these changes, but rather planning for the long goal. Repetition of message, alternative methods of message delivery in education, constant monitoring, coaching, mentoring, and supporting with training and managing outcomes in a strategic plan for change is critically needed to ensure providers

are confident they can evidence CDS with CDC in each facility.

Providers will need to evolve to become commercially competitive, starting with supporting and investing in your workforce to gain the skills and confidence for delivering the services needed and requested by the consumer.

The 'Five Pillars Over Five Years' published by the Department of Health very clearly state that from 2024 the funding in residential aged care is going to be moved to the consumer, away from the provider. I interpret this as being a very similar process to our existing home care funding mechanisms.

Therefore, dear provider, your IT systems will need to be upgraded again, your account keeping on each cost for care will need to be itemised per consumer, and your RN and care minutes will need to be evidenced as achieved for the consumer's right to transparency in funding.

Circling back to my introductory comments, we need to plan now for these significant changes, the time and investment in your workforce to skilfully manage these changes could really be a critical component in ensuring viability and success of your business and organisation.

Don't forget, we are on a journey that is transforming aged care across Australia, and great changes will come from this chaos. In the words of Wayne Dyer, “If you change the way you look at things, the things you look at change.”

**Karina Peace, Aged Care Consultant,
KPeace Consulting
www.kpeaceconsulting.com**

New bite-size training modules

Upskilling all your staff on the Aged Care Standards has never been easier

There's no denying that Australia's aged care sector has had its challenges. Before COVID-19, the sector was already facing significant challenges, driven by widespread worker shortages, increasing demand for services, and escalating resource needs due to new requirements identified at the Aged Care Royal Commission.

And while it's clear that reforms were necessary across the sector, the challenges accelerated as safety requirements intensified when the global pandemic hit. At the same time, skilled immigration, a significant source of labour for the sector, all but ceased.

The industry is facing the perfect storm

Recent research from the Committee for Economic Development in Australia (CEDA) has highlighted just how critical this skills shortage has become.

The report identified an immediate need for an additional 8,000 workers to meet international best-practice care and an ongoing need for 35,000 workers to join the sector annually. All of this in an industry that has a high attrition rate, with some 65,000 employees leaving the sector each year.

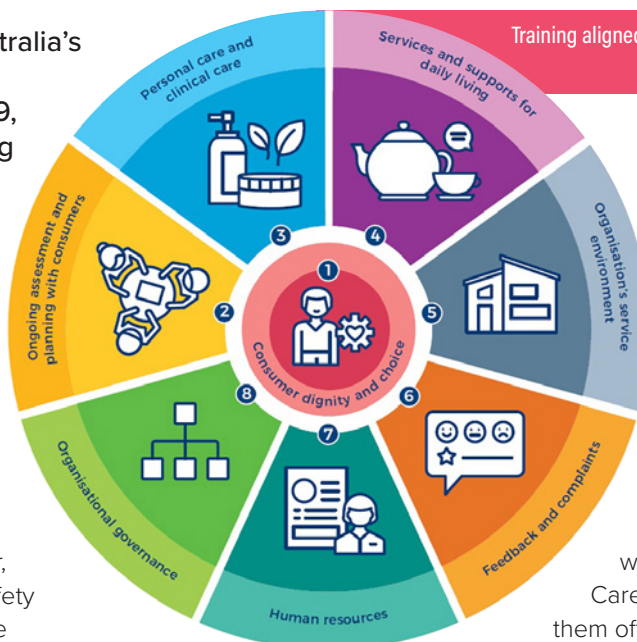
And when it comes to addressing such sweeping skill shortages, the response must be multi-pronged. One of the key areas is training, not only for new workers but existing ones too.

Three reasons why training is critical

First and foremost, targeted training ensures the sector provides the best possible care to clients in all settings, from home care to residential aged care homes.

Secondly, with such high attrition rates, staff engagement must be high on the agenda, and thirdly, providers must be able to demonstrate skills alignment with the aged care standards to meet compliance requirements.

But the challenge of balancing worker shortages with the need for ongoing upskilling and training is a significant one.



Training aligned with the Aged Care Quality Standards is vital.
Image credit: www.agedcarequality.com.au

Accredited training is essential to build vital skills and advance careers, but these courses take time away from the coalface, something many providers simply can't carry right now.

Short, sharp training may be the answer

In this environment, providers need options to quickly upskill workers in alignment with the Aged Care Quality Standards without taking them off the floor.

It's a challenge VERTO has been working closely with providers to address for some time. In response, we recently launched a non-accredited Aged Care Toolbox Talk Kit. The kit contains everything a provider needs to upskill staff on 37 topics, aligning to eight Aged Care Quality Standards.

What sets this kit apart from other available resources is that it can be delivered in short, sharp 10–15-minute bursts, perfect for shift handovers. This means staff aren't off the floor or completing training on their days off, when recharging before returning to a high-stakes environment is a must.

While these types of training offerings certainly won't replace accredited certification, they will help providers quickly lift skills in critical areas and demonstrate capability to regulators in the immediate term.

Not just for staff, the kit has been used by providers to educate family members whose loved ones need specific supports during time away from the residential aged care home.

When it comes to caring for our elderly, the stakes are incredibly high. We already know that training plays a vital role in employee retention and attraction, but now with bite-size offerings, delivering training on critical subject areas has never been more achievable.

Darren Foster, Training Services Manager,
VERTO
www.verto.org.au

Workforce retention through caring

Do you have a health and wellbeing program for your staff?

Workforce issues are a growing concern in the aged services industry within Australia, particularly as the demand for aged care services continues to increase. With the industry facing a significant challenge in recruiting and retaining staff, which is crucial to providing high quality care to older Australians, it's important for providers to focus on what they can do internally to stem the tide.

One of the key ways to improve workforce retention is by looking after the health and wellbeing of your current staff, which can boost workplace morale by helping staff feel valued. A structured health and wellbeing program tailored to the needs of employees can be a point of difference and identify you as an employer of choice.

What to include in your program

Offering engaging and relevant health promotion activities aligned with Australia's national health promotion days is a great place to start. You can design fun experiences and use the days to build team spirit.

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One of the most important things aged care providers can do as we head into winter, is provide on-site flu vaccinations, which can help protect their staff from influenza and therefore its spread to residents or clients, while also helping to reduce absenteeism.

Annual on-site skin and general health checks can help detect and prevent employee health problems early, while improving overall employee job satisfaction by showing employees that management are invested in their health and wellbeing.

The impact of COVID-19 has taken its toll on the mental health of many people, particularly those working at the front line in aged care. Aside from the pandemic, the aged services industry can be emotionally demanding, with staff dealing with challenging situations on a regular basis – from behavioural issues to grief and loss.

There are many things aged care providers can do to provide staff with mental health support, such as counselling services, employee assistance programs, and regular staff wellbeing check-ins with their supervisor. By providing mental health support, employers can help to reduce the risk of burnout among staff and improve overall job satisfaction.

Providers also need to ensure the workplace is a safe and healthy working environment. This includes providing regular training on infection control, safety protocols and emergency procedures, which helps reduce the risk of injury and illness among staff.

Providing professional development opportunities is another way to engage and retain staff. This includes offering training and development programs to help staff improve skills and knowledge, which can lead to job progression within your organisation.

How to develop your program

While a health and wellbeing program can be very extensive, it's something providers can begin by taking small steps, and then adding to it.

The key components for workplace health and wellbeing are accessibility, communication, health screening and health education.

Sometimes it can feel like there is too much going on, and you're just treading water, so there isn't capacity for big-picture thinking. If that's you, then organisations like Healthcare Australia can provide end-to-end, tailored employee health and wellbeing packages to suit your needs. We have a team of experts ready to assist you, and we've developed fabulous resources like our do the work 2023 Health Promotion Calendar.

Getting professional input can make all the difference, and really make a positive impact on your workforce.

Maureen Taylor, National Manager Corporate & Government Solutions, Healthcare Australia
www.healthcareaustralia.com.au/services/corporate

Blue Care takes Gold at Reader's Digest Awards

Queensland's largest provider of residential and community aged care delivers on quality

Blue Care – Queensland's largest provider of residential and community aged care – has been voted the Gold winner in the highly competitive Reader's Digest Home Care Services QLD category in the 2023 Quality Service Award survey.

Each year, Reader's Digest conducts the Quality Service Awards survey, with the aim of uncovering Australians' attitudes towards services from businesses and companies across different industries.

The award has been warmly received by Blue Care's team who faced a difficult year in 2022 that brought with it flooding events impacting both Blue Care sites and the homes of Blue Care staff, workforce challenges, along with ongoing COVID-19 restrictions and PPE requirements.

Blue Care's Group Executive for Aged Care & Community Services, Cathy Thomas, spoke about the significance of the Service Award for the entire team.

"It was a big year for our team across 2022, facing everything from floods to the continued impact of COVID-19 and social isolation," said Cathy.

"The last few years have taken a toll on all Australians as we've adjusted to life in the age of COVID-19, but our frontline team's commitment to keeping residents and clients connected to loved ones, experiences and communities has been unwavering.

"More than anything, this award is a testament to the continued passion and dedication every Blue Care staff member has shown in the service of our clients and residents, despite the challenges faced along the way.

"To see the effort our teams go to every single day to bring joy and connection to our clients and residents, has been nothing but inspiring."



L-R: Lyndsey Hawthorne, Product Development Manager, Specialised Services - Community Respite, Uniting Care - Blue Care SEQ with Sue-Ellen Smith, General Manager, Blue Care SEQ North, holding the Gold Quality Service Award.

Cathy said the full range of Blue Care services across aged care, retirement living, home care and disability support are built on a commitment to providing a personalised service tailored to every client and family's needs.

The survey, conducted by independent research agency Catalyst Research, involved about 2,000 Australians and captured data on which companies around the nation provide the highest levels of customer service. With 38 categories ranging from supermarkets to roadside assistance, Australians rated organisations across five key pillars of customer service: personalisation, understanding, simplicity, satisfaction and consistency.

The Gold Quality Service Award follows Blue Care's Most Trusted Brand award for residential aged care and home care in Queensland in 2022.

"These awards recognise the trust that Blue Care teams have built with our clients and their loved ones," said Cathy.

"At every step along the way, through the good times and bad, Blue Care staff have constantly shown they are there for our clients and their families.

"Blue Care's story began from one person's desire to serve Queenslanders and improve the lives of those in need. Today, we continue to work together with clients and families to design and deliver the support they need, and this award is a reminder to our team that we are continuing on the right path.

"Care is about putting our customers and their loved ones first at Blue Care. Whether we're on the road, in your home or in centres, everything our dedicated and passionate team of more than 8,000 people do is built on that commitment."

Kim Godfrey-Hempsall, Communications Specialist, Uniting Care Queensland
www.ucareqld.com.au

Humans of Aged Care

Nadine Ozols, Aged Care Deloraine

My aged and community care journey began in 2007, when I was first hired as a Training Support Officer in Hobart, Tasmania. My role comprised mostly of assisting with the Certification III in Aged Care training program – which I enjoyed thoroughly. Most of the program's participants were women looking to re-enter the workforce and supporting them through their journey was the best aspect of my job.

As of now, I have been working in the aged care sector for about fourteen years, the first seven of which I spent coordinating a Rural Primary Health program on the East Coast. At the time, the municipality had the highest median age in the country, so most of our programs were focused on an older demographic, a few of which even took place within the local aged care facility.

After some time, I was offered the CEO position at Aged Care Deloraine and signed a three-year contract with the organisation. I was beyond excited to lead them through the Aged Care Reform agenda. Our organisation did not require tertiary qualifications from me for this position, but rather selected me on my work merits and experience.

I will always advocate for and set the example of an unconventional path leading to high-level career progression.



I strongly believe that if you have the right values, personality, and skillset, you already have what it takes to be great and to leave your mark behind. As well as having the personality for any given role, I also believe working with and learning from a mentor or leader is another key ingredient for a successful career, as they will recognise your potential and support your career every step of the way. I know for a fact that I wouldn't be where I am today without the support of my mentors.

My desire to work in aged care was driven by my Pop, George Hudson OAM. His community spirit, drive, and most importantly, his encouragement of me in my various roles and general life is the foundation for my entire career. In the week following my Pop's passing in 2015, I was offered the opportunity to take on the Facility Manager role at Aminya, which I feel significantly aided me in my healing process of mourning and grief. Looking back at it now, I truly believe it was fate for me to accept the role at that particular moment in time.

Since May 2019 I have been a member of the Tasmanian Women's Council for the Tasmanian Government. I enjoy playing an active role in advocating for and providing advice to the department where I see fit. As of now I am enjoying working with the Minister for Women, as we are currently working on some exciting ideas and projects surrounding mentoring and leadership.

I've always sought to take on opportunities and challenges with the intention of advocating for young people considering a career in aged care or leadership. When I was offered the opportunity to be involved in ACCPA's Women Discovering Aged Care Careers project, I knew it was another avenue to help promote the aged care sector.

I've spent the past few years in senior management informally mentoring staff whenever the opportunity presents itself. As a female CEO, I truly believe it is my duty to play an active role in mentoring others within the industry, with a particular focus on other women.

Helen Li & Omeed Shahriari, ACCPA Industry & Workforce Development, Humans of Aged Care

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Three golden rules for planning acquisitions

Knowing what you want, understanding pricing and being prepared

The 2023 mergers and acquisitions season has opened with a flurry of distressed assets hitting the market. With the pressure of deteriorating financial performance along with renewed activity from the Aged Care Quality & Safety Commission, we are seeing an increasing number of larger operators looking to exit, following the small and mid-sized providers divesting in 2022.

In a buyers' market full of distressed assets, there are some good acquisition opportunities for providers looking for growth, with many of the providers that have traditionally been bidding for homes no longer in the game.

But in this third wave of consolidation, we need to look at these prospects with a new lens, because the fundamentals of pricing and acquisition strategy have changed.

There is an opportunity for strategic growth if we take the time to distinguish between those prospects that will make us stronger, and those that might compromise our existing services.

Define your target

Looking back at the last 25 years of aged care transactions, I would argue that only half of the acquisitions we have worked on have improved the outcomes for the purchasers. The rest have been laden with RAD and bank debt, negative culture or outdated assets, and some of these are now adding to the ranks of distressed sellers.

If a buyer has not clearly set out what type of opportunities will make them stronger, they risk being shaped by

default rather than by design. As a result, many providers resemble the opportunities presented to them rather than a portfolio of services designed through strategy.

In contrast, knowing what assets constitute an appropriate target means that minimal time is wasted on opportunities that don't fit your mandate.

This includes considering:

- service (location, mix, scale, condition)
- operational performance (compliance history, model of care, systems)
- workforce (staffing model/levels, pay rates, culture)
- finances (profitability, RAD levels).

Having the Board warm to strategic targets can also dramatically reduce delays in a process that demands fast decisions. Most importantly, you should move forward only with those prospects that can strengthen your organisation.

Prepare your team and process

In our experience, an aged care provider is most vulnerable to commercial and compliance exposures immediately after they have just bought or built something. This is normally because we use our best people to manage big transactions, often at a cost to the rest of our services.

The major due diligence components of operations, finance, property and legal will need to be managed under high pressure in a very short timeframe, with expressions of interest typically required in four weeks and detailed due diligence in just six to eight weeks.

Having a plan to leverage your internal team and external advisors is vital before the opportunity is presented.

You can fine tune your resourcing strategy once the target emerges, making sure that their workload does not compromise your existing services.

If the vendor is employing a well-structured, professional process, you can adapt to that process but feel confident in pushing back early if the timelines compromise your approach. If the vendor is divesting less formally (or is under duress), it is still in your interest to ensure that all parties are working towards set timelines on agreed terms.

Your transition planning is also critical – the acquisition itself is a small fraction of the transition process and your integration strategy will help you ensure that you are ready for the expansion as well as informing the underlying value of the acquisition to your organisation.

Know your pricing parameters

In all the excitement of a major transaction, we run the risk of moving our primary objective from securing a good deal to just securing a deal. There are some very slick advisors who are experts at driving up competitive tension along with prices. In the aftermath of an acquisition, the seller and their advisors will move on, while you need to be comfortable with the purchase and the price.

At Ansell Strategic we tend to use a template of prices pricing matrix based on asset quality, RAD levels, financial returns and service history that set parameters for bidding on an acquisition. If the purchaser is clear about their benchmarks and thresholds, they are more likely to hold to a position on pricing that is premeditated and less influenced by external pressures.

A key measure of success over the long term is your ability to let deals go. An effective due diligence process will leverage your equity and pricing metrics and help clearly identify those opportunities that do not meet your own criteria, so you can save your resources for the next one that will.

**Cam Ansell, Managing Director,
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Are you ready for even more change in 2023?

Get ahead of the curve without breaking your organisation or your people

Aged and community care faces a 'once in a lifetime transformation'. With shifts in consumer demand, there is ever-increasing pressure for CEOs to modify services, transform their service models and acquire smaller providers to scale up.

Reform is also at unprecedented levels. The sheer volume is immense when you consider the five significant reforms at the end of 2022 and what's coming in 2023. On top of that, there is a looming deadline for a complete changeover to the new home care program in July 2024.

It's overwhelming for leaders in a stable environment, let alone with the 'revolving door' of attracting and retaining workers.

So it's time to reflect. Are you ready for the tsunami of change coming your way?

Transform your organisation, don't break it

So many aged care workforces are at breaking point. Over 50 per cent of aged care workers intend to leave the industry in the next three years. There is a real crisis of exhaustion, with your workforce overburdened with administrative compliance and the pace of reform.

If your people break, your organisation will break. You can't just control or

assure the quality of your services with processes compliant with the latest clinical governance reforms or 5-star ratings. It's not enough.

Tired people make poor decisions, with the risk of downstream impacts on consumer experience and compliance. An early indicator that this may already be the case is that provider non-compliance increased by over 20 per cent at the end of last year.

Every provider is at risk. So how do you transform your organisation, without breaking it or your people?

Steps you can take immediately

To transform your organisation, leaders need to be able to orchestrate a connected organisation system change – inclusive of your care workforce, the new services you expect them to deliver and how to operate 'behind the scenes'.

If you start by taking small steps right now, you can get ahead of the curve.

1. Get your leadership team aligned.

Over 50 per cent of your change success depends on how your leadership 'connects the dots' and empower their teams to coherently and consistently implement change in your organisation.

Over the last few months, we've heard from many care providers who have made the right choice to invest in new leadership talent to get ready for the coming changes. However, it's often the case that individual leaders are not aligned

so their teams 'operate in silos', making it hard to implement any change consistently.

2. Listen to feedback from real people.

If you want a successful transformation, it's crucial to start by putting people at the centre and listen to them – your clients, care workers and allied health providers. Your people know what is likely to break. They can help you solve some of your toughest challenges. However, with the crisis of exhaustion, you must respect their time and do it the right way. It can't be a 'talkfest'.

3. Go beyond a shared vision, and build a 'connected picture' of the future.

A shared and positive vision for the future goes a long way to align everyone on the 'why are we doing this?', yet it's often not enough to help people change.

So what is a 'connected picture' and what else does it achieve? It makes the vision real for people. It is a future blueprint for how to deliver services – the customer experience you want, with the services and 'behind the scenes' support teams, processes and enabling technologies. If your people can see how the vision translates into their day-to-day jobs in a way that makes sense, they will embrace the change.

It helps if it's visual. With so much change, there are a lot of moving parts. A visual picture keeps things simple. While everyone has preferences for how they take in information, most people respond visually.

Take action now

With the July 2024 deadline looming, you really need to take some action now. If you'd like to know if your workforce is ready to implement large-scale change, you can talk to a partner like Fire up Solutions. With the free Fire up 'Fit for Change Scorecard' you can identify if your workforce is ready for large-scale reform. With experts in human-centred change you can empower your leaders and teams to rise to the challenge and be their best.

**Angela Frith, Co-founder,
Fire up Solutions
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James



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Review liquidity and risk

How to make your money work for you

Profit margins in the residential aged care sector remain in decline as aged care providers face multiple challenges, including the response to COVID-19 which continues to absorb limited resources.

According to Stewart Brown, as at 30 September 2022, residential aged care providers were running an average deficit of \$21.29 per resident, per day. This deficit calculation includes the additional \$10 per resident per day of government funding.

Financial stress has a clear knock-on effect on the ability of providers to protect their balance sheets and ultimately grow and enhance their facilities – as well as their ability to provide quality care.

While improving the care of older Australians is a priority for the Albanese Government, there is still a lot of uncertainty around the future of funding.

What we do know is that continuous change is on the horizon and this is expected to lead to a more competitive marketplace, which could increase pressures on revenue further.

That is why action needs to be taken now, as small changes can make meaningful differences over the longer term.

As we wait for further clarification on policy, one area that can and should be prioritised by boards is investment and liquidity risk.

While cash rates are increasing, inflation remains high and so now is the critical time to review your Investment Management Strategy (IMS) and Liquidity Management Strategy (LMS) to ensure they are fit for purpose.

It is also a time to test whether the risk framework in place is still appropriate in this new and changing environment.

Risk tolerance and liquidity needs will be unique to each provider but the approach across the industry has tended to be highly conservative. While this will remain appropriate for some, when the tolerance for investment and liquidity risk is too low,

the risk of failure is heightened. In some cases, it could even be the difference between incurring a loss or turning a profit.

For example, if more cash than necessary is being held on the balance sheet, inflation risk is amplified and opportunity costs exist. In times where profit margins are razor-thin or non-existent, aged care operators need to use the levers available to them to improve financial performance.

This is particularly important in the not-for-profit sector where the levels of cash held are typically much higher than for-profit and government providers.

Even incremental investment gains can make a meaningful difference. For example, an organisation with \$10 million of excess cash in term deposits could have made almost \$1.9 million extra if it had been invested in a conservative portfolio with 40 per cent in growth assets (such as equities) over the past five years. Increase the growth weighting to 60 per cent in a diversified portfolio and the difference grows to nearly \$2.5 million.

It is important to note that investing effectively is only one piece of a very complex puzzle. In order to be successful in this shifting landscape, aged care providers need to consider an array of strategic options including examining current resources available, strategies to diversify income streams, acquisition or merger strategies, divesting non-core activities, redevelopment projects, workforce planning and IT strategies.

After all, it will be the organisations that are prepared to do deep strategic analysis – and do it now – that will succeed.

Anthony Hamawi, Manager NFP & Aged Care, Perpetual
www.perpetual.com.au



	Capital Growth	Income	Total Return	The difference it would have made
Term Deposits	\$ 0	\$ 677K	\$ 677K	–
Conservative	\$ 1,558K	\$ 969K	\$ 2,527K	+\$ 1,860K
Diversified	\$ 2,025K	\$ 1,129K	\$ 3,154K	+\$ 2,477K

Scenarios for returns on an investment of \$10 million during the period 2017-2022.

Investment grade bonds

Appropriate asset allocation can make a big difference to your bottom line

On 1 January 2023, the Aged Care Interest Rate (commonly referred to as the Maximum Permissible Interest Rate or MPIR) increased from 6.31 per cent to 7.06 per cent. This new rate is applicable to individuals who enter aged care from 1 January 2023 and existing residents who move to another aged care facility.

Used to determine the Daily Accommodation Payment (DAP) rate for market price residents and the lump sum rate for low means residents, the change in the MPIR can materially impact the level of the DAP.

With further interest rate rises likely over the coming year, DAPs are becoming more expensive for residents paying the market price. If we assume the MPIR reaches 9 per cent, the market price resident above paying \$400,000 by RAD will pay \$36,000 annually or \$98.63 per day.

Since RADs and DAPs are impacted by interest rate changes, the MPIR for an aged care provider really reflects their cost of capital. As cost of capital rises, aged care providers need to effectively earn a 'more commensurate' return on that capital.

Many aged care providers have been heavily invested in bespoke cash management solutions, whether via

negotiable certificates of deposit (NCDs) or term deposits (TDs).

While this low-risk-low-return asset allocation has worked previously, a more flexible investment strategy is needed as other costs (mainly those linked to inflation) within the aged care sector have risen exponentially.

Additionally, real returns on bespoke cash management solutions are considerably lower than those available in investment grade credit.

With inflation accelerating well beyond initial expectations, central banks have embarked on an aggressive tightening cycle. A consequence of interest rate rises is that investors now have a realistic alternative to generate returns without investing in higher risk assets or compromising liquidity to add incremental yield.

And this is where investment grade credit fits in.

Growth dynamics are likely to be challenged in the pursuit of reducing inflation to a rate close to central bank targets. A contractionary growth regime indicates a defensive bias is warranted as stubborn inflation and slower growth paints a challenging environment for most traditional assets like equities and property. At some point in 2023, conditions may become more beneficial, but we are not there yet.

Both rising government bond yields and widening credit spreads created a perfect storm for credit investors over 2022, driving absolute yields back to levels like those seen before the global financial crisis (GFC).

Despite the rise in yields, many corporate issuers are insulated from the interest rate shock. Through the period of low interest rates, corporates extended their bond maturity profiles, taking advantage of excellent funding conditions. Furthermore, many corporates that pass on rising costs (mainly those linked to inflation) have long maturity fixed-rate debt profiles which will naturally deleverage.

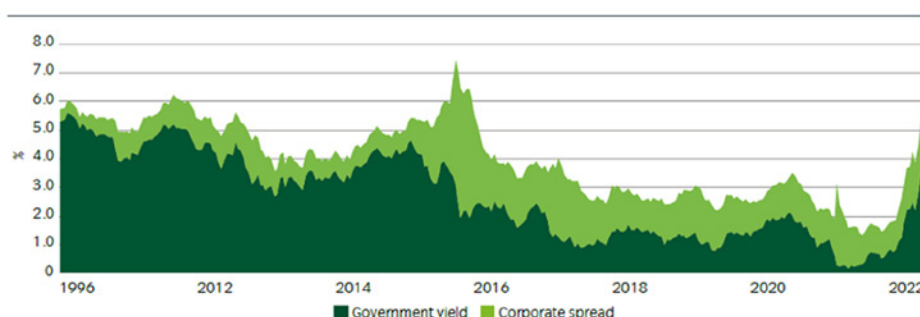
It's important to predicate that we see investment grade credit as another appropriate asset allocation for aged care providers alongside bespoke cash management solutions. We are not recommending a high-yield asset allocation. In accordance with the *Aged Care Act 1997* (Cth), investment grade bonds offer protection of capital and meet cash flow requirements, including repaying RADs as and when they fall due.

Because investment grade bonds can be staggered to meet various maturity profiles, they also fulfil an important requirement in managing the DAP for market price residents and the lump sum for low means residents.

While this knowledge is a good basis for action, administration of your assets requires careful management by a proven investment firm.

Income Asset Management (IAM) has a long history of working with aged care providers, including not-for-profits. We provide direct access to over 350 bonds and currently manage more than \$2 billion in assets. With over 14 years' experience, we stand ready to offer sound advice and effective management of your assets.

Matthew Macreadie,
Head of Credit Strategy,
Income Asset Management
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Absolute yields offer long-term returns. Source: Bloomberg and Bank of America, October 2022

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Is home care a viable business?

The factors affecting commercial success in your operations

As the author of this article, I am conflicted. My initial response to the question about whether or not home care is viable, is yes. However, the conflict arises when the question is extended to the level of viability.

Could home care as a program that is run commercially, be more viable? If so, what level of viability is reasonable? What factors go into financial viability? How can providers legitimately enhance profitability? What actions are providers taking, or conversely not taking, that render home care a less viable enterprise? These are questions worth exploring if you are a home care provider.

On the broader issue of general viability, providers can set their own pricing and in doing so, ensure a commercial level of sustainable profit or surplus is generated. This being the case, why is there an exodus of providers from the sector, purportedly declaring it is no longer viable?

Growing demand and policy shift by governments away from formalised care services such as residential aged care, to in-home care, are obvious indicators of the need to expand community-based services.

If this predictable growth and the lack of alternative service provision continues, existing providers in the sector are in a preferred position and have the potential to improve their standing and performance.

So, what is stopping providers from grasping the opportunity?

As someone who has been involved with the sector in a consulting role for many years and in software development to assist home care, residential care and NDIS providers, I would suggest it is a lack of knowledge of Government funding programs and poor application of sound business principles.

Consequently, they have not identified key business drivers necessary to produce a quality, well run and viable service, which has value based on its return, positioning, reputation, and secure client base.

Equally, there is a lack of recognition that business models need to evolve with changes.

The Government is moving towards a model of 'care continuum', a terminology that describes the concept of multidisciplinary service provision. A care recipient seeks services at some point and over time, service needs inevitably change and grow.

Historically, providers have focused on delivering services for only part of that care continuum, for example home care, rather than providing services across a wider range of needs. However, providers should start considering expanding into a wider range of services, as a more efficient, cost effective and care sensitive model that enhances the outcome for all parties.

This model should also include services that are not Government-funded, which can be delivered cost effectively using existing staff and infrastructure. This approach allows each care recipient to maintain an enjoyable life in familiar home surroundings, as well as personal and family connections.

This means that providers need to provide care and additional services effectively in a marketplace that is geographically dispersed, using staff with skills specifically tailored to a different working environment, who are often remote from supervision.

Staff in this improved model are the face of the business. As part of their roles, they need to be guided to represent the business as:

- carer (to deliver quality services)
- educator (to explain program constraints and opportunities)
- marketer (to make care recipients aware of services available)
- communicator (to deal with queries and concerns)
- supporter (to advocate for their client)
- main contact (link between client and senior management)
- observer (monitor outcomes of care interventions).

Staff require a comprehensive set of skills, most of which are traditionally neither assessed for during recruitment, nor developed post-employment. Additionally, most administrative staff do not receive the training required in Government-funded program management and accountability.

It is not surprising that many providers struggle with viability, based on these factors plus a lack of understanding of pricing and competition. Particularly now that 'unspent funds' no longer support the misguided belief that services are viable because of a positive cash flow.

It is astonishing how many providers set their pricing based on their neighbour's pricing, irrespective of whether that provider has the ability to set an effective market price. The blind leading the blind down a dark pathway to financial ruin.

How do providers address this dilemma? One option of course is to exit; the other is to improve current practices and take the opportunity to succeed.

If you have invested time and resources into delivering services as a home care provider and have not achieved the outcome you expect, there is help available to turn things around and make your business successful.

David Powis is a Managing Director and Management Consultant at e-Tools Software
www.e-tools.com.au

Improving the standard of aged care

Why SIRS mandatory reporting alone isn't enough

The Serious Incident Response Scheme (SIRS), which mandates that providers properly capture incident data and report serious incidents of elder abuse and neglect, is an important mechanism to ensure elderly Australians in care are treated with dignity, respect and receive proper care. But a mandatory reporting system alone isn't enough. Aged care providers must create the right environment and implement safe ways to speak up. When this happens, leaders can take swift and consistent action to address risks to the standard of care now and into the future.

Elder abuse is under-represented

Research by Australian Institute of Family Studies suggests one in six older Australians were abused in 2021 (SIRS commenced 1 April 2021) and the Australian Human Rights Commission suggests two in three elderly people don't report abuse.

While a mandatory reporting scheme plays an important role in the detection of elder abuse and neglect, serious issues might be uncovered too late if people are not comfortable speaking up about their concerns.

Where there is a culture of silence, misconduct and abuses of power can go unchecked.

Therefore, it's critical that aged care providers create an environment where people providing and receiving care feel empowered to report issues, without fear of retribution and with confidence that their concerns will be taken seriously and acted upon.

Why people don't speak up

Fear of retribution is the primary reason why people don't speak up. Raising

concerns challenges the *status quo* which can threaten relationships with care providers, co-workers and managers.

Raising concerns is risky for a person in care, especially if the complaint is against a person providing the care. It's also risky for workers who depend on their weekly income. Often, it's easier to remain silent than speak up.

A feeling of futility is another key reason why people don't speak up – why risk rocking the boat when nothing will change anyway?

To encourage people to speak up, providers need to counter people's fears of retribution and futility by putting in place systems that normalise raising concerns and actively respond to feedback.

Practical steps for aged care providers

- 1. Put 'speak up' at the top of your communications agenda.** Tell elderly people, families, health care workers and employees how to make a report, what steps the investigation will follow (so they trust the process is fair) and explain how your organisation will respond if the complaint is upheld. Start all meetings by inviting team members to share any concerns about care and ideas for improvement they may have. Add 'incident reporting' to the weekly agenda for staff meetings.
- 2. Train care givers and managers how to listen.** It's important for managers and staff to understand how their own beliefs, biases and power differentials can block people from coming forward.
- 3. Implement an independent speak up channel for 24/7 anonymous reporting.** Aged care happens around the clock in a range of settings, which makes it impossible for leaders to hear first-hand about



Kirsty Harvison says good governance needs more than SIRS mandatory reporting.

every incident. Allowing people to report incidents without disclosing their identity, in any location, at any time, and without fear that doing so will come at a personal cost, is a great way to encourage people to speak up.

- 4. Use an incident management system (IMS) to capture all incidents, guide investigations and manage risk.** A good IMS, such as Rely (www.relyplatform.com/aged-care/), allows you to capture all issues, including near misses. An effective IMS guides managers on how to conduct fair investigations that follow the organisation's policies and procedures, and to create reports in a format suitable for SIRS mandatory reporting. Management dashboards help leaders get to the cause of incidents and identify trends and hotspots (as required by SIRS) so they can mitigate risk and ensure quality of care.

SIRS imposes a legal duty on all providers of Commonwealth-subsidised care providers to manage and take reasonable action to prevent incidents. But beyond the legal duty, aged care providers have a moral and social duty to create a safe environment that supports the highest standards of care.

Kirsty Harvison, Senior Advisor,
Your Call & Rely Platform
www.relyplatform.com/aged-care
www.whistleblowing.com.au

Merging is not a sign of failure

Overcoming hesitancy is the biggest problem but the rewards are worth it

Merging with another organisation is not a sign of failure. Rather, it is a recognition of a changing world.

With increasing financial and governance demands in the aged services industry, it is unsurprising to see acceleration in merger and acquisition activity across the industry in recent months.

According to Stewart Brown benchmarking data, both residential care and home care sectors are experiencing declining financial performance. Added to this, organisations are navigating capital works programs, changes to payment arrangements, reforms to governance structures and labour supply challenges.

For many organisations, the solution to these problems is to consider a merger with another organisation. For example, difficulties with finding adequately skilled directors or senior leaders can be overcome by merging with another organisation, and sharing those resources already in place.

Economies of scale can assist in making organisations more financially viable. A larger organisation with a stronger balance sheet can help weather the balance sheet pressures that are currently in existence, and provide a secure future for your staff, residents and clients.

While there is an understandable hesitancy in board rooms to consider mergers, it is likely to become more common in future years.

The pressures created by the reform program in home care are likely to favour larger organisations, while financial pressures and the lack of qualified directors across the industry are two key factors likely to drive a further wave of consolidation as organisations scramble to respond.

It is highly likely that the wave of consolidation that we have seen in the past few years will pick up pace over the next few.

It is not difficult to envisage the future shape of the aged services industry, based on the incentive structures that are

currently in place, or about to be put in place. Aged care organisations should consider this industry structure, and have urgent discussions in their board rooms regarding where they will fit in the future.

A small number of organisations have the skills and resources to become larger players, and will play a key part in the consolidation process. While most organisations like to see themselves playing this role, for most, it is unrealistic.

Most organisations will either need to make the decision early to find the right partner, or find a niche in relation to factors like geography, culturally-specific offerings, specific needs and socio-economic status, where they can protect the strategic value of their businesses in the longer term.

The most important thing is to make these strategic decisions early. Making decisions once you are under pressure decreases options significantly and cedes control to other stakeholders. The most respected board members will be those who perform reviews early, and act to protect their staff and customers when the timing is right.

Pride Living works with organisations as they explore future options. We recently advised Autumn Lodge on their merger with Uniting, which has provided a secure future for an important part of the community infrastructure in the regional centre of Armidale. We are also providing advice to a regional provider of home care and NDIS services with a similar set of challenges. The directors of these organisations are to be congratulated for their leadership in confronting these strategic issues.

Pride Living has the skills and resources to perform strategic reviews for organisations and assist them in finding the right pathway to safeguard the future of their communities in a changing world. We would be only too happy to assist your organisation.

Jason Howie, Principal Consultant, Pride Living
www.prideliving.com.au

Do your residents live in an embedded network?

Make sure they know about their rights

The Energy & Water Ombudsman NSW (EWON) and Australian Energy Regulator (AER) have launched a campaign for embedded networks customers, to raise awareness of their right to contact EWON for free, fair and independent dispute resolution.

The Australian Energy Market Commission estimates that one in 10 Australians live in embedded networks – private electricity networks that supply multiple homes or businesses, like apartment complexes and retirement villages.

Many aged care providers are operators of embedded networks, therefore buy energy for the entire complex from the grid and then on-sell to retirement village residents. This means residents may have less access to market competition and consumer protections in relation to continuity of supply and life support equipment.

Mandatory membership of embedded network operators to EWON was introduced four years ago, providing residents in those complexes with access to free, fair and independent dispute resolution. As always, we urge customers to contact their provider in the first instance, but if they still need help, they can contact EWON.

To increase awareness for residents in embedded networks of their right to contact EWON to resolve disputes, EWON and the AER have launch a co-branded, multilingual campaign. The online awareness campaign focuses on residential complexes and retirement villages with translated communications materials available in six languages: English, Arabic, Chinese (simplified and traditional), Korean, Nepalese and Vietnamese.

We invite retirement village operators to share this campaign with village residents to ensure they are aware of their rights and know where to turn if they need assistance. By doing this, not only are you fulfilling your obligations but you are also positioning your village as one that is transparent and puts its residents first.

“Billing concerns made up 80 per cent of complaints raised by

residents in embedded networks to EWON in the last financial year – indicating that customers need our help. But many residents are not aware of their right to complain to us,” says Energy & Water Ombudsman NSW, Janine Young.

“As the embedded network industry has grown, the energy environment has become more complex.

“Seniors often tell us they have difficulty understanding the complex nature of the energy and water industries. Many are concerned about affordability, and some say they avoid using heating, cooling and cooking appliances because they are concerned about bills.

“Energy prices are rising for all customers in NSW, but customers within embedded networks are particularly exposed due to the lack of retailer choice and many aren’t protected by the Default Market Offer.

“Therefore, providing high level consumer protections for older Australians is vitally important.”

If your retirement village operates an embedded network, help us spread the word by sharing our posters, fact sheets and social media tiles with your residents, to ensure they know where to turn if they need assistance. You can find these resources on the EWON website.

**Jacqueline Heywood, Communications Officer,
Energy & Water Ombudsman NSW**
www.ewon.com.au

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Staff shortages and insurance

What the workforce crisis means for your level of risk

As life returns to some normality post the pandemic, the implications for aged care providers are quite complex. Staff shortages are having the most significant effect on the quality of care but they are also impacting governance and ability to comply with continually changing legislative requirements.

While every aged care provider is different, and many factors will have affected their experience, the issue of employee retention and attraction in the sector is now critical across the industry, and there is a potential for greater reliance on agency staff.

According to a National Skills Commission report published at the end of 2022, the aged care and disability care sectors have more than 74,000 job vacancies, while job vacancies for nurses and aged care workers have doubled in the past three years.

The strain on the workforce carries significant risks for aged care providers, particularly in relation to insurance costs.

Impact on care and compliance

Staff shortages create significant risks when residents don't receive the level of care they need, leading to more serious incidents and potentially fatal accidents.

Insufficient staffing may also result in an increased exposure to acts of violence and aggression from residents, along with a decrease in the required observations to effectively risk assess their needs and changing presentations, and an inability to keep care plans and risk assessments updated.

In addition, there might be increased risks of injury to the staff themselves, when taking on roles and responsibilities with which they are unfamiliar, particularly if they are agency staff with insufficient training in relation to certain equipment.

Impact on staff

Having fewer staff increases the burden on everyone and is likely to result in burnout and a high turnover rate, creating a host of extra expenses and issues for management.

There may also be more Workers' Compensation claims due greater levels of stress and increased risk of injury, with significantly increased workloads leading to mistakes, corners being cut and fatigue causing inattention.

Impact on aged care providers

Critical staff shortages can affect the ability of under-resourced facilities to continue to attract new service users or avoid forced shut-downs as a result of imposed sanctions. As a result, organisations are in danger of losing funding or may even have to consider closing down.

Resourcing issues and reduced quality of staff could have an impact on the likely number of negligence claims, which could also result in an increased focus from the regulators (ACQSC).

To attract new talent, many care providers are having to pay higher rates for staff, especially for nurses and personal carers; or where there are staff shortages, costs for agency labour hire to meet care needs are becoming a large expenditure. With staffing the largest line of cost for most providers, this puts a huge strain on organisations with already thin margins.

Impact on insurers

These scenarios naturally receive increased scrutiny from insurers, with some insurers exiting the aged care market altogether. For those that remain, they are keen to monitor the impact on the aged care sector claims trends and the subsequent potential for significant losses.

Claims can arise across various policies, including:

- Workers' Compensation
- Public Liability
- Medical Malpractice
- Employment Practices Liability
- Directors & Officer's Liability
- Statutory Liability

It's clear that insurance rates have been increasing, along with tightening of coverage and reduced capacity across various lines of business. The current industry retention and attraction challenges will only add to insurer caution.

How to manage the risk

Robust risk management is critical in mitigating these potential risks and reducing punitive reactions from insurers, if they translate into increased claims frequency and severity.

Clear and integrated incident and claims management reporting procedures, bespoke to the operational structure of your business will be important, along with ensuring that major incident response plans are in place.

You should update your risk management framework and review it regularly in line with changing legislation, and have well-maintained records relating to employee training, risk assessments and compliance with policies and procedures.

These practices will not only help you manage your risk in a workforce crisis, but it will be important in relation to the outcome of your insurance renewal negotiations in 2023, improving the quality of underwriting information and attracting potential insurers to take on your insurable risk.

Lyle Steffensen, Health and Community Services Manager – East Coast, Lockton Australia
www.global.lockton.com

Innovation and technology must be core business

The aged care sector has always evolved, and must keep doing so

My journey through aged care spans some 30 years, and I've seen the sector improve in leaps and bounds during this time.

The Standard and CARE aggregate models or CAM & SAM funding, RCS, ACFI and now AN-ACC is how one can mark time and progression throughout the years.

One could also use the evolution of the Commonwealth inspection and auditing process from a basic inspection model to the four accreditation standards, and in more recent times maturing to the eight we have today, and now the 'revised' standards coming in 2023.

Or one could spend time looking at the documentation systems, from paper to the first rudimentary clinical management systems, and later the addition of medication management systems to the ever elusive aged care fully integrated management systems.

The sector has always learnt to evolve, forced in response to the ever-changing regulations and legislation, with the Royal Commission into Aged Care Quality and Safety as a driver.

The pace of evolution over the past couple of years has been more intensive. Providers are faced with a harsh reality, adapt or leave the sector.

Since 2019 we have been in the perfect storm, with COVID-19 battering down our doors, and the press hot on its heels, plus a swathe of new legislation and regulations, and workforce challenges.

Providers able to weather the storm successfully are those with flexibility and agility within their culture, accepting what is before them and adapting, not hesitating, not 'waiting and seeing' but accepting and preparing.

To do this, innovation and technology must be at the core of these organisations. Innovation is the response; technology is the means. However, innovation can be 'hamstrung' by technology.

If the technology is too rigid, too prescriptive, it cannot 'bend in the wind'. Technology that relies on user group approvals and developer testing and retesting before version release does not allow for creative and reactive innovation; this kind of technology is like an oak in the wind 'it staps'.

Technology needs to respond to the creative solution-driven innovator; if it cannot, innovation is stymied and restrained by its technologies.

As a General Manager of Quality and Innovation for Signature Care, which operates homes in Victoria, New South Wales, Queensland and Western Australia, I've had the good fortune over the last five years to work with such a system, Acredia Care, a true integrated aged care management system.

Five years ago, this management system featured solutions around clinical reporting, HR, document management, quality and safety (including a continuous improvement plan, feedback and hazard register, staff incidents, an Intranet and a staff self-service portal). This early was so good that it won an Aged Care Better Practice Award.

Today, Acredia Care is unrecognisable from its former self. The platform has more features, is more powerful and robust and, most importantly, can adapt instantaneously to change through its customisation features.

The system now has a competitive Clinical Management System and a Medication Management System with approved eNRMC abilities. Notably, the Clinical and Medication System is built on its users' knowledge and skills, making it the most intuitive system; it is 'for the people by the people'.

Acredia Care is what it is today based on the organisation's collective innovation. The platform is used by many other providers apart from Signature Care, and is responsive to their style of innovation, different in all but the core foundations. It is responsive to an organisation's strategic directions, risk appetite, and taste for pushing the limits and, of course, its limitations. In short, Acredia Care adapts organically to the demands asked of it.

My role is not only about ensuring that Signature Care meets its legislative corporate and care obligations, it is also about ensuring that Signature Care remains agile, able to move confidently and without effort through the maze of existing, new and future compliance obligations; Acredia Care has made all the difference.

Today, technology and innovation are crucial to success in the aged care sector. Equally important is having a governing body that trusts and invests in its innovators, tasked with the responsibility to keep the residents, staff and the organisation safe and compliant while delivering a high standard of care.

**Barry Johnson, General Manager Quality & Innovation,
Signature Care**
www.signaturecare.com.au
www.acrediacare.com

Purpose-built aged care software

How technology can improve the performance of Australia's aged care sector

The Australian aged care sector has continued to deal with extreme financial pressures, with a recent report by chartered accountants StewartBrown finding that seven out of ten aged care homes in Australia are operating at a financial loss.

While aged homes were profitable in 2018, the COVID-19 pandemic has decimated the sector. According to the StewartBrown report, the average aged care home lost \$21.29 per bed per day in September 2022, a dramatic increase from the \$7.30 per bed per day loss in September 2021.

The Australian Government recently pledged to invest \$3.9 billion in the aged care sector, including funding to train new aged care staff; a dedicated Aged Care Complaints Commissioner and independent Inspector-General of Aged Care; and funding to enable aged care providers to modernise their ICT systems, which is a key area of reform.

As the challenges of the aged care sector continue to grow, it will no longer be possible to be truly client-centric without best-in-class, purpose-built aged care software in place. Unless providers improve their processes, they will very quickly be left behind.

Keeping home care providers competitive

Research continues to show that the incoming generation of seniors prefer the independence of home care and wish to delay their entry into residential care.

Baby Boomers are active, technologically savvy, and prefer the independence of living at home. As Boomers get older, they will start to be the dominant recipients of aged care, and have a new set of requirements and expectations compared to previous generations.

Home care providers and related services will consequently become

more crucial, and the way these services are managed will need to become more technology-based, in order to remain competitive.

By partnering with a solution provider and incorporating technology from the start of the clients' care journey, you can securely capture and manage data around home care plans today and support the care providers as their clients move from lower to higher service needs in the future.

Improving the delivery of residential care

HammondCare is an independent aged care provider with a passion for improving the quality of life for people in need. Responsible for looking after 28,067 people across Australia, with a particular focus on dementia and mental health, it provides the perfect success story.

The residential care provider has 65 offices in every city in Australia, yet it relied on five different systems across its finance, operations, and residential care teams to run the business.

Data was not easily accessible, and reporting and analytics were a manual process, with inefficiencies further compounded by human error. Billing could take up to three days, while simple financial claims could take up to two weeks to be processed.

Its outdated technology was a source of frustration for many of its teams, and staff members often had to waste time performing repetitive administrative tasks – time that could have been spent on their primary duty of providing quality care.

HammondCare Head of Platform, Analytics and Architecture, Praneel Anand, said it was clear they needed to consolidate and streamline their operations.

"It had become obvious to the team that we needed a single solution if we

were to modernise the organisation and create efficiencies," he said.

"We realised we needed to bring together our different processes under one umbrella to standardise our operations and create visibility across the entire organisation."

When HammondCare started its search for a software provider that could bring all its systems under one umbrella, it reviewed eight different vendors before selecting Epicor Senior Living. While the software was initially meant to be an on-site solution, HammondCare is currently in the process of transitioning to Epicor public cloud.

"If we didn't have Epicor, we would not be able to support the growth of our business, or the rate at which the company is growing," said Praneel.

"Every Epicor consultant we spoke to, was an industry expert and we came to rely on and trust Epicor, not only as a technology provider but as a trusted adviser."

Why Epicor

Epicor has been working with and for the aged services industry for over 25 years and understands the needs of residential and home care providers with a continuous goal of improving the quality of care.

Around 50 per cent of mid-to-large-sized residential aged care providers already rely on Epicor Senior Living to improve operational efficiencies and grow productivity, while remaining compliant and ensuring delivery of high-quality care.

Like many other clients, one thing that impressed HammondCare was the industry knowledge and experience of Epicor.

Greg O'Loan, ANZ Regional VP, Epicor
www.epicor.com

How embracing digital technology transformed care delivery at Nanyima Care

A person-centred approach is at the heart

A person-centred approach places people, families and communities at the heart of health, care and well-being, and it's no secret that using digital technology has facilitated this, along with helping to improve innovation and digital access for many of Australia's aged care homes. However, care providers across the country still relying on paper or outdated systems to evidence care were hit particularly hard during the pandemic. As a result, they needed to adjust to the times, or risk being left behind.

Nanyima Care, a stand-alone, not-for-profit residential aged care facility based in Mirani, Queensland, was no different. Just two years ago, all care administration was paper-based, with individual charts and care plans throughout the home requiring daily updates.

Today, everything is digitally integrated into one system, making it easier to track care and keep records up to date. Since implementing digital technology, Nanyima is documenting, on average, 1,600 care notes daily.

Most importantly, the quality of information transmitted to staff has also increased exponentially. In addition, since incorporating profile-building and digital clinical documentation, there's a meticulous focus throughout Nanyima Care on providing more individual-focused care, which is the centrepiece of the organisation's care ethos.

Nanyima Care wanted a clinical care system that meticulously focused on improving the quality of care and delivering meaningful experiences to its residents.

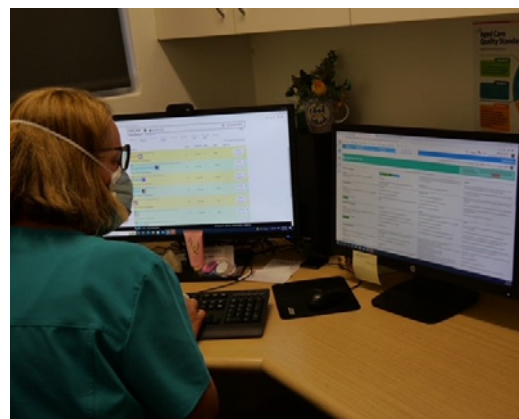
Bien Stirling, Director of Nursing and Facility Manager at Nanyima Care says, "From a manager's perspective, we wanted to utilise technology to increase the level of activity of staff throughout

the business, so that carers have less time away from residents when completing documentation.

"Our staff members can now evidence progress notes on the go. This has meant we can provide a more person-centred approach to involving residents in the evidence of their care.

"It's also paramount that aged care homes showcase that they can evidence care to secure the necessary funding from AN-ACC. Using Person Centred Software's Clinical Care System has enabled a more accurate and nationally consistent assessment process, which has helped us secure funding under the new model. In doing so, we've eliminated the unnecessary burden of paper-based dependency for more effective and multifunctional technology.

"Overall, we've quickly come to see the vast benefits of technology and learnt how its flexibility drives improvements in care delivery and management – the evidence is there for all to see. Ultimately, the shift from a task-driven model to a more person-centred approach has improved our operation at Nanyima Care tenfold. To anyone who may be hesitant to make the switch, I urge them to look at the data – it's a complete game-changer for care providers throughout Australia."



Digital reporting of care has been a game-changer for Nanyima Care.

Tammy Sherwood, CEO of Person Centred Software Australia & New Zealand, says embracing digital technology is a must for providers to remain competitive long-term.

"Digital technology has enabled carers to possess the tools to dedicate most of their time to residents instead of sweating over repetitive data logs," she says.

"Across Australia, the implementation of digital technology saves carers, on average 180,000 minutes every day – this is valuable time that can be reinvested into connecting with residents and improving relationships throughout the business."

Bien Stirling, Director of Nursing and Facility Manager, Nanyima Care
www.nanyimacare.com.au

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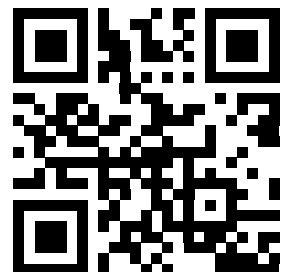
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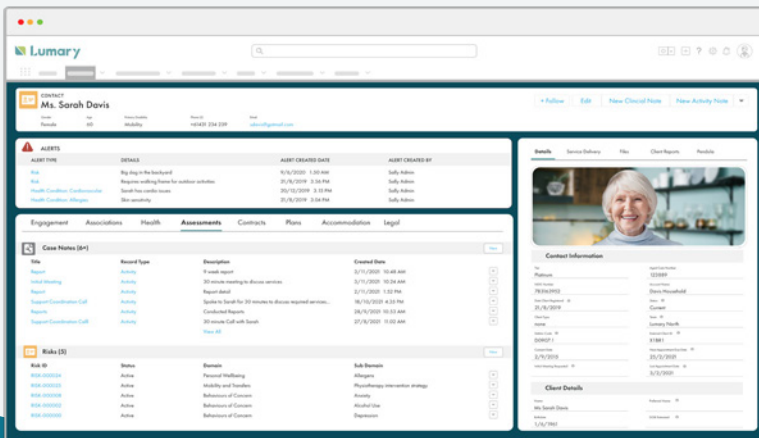
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The next big thing

Personal health and wellbeing revolutionising the connected home

‘Technology should be about making lives better, not just easier’ has been the mantra of one my closest colleagues and the new President-elect of Science & Technology Australia, Professor Sharath Sriram, for as long as I have known him.

Those words struck a chord with me when we first started collaborating on emerging technology back in 2017, but they were echoing in my ears on a recent Conference tour of the USA.

In January, I took on the ambitious task of visiting the Consumer Electronic Show (CES) in Las Vegas, immediately followed by the JP Morgan Healthcare Conference in San Francisco, and finished off the whirlwind fortnight at the National Retail Federation ‘Retail’s Big Show’ Conference in New York.

The central theme of this tour was to better understand the global trend of how personal health, sleep and the connected bedroom are evolving as part of the connected home.

For close to 15 years, I have been fortunate to regularly travel the world scouring trades halls, convention centres, laboratories, factories, and warehouses trying to understand how technology would positively impact and promote healthy sleep among Australians; and because of this year’s trip, I can honestly say that after years of frustration there is finally a revolution coming to the aged care sector.

To provide context, a ‘connected home’ also referred to as a ‘smart home’ basically means a convenient home setup where appliances and devices can be automatically controlled remotely from anywhere with an Internet connection using a mobile or other networked device.

Up until recently, the focus of connected home devices has mainly revolved around entertainment, security, personal comfort (temperature and lighting) and food, but each of these innovations revolve around making life simpler; the real question is, how can we make life better?

The clearest trend on display at each of the conferences I attended was that personal health and wellbeing is the new, central, linking theme of the connected home, and this is the point that leads into the crux of the revolution that is on its way.

The rise of personal health within the connected home, meant that CES was oversubscribed with innovators demonstrating their technology set to assist the world’s ageing population stay in their homes longer, investors at the JP Morgan conference were abuzz with discussions around healthcare in the home as one of the hottest trends to rally behind, and the various international government agencies in attendance were calculating the potential social and economic benefits of fast tracking their plans for more extensive ageing in place policies.

On the surface, this explosion of possibility is intoxicating and quite easy to get swept up in, however I have spent too many years working closely with scientists and researchers to accept every innovator and technologist at their word. The challenge that now exists is how to sort through the real technological breakthroughs to find those that can be applied in the real world today.

There is also the challenge of data in healthcare is becoming problematic. The rise of healthcare in the home threatens to drown an already overburdened sector with a tsunami of data that it isn’t set up to handle, and then there is the additional challenge



Cameron van den Dungen at the JP Morgan Healthcare Conference in San Francisco with Carolin McCaffrey – Director Investment & Trade, Global Victoria, Government of Victoria.

that many innovators and start-ups are opting to avoid regulatory approval for their devices due to cost impediments and administrative burdens that would slow their speed to market.

These concerns are legitimate and not to be brushed aside, as the competition to have ‘first mover’ advantage in technology means that your company may genuinely live or die based on your ability to get a product into market. It would also be remiss of me not to mention that many of the assistive technologies do not require regulatory approval to be useful and perfectly safe for the user.

While there are many hurdles and barriers for technology companies to overcome to deliver the promised revolution in aged care, I am extremely optimistic about opportunities that lie ahead for both providers and recipients of care alike.

However, like with every revolution, we need to be brave, we need to stand firm in the face of adversity, we need to have faith in our fellow innovators, and we must continue to believe in our united cause to deliver better quality and standards of care for all ageing Australians.

After all, technology should be about making life better, not just easier.

Cameron van den Dungen, CEO, SleepTite
www.sleepTite.com.au

Real-time data and interoperability of your software is key

Evolving new models of care needs a strong framework

In Australia, our fragmented regulatory system sees retirement villages regulated under state and territory law, while residential and home care operate under federal law, with each sector having its own pricing models, funding streams and disparate business practices.

From a technology perspective, these fragmented regulatory systems have led to a somewhat piecemeal offering of bespoke industry software solutions. Indeed, a number of software solutions have been created by those who themselves once worked in the industry, knowing first-hand the gap in the market for certain software applications.

The result of this is a myriad of software offerings that assist with the management of only one of the three areas of residential aged care, retirement living or home care. Or solutions spring up to manage one particular issue such as the 10-year asset management reporting required to meet NSW Retirement Village legislation or a one-off tool to assist with AN-ACC assessment data in aged care.

Developing software to solve specific problems is a natural response from software vendors. The tricky part for operators is ensuring their software investments can adapt and evolve as their business model does, for example those looking to expand into additional models of care or adopt a continuum of care model.

At Health Metrics, for many years our eCase software offering has supported the continuum of care model, with one system that operates across residential aged care, retirement living, home care and disability care. This has been key to our growth in the New Zealand market, with Health Metrics' eCase software adopted by industry leading operators Arvida, Oceania and Radius Care, to name a few.

With no state governments, the New Zealand aged care sector operates under a single, nationwide regulatory system that oversees retirement villages and aged care. As a result, in New Zealand, it's relatively easy to offer a continuum of care model, allowing people to move from living independently in a retirement village unit to a care apartment or room, usually on the same site.

For Australian providers to offer a continuum of care, the current regulatory environment brings greater complexity, but the demand is clearly there for providers brave enough to push forward.

LDK, with villages in NSW and the ACT, offers a model of personalised care with a 'One Move Promise', meaning that

residents who enter one of their villages have the option of full independence with no or low support, right through to high level care. While LDK's communities operate under the *Retirement Villages Act*, they are also an approved home care, residential aged care, Commonwealth Home Support care and DVA provider.

The complexity of LDK's reporting, funding, processes, and model of care requires a software provider that is willing to adapt and configure their offering. LDK chose to partner with Health Metrics, in that regard, and the journey is ongoing.

Last year I joined Byron Cannon, LDK CEO, and other industry leaders, for a webinar discussion regarding new models of aged care. Byron highlighted the importance of partnering with a responsive software provider, given that their model of care evolves and processes change. He also stressed the importance of having a software system that's "robust and wants to grow with you" with live and accurate data.

"From both sides of the fence, the Health Metrics side and the LDK side, there needs to be that ongoing commitment to adapt and change and evolve, so that you do get it right," he said.

The release of the Royal Commission into Aged Care Quality and Safety's final report signalled a significant step towards reform and an opportunity for the Government, care providers, technology providers and the community to move towards a better care system for older Australians.

Regarding data management, the Royal Commission recommended building a purpose-driven National Aged Care Data Asset, an "investment in systems that talk to each other and allow for seamless systems for reporting". But achieving this outcome is made all the more challenging in an aged care environment with fragmented or siloed software offerings.

From a technology and data viewpoint, software used by providers would need to ideally adapt to the requirements for a continuum of care model or be easily interoperable with other software systems. This would allow for a person's records to move with them should they move from one mode of care to another, ensuring the record history is maintained and thereby reducing the risk for clinical or other error.

It would also result in much more meaningful data and business insights to support the delivery of profitable and sustainable aged care services.

Paul Brindle, CEO, Health Metrics
www.healthmetrics.com.au

The benefits of automation

By minimising repetitive tasks, you can allow your staff to do what they do best

An innovative technology called **Robotic Process Automation (RPA)** is helping organisations automate repetitive and routine tasks, to provide better care. This global megatrend is becoming a standard tool in various industries, including healthcare, to streamline processes and improve the quality of service provided.

With tasks such as data entry, document management and scheduling taken care of by a software program, staff are able to focus on other complex activities where they can leverage their deep knowledge of the aged services industry and help deliver better customer service.

By using software robots to emulate human actions, organisations can automate mundane tasks and improve accuracy and speed of execution, to ultimately increase operational efficiency.

In the aged services industry, RPA technology can make a significant impact in relation to current challenges, including increased demand for care services, a shortage of qualified employees, and the need to improve the efficiency and quality of care delivery.

Specifically, RPA can provide support to back office functions like finance and IT operations, in relation to:

- **Automation of repetitive tasks.**
RPA can automate repetitive and time-consuming tasks such as data entry, document management and scheduling, freeing up employees' time and reducing frustration from doing repetitive administrative tasks to focus on providing higher-value care to residents.
- **Improving efficiency and accuracy.**
RPA can improve the efficiency and

accuracy of tasks such as billing and record keeping, reducing the potential for errors, meeting Service Level Agreements and increasing revenue.

- **Cost reduction.** By automating routine tasks, RPA can help reduce labour costs, allowing organisations to allocate resources more effectively and improve the speed of care delivery. Additionally, RPA can help with cost reduction by reducing errors and increasing revenue.

RPA should be seen as a much-needed transformation in the aged care industry. It will not only help to address the current challenges facing the industry but also pave the way for future developments and advancements in care delivery.

RPA will also play a key role in integrating systems and applications, helping to ensure that all relevant information is accurately and consistently recorded across all systems. This will improve communication and coordination between different departments and care providers, leading to better decision making and better outcomes for residents.

Automating Regis Aged Care

More than a year ago, Regis Aged Care, one of Australia's most well respected providers of aged care services, began using innovative software RPA to better meet the needs of its residents and clients, and increase the effectiveness of internal operations, with great success.

According to Imtiaz Bhayat, Chief Information Officer at Regis Aged Care, "RPA is fostering a sense of excitement and innovation as teams use the tool to handle numerous day-to-day tasks, allowing more time to be spent talking with residents, families and colleagues."

Timothy Haslehurst, Accounts Receivable Manager at Regis Aged Care says, "RPA technology will help us reduce errors and increase efficiency in our finance processes, which will ultimately lead to better customer service for the residents and their families. By automating repetitive tasks, we will be able to allocate resources more effectively and focus on higher-value activities."

Noting that adoption of RPA technology is not without its challenges, Imtiaz says one of the keys to success is sourcing a reliable implementation partner, while the other is embedding the technology to be part of the standard system landscape.

"Successful adoption and ongoing maintenance of RPA technology requires a partner with experience and skill in RPA implementation, as well as an understanding of the unique challenges faced by the aged care industry. It is also important to have a clear understanding of the processes that will be automated, and to have buy-in from all stakeholders including clinical care staff, operations, finance and IT, to ensure a successful implementation," said Imtiaz.

As part of their success strategy, Regis Aged Care partnered with well-known RPA implementation specialist ProcessX, to drive the transformation of their processes. Over the past 12 months, they have implemented automations in the funding, accounts payable and accounts receivable teams.

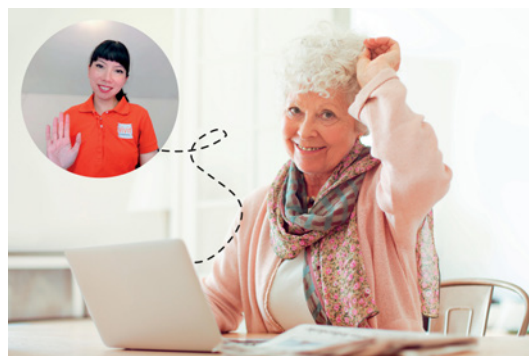
ProcessX consultants are highly experienced in rolling out large scale automation and provide solutions that are fit-for-purpose for a range of smaller providers as well as larger providers that manage dozens of homes.

"ProcessX have fantastic experience and knowledge of the industry, and we're pleased to have partnered with them to upgrade all our finance processes," said Timothy.

Murtuza Kapadia,
Co-Founder & Director, ProcessX
www.process-x.com.au

Digital innovation in allied health services

Advancing telehealth models in aged care



With long waitlists or limited access to healthcare appointments negatively impacting the health and wellbeing of older adults, Telehealth has been able to meet a critical need. For many years, Telehealth allied health services have been effective in addressing these challenges and are fully funded across Australia.

A 2021 review by the International Journal of Environment Research and Public Health found that there is much potential for expanding these Telehealth services to older adults, as Telehealth has become more widely available and accepted by them, in part a response to COVID-19 restrictions.

From here, innovation lies in the delivery of the service.

Delivery of Telehealth services

Vivir Healthcare offers a range of Telehealth services that provide flexible and tailored allied health advice to aged care recipients across Australia, including physiotherapy, occupational therapy, speech pathology and dietetic assessments.

These options include fully virtual visits or an innovative model called 'Telehealth To You' (TH2U), which combines both in-person and virtual allied health visits. Virtual assessments can support a variety of applications, including safe handling, home modifications, falls prevention, mobility equipment, nutrition and communication needs.

Vivir Healthcare's expertise in virtual services allows for the timely continuity of care in areas where physical resources may be limited or during unforeseen events, such as during lockdown periods.

The team is trained to guide care recipients through appointments, manage technology and safety considerations, and deliver care when and where it is most needed. All care recipient information is safeguarded through the use of a secure server.

Telehealth To You model

The cutting-edge Telehealth to You (TH2U) model provides the physical in-person support many care receivers determine as being important in healthcare provision, while combining a responsive virtual appointment with an allied health professional.

In this model, Allied Health Assistants (AHAs) attend care receivers in-person and play an important role in assisting with technology and supervised tasks, allowing clients who may feel less 'tech-savvy' or have mobility issues to access Vivir Healthcare's services safely and confidently.

For example, an AHA may measure for a grab rail or assist with communication interventions delegated by a speech pathologist during a visit. However, the clinical component is still directed by the virtual interaction between the client and supervising clinician. The clinician therefore maintains ownership and provides their expertise across clinical tasks such as conducting assessments, gathering data, making recommendations, and providing reports.

Vivir Healthcare's TH2U hybrid delivery model reduces waiting times for care recipients to access professional allied health expertise, eliminates the need for family or case manager attendance, and improves time management and efficiency while lowering service costs and environmental impact.

Serving aged care across Australia

Both Telehealth and the Telehealth To You models are innovative solutions for providing healthcare where access to resources may be limited. By leveraging technology, these kinds of services allow care recipients living in these areas to receive more equitable access to care. This can be especially beneficial for communities that are historically underserved, such as rural, remote, Indigenous and multicultural communities.

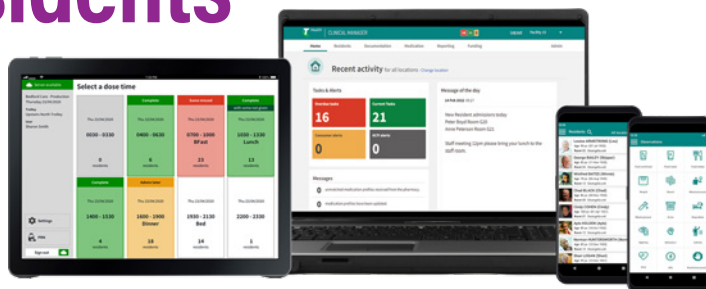
Telehealth can assist in improving the affordability and convenience of healthcare, as well as reducing the financial burden of travel costs, lost wages, and the length of time away from family and community. Telehealth models can also accommodate the presence of Indigenous health workers, who can bring a deeper understanding and knowledge of their local community in advocacy and support of culturally appropriate care.

Vivir Healthcare are continuing to expand their Telehealth models to reach even more communities and ensure that everyone has access to quality healthcare, regardless of their location in Australia.

Susannah Neame Virtual & Indigenous Operations Manager, and Jessica Williams Virtual & Indigenous Operations Project Consultant, Vivir Healthcare
www.vivir.com.au/telehealth-services

Less time at the nurses' station, more time with residents

How technology can help speed up documentation for time-poor care workers



Apps like Telstra Health's CareKeeper can be a game-changer for aged care providers.

The 2020 Aged Care Workforce Census found that 28 per cent of Personal Care Workers (PCWs) employed in November 2019 had left their role 12 months later. In fact, in 2020 over 50 per cent of providers reported that they had at least one PCW vacancy.

On the other side of the equation, the Department of Health is set to introduce mandatory care minutes, with an average of 200 minutes of care required per resident per day from 1 October 2023.

With workforce shortages across Australia and increasing care requirements, providers should embrace technology to help free up staff members' limited resources.

The state of play for PCWs

For a PCW, documenting the care delivered during each shift can mean a lengthy session typing up notes at the nurses' station. Not only does this mean valuable time is spent away from residents, it also reduces the number of staff visible to residents' loved ones.

In understaffed facilities, some PCWs may need to complete this necessary documentation after their shift has finished, resulting in overtime payments for the organisation and frustration for the worker.

In addition, documenting care at the end of the shift presents challenges in accurately capturing what may have taken place hours earlier. The quality of this documentation can also suffer when completed at the end of the shift, as important information may be forgotten, such as the time a certain task was completed.

More quality time with residents

Care workflow apps, such as Telstra Health's award-winning CareKeeper app, can help time-poor PCWs to efficiently view and record care via a mobile device at the time of care delivery.

With CareKeeper, PCWs can use their phone to look at a resident's profile, summary care plan and progress notes, or document care delivered into charts and progress notes in real time.

The app enables PCWs to tick the most urgent tasks off as soon as they have been completed, helping to minimise the time spent writing up notes at the nurses' station.

With the ability to document care while at the resident's side, workers can increase the amount of one-on-one time with residents and contribute towards their direct care minutes.

This can provide a better experience for residents and their loved ones, while also enabling PCWs to spend more of their time doing what they love – spending quality time with residents.

Reducing the burden of documentation

To help minimise the time spent on care documentation, CareKeeper was designed with illustrative icons which helps PCWs quickly identify their care tasks, such as a knife and fork icon to indicate a food intake observation. The app then prompts the capture of the most essential information, which can produce more accurate reporting and help to reduce the burden of documentation on workers.

By adopting an app with intuitive navigation and illustrative icons, even less tech-savvy or temporary care workers can embrace the technology quickly and easily with minimal training.

Choosing a connected system

Unlike some other care apps, CareKeeper is fully integrated with clinical management software to create a complete record of a resident's clinical, care and medication information and to help reduce duplicate data entry for time-poor care staff.

Multiple facilities have provided feedback that resident and family complaints about a lack of staff have decreased since using CareKeeper, as staff were able to spend more time documenting by the resident's side rather than away at the nurses' station.

It has definitely been a game-changer for aged care providers, and Telstra Health is pleased we can help support a better ageing Australia.

**Michael Donnelly, Head of Aged & Disability,
Telstra Health**
www.telstrahealth.com.au

Technology upgrade for high quality service

A HammondCare case study

HammondCare successfully upgraded their IT infrastructure across all their sites in Australia. Photography by Paul Henderson-Kelly, Henderson-Kelly Photography.

The impact of COVID-19 was particularly challenging for aged care providers, and incredibly isolating for residents and patients across the country. Having faced these challenges, and understanding the importance of connection for their residents, patients, doctors, and carers, HammondCare set themselves the goal of repositioning themselves in the digital environment.

With this in mind, HammondCare engaged RN Projects (part of the Reivernet Group of Companies) to assist with upgrading their network infrastructure at their 12 residential care homes and villages, four hospitals, and several offices across Australia. The scope included structured cabling, switching and wireless.

Key objectives of the project were to establish a secure, reliable and trusted network, and to improve the user experience of the wireless network – because residents, staff and visitors, in all areas of the properties, needed access to a reliable wireless network for all their Internet uses, including video calls and high quality streaming, as well as sensitive operational systems.

The broad scope of work conducted by RN Projects included surveys of the existing networks; designing new solutions; assisting with value engineering; supplying the required equipment; planning and executing the deployments; and completing extensive testing and documentation, in order to ensure the objectives set by HammondCare were met.

A major challenge during this project was COVID-19. Restrictions and lockdowns meant the engineering team were wearing full PPE around patients. They had to plan remotely and divide the project up into different phases at each property so if an outbreak occurred and the site had

to lock down, the RN Projects team could leave the site with a working network in place. Global supply chain delays for technology products also created challenges with planning and deployments.

The pandemic meant the RN Projects had to be flexible and demonstrate great sensitivity on site, as well as coordinate an extremely tight operation, to ensure that staff and residents experienced little to no disruption.

Commenting on the performance of the RN Projects team, HammondCare CIO John Sutherland said the project has helped the organisation deliver high quality care.

“The solution that we have today, that we’re enjoying across our many residential aged care homes and our hospitals, is second to none, and so it’s a great privilege to be able to bring such a high quality and reliable and secure service to those that we care for,” he said.

“Whenever we had issues that required escalation, the escalations were openly received, the management team, the owners of the business and the guys on the ground doing the hard work responded, put in the extra hours, adjusted their schedule, and achieved a great result.”

Christoffer Svalstedt, Global Director of RN Projects, places great value on taking a collaborative approach to their work, saying, “The success of these projects is largely due to a combination of our agile and knowledgeable team on site, and the supportive and flexible team at HammondCare.

“The teams at HammondCare and RN Projects worked together cohesively, it felt more like a partnership, and it’s this kind of relationship that achieves the best results.”

**Jacqui Bundy, Group Marketing Manager,
Reivernet Group of Companies
www.rnprojects.com.au**

Get ready for compliance

The economics of a nurse call system upgrade

Many older residential aged care homes are facing the somewhat daunting task of upgrading their nurse call system to meet the increasing expectations of residents and their families and also to be fully compliant with the recommendations laid down by the Aged Care Royal Commission.

A key consideration for facility upgrades will always be the cost and the return on investment of such an undertaking. A secondary but equally important concern is the disruption to the residents and staff that the refurbishment work may entail.

Consequently, it is strongly advocated that residential aged care management consult with an experienced nurse call solution provider, like Alexys, to critically examine the options, capital costs and potential disturbance to normal facility operations.

In the majority of cases, depending on the age and condition of the system, it will not be necessary to replace every component of the existing nurse call infrastructure. It is quite feasible that only the central processor needs be updated to meet the new requirements yet remain totally backwards compatible with the facility's legacy call points.

Should the current structure be considered totally obsolete and require total replacement, there is the viable option of installing a Wi-Fi based system. Most, if not all residential aged care facilities already have a Wi-Fi service in place, so it makes perfect sense to utilise Wi-Fi as the basis for an upgraded nurse call system.

The great advantage of a Wi-Fi solution is that the nurse call points are powered by long-life, internal batteries, meaning that no rewiring or other messy, time-consuming installation actions are necessary. This in itself can be a significant cost saving. Generally, the only disturbance to a resident's room is the removal of the old nurse call points and the installation of the Wi-Fi points, a simple, 10-minute procedure.

The first step in this process should be a site survey where a qualified technician can verify the signal strength of the Wi-Fi throughout the campus to ensure full and reliable coverage can be achieved. If there are any weak signal or blind spots identified, these can be addressed with

a straightforward technical solution recommended by the survey technician.

At the heart of every modern nurse call infrastructure lies a Critical Messaging System (CMS). In Alexys' case, the CMS micro server control engine seamlessly processes incoming alarms or calls for assistance and outputs context-aware messages to facility annunciators, carers' pagers, mobile apps and elsewhere as required. Every digital transaction is also time and date stamped and is available for review and graphical presentation through Microsoft's business intelligence program.

Modern, IP-based nurse call solutions not only improve the safety and general wellbeing of residents and carers, but they also offer many additional productivity benefits, including Real Time Location Service (RTLS), whereby management knows exactly which carer is attending a call, and how long they spend with each resident. It also integrates with other critical facility alarms and monitors, such as CCTV, fire alarms, telephony and Building Management Systems.

Fortunately, we live in an age where modern technology coupled with industry expertise can greatly assist residential aged care operators in determining their most appropriate and cost-effective infrastructure transition – whether a complete system replacement, or partial conversion, with the option to move to a full upgrade as needs or budgets dictate. Whatever you choose, now is the time to prepare for compliance.

**Sean Griffin, Marketing Consultant,
Alexys
www.alexys.com.au**



Alexys technician Phillip Hunt investigating network performance.

Smartphone apps solution for care and support workforce

Digitisation is one way to deliver a better experience for your staff

We all know the health and care industries are experiencing significant skills shortages, but with significant Australian Government funding towards training in the space, it's a vital time for care and support workers to upskill, and for aged care providers to consider how they can use training as a way to attract and retain staff.

At a time when finding care and support staff is so challenging, staff retention is critical to the smooth operations of an organisation and ensuring the wellbeing and safety of clients.

One approach being taken by forward-thinking organisations is to digitise human resource management systems, creating a more seamless interface with their staff, and supporting better workplace practices.

Moving to the next-gen of digitisation can be daunting, but organisations that are able to prioritise innovation and can position themselves as employers of choice, and improve their level of staff retention.

An effective smartphone app that takes care of a range of human resource issues, like rostering and leave, can make it easier for care organisations to retain staff because the focus is to cut down on unpaid administrative work and improve communication, giving staff satisfaction gets a boost.

Having already implemented an end-to-end premium client management and rostering solution for the care industry (Carelink Suite), global software provider Civica has just launched a much-anticipated update to their Carelink Go App, creating a further seamless experience for staff and support workers in the care industry.

Currently being used by over 20,000 care and support workers in Australia, having a single platform that all staff can log into is a critical component of efficiency. Care workers don't want a rostering app, a client app, an HR app and a leave app. Civica's solution of one app, which can support multiple functions, offers a streamlined solution that will save



time and money, and ultimately ensure that care home staff can spend more time looking after residents.

Civica's Carelink Go App offers many benefits including:

- Automated time and attendance reducing administrative time
- Integration to more than 30 different payroll systems
- The ability to view and update client information through Smart Forms, voice-to-text Case Notes, documents and more
- In-app messaging functionality including vacancy filling removing SMS costs
- Employee Self Service for leave applications and updating availability
- Day program attendance
- Geofencing with targeted messaging in different geographic locations.

These functions and benefits contribute exponentially to worker efficiency and satisfaction.

Francis McGahan, Care Sales Director Civica APAC said, "Simplification was at the heart of Civica's third generation smartphone app and consequent design. What makes CarelinkGo so sought after, is the functional simplification for the end users.

"CarelinkGo's Employee Self-Service allows for this component as well. Staff having the ability to apply for leave and update their availability brings the app to the next level of digitisation for employee information."

Civica's Carelink Suits currently also helps manage various areas of compliance within the community care sector including National Disability Insurance Scheme (NDIS), Home Care Packages (HCP), Out-of-Home Care (OOHC), and Data Exchange (DEX) for the Commonwealth Home Support Programme (CHSP), and all other Department of Social Services (DSS) funded programs.

Civica

www.civica.com.au

Funding support for innovation

ARIIA Grants helping to transform aged care in Australia

Aged Care Research and Industry Innovation Australia (ARIIA) is benefitting the aged care sector with grants for high quality projects that support adoption of best-practice evidence and innovative technology in the delivery of aged care services.

ARIIA was established as Australia's first dedicated aged care translational research funder and aims to build aged care sector workforce capabilities to shape the future of aged care delivery.

Since August last year, 16 recipients have received funding for projects to make a significant difference in several priority areas as identified by the aged care sector.

ARIIA Research Director Professor Sue Gordon said that ARIIA Grant recipients will collaborate and work together to deliver improvements across Australia.

"I look forward to seeing how the recipients can translate their research outcomes into real practical solutions over the next twelve months," said Sue.

ARIIA Grant recipients

SA Innovation Hub, Kalyra, Bene Aged Care, Barossa Village, Resthaven, Be Well Co, Flinders University and Council on the Ageing (South Australia) for their project to retain female aged care workers aged 50 years and over.

Aged Care & Housing Group, Dementia Training Australia, Queensland University of Technology and Flinders University for their project to support aged care staff to better engage with people with dementia.

Helping Hand Aged Care Incorporated and the University of Notre Dame (Western Australia) for their project designed to retro-fit dementia-friendly aged care environments for improvements.

Deakin University, SilVR Adventures and Villa Maria Catholic Homes Limited for their virtual reality project for people living with mild dementia in aged care.

National Ageing Research Institute (NARI) and Silverchain for their technology-supported home-based care project.

Dossy Company, Uniting Agewell, University of Melbourne and Two Bulls for their video app that connects aged care residents with families.

The University of Sydney, Frank Widdon Masonic Homes of NSW and Uniting AgeWell for their project that evaluates programs for mobility and falls, to enable improvements.

The Violet Initiative, Hammond Care, Estia Health and the University of Wollongong for their workforce training program to reduce social isolation between caregivers of people in the last stage of their life and their families.

Hammond Care, the University of Sydney and the University of Technology Sydney for their palliative and end-of-life care compassionate care training program for aged care staff.

Flinders University, the Australian Nursing Home Foundation, Chinese Australian Services Society and the Chinese Welfare Services of SA for their skills training program for Chinese carers of people with dementia.

The University of South Australia, Tanunda Lutheran Home, Tyree Foundation Institute of Health Engineering, Pharmaceutical Society of Australia and Healthy Care Services for their digital pharmacist service to manage medicine harms in residential aged care.

Dementia Australia, BUPA and Deakin University for their project that uses technology to transform workforce capability to improve the quality of care delivered to people living with dementia.

Gretel Analytics, Peninsula Health and Monash University for their toolkit to build social license into the implementation of activity monitoring in residential aged care.

Southern Cross Care, Bond University and Robert Gordon University for their project that aims to enable better discharge pathways for older people following short-term restorative programs.

The James Anthony Group, and Anglicare SA for their video calling device that enables two-way audio communication between those in aged care and their families.

Bay & Basin Community Resources, ExSitu, the University of Wollongong, and Carers NSW for their care plan blueprint to address the unique challenges for ageing people living in regional areas.

The ARIIA Grants program provides many opportunities for aged care providers in collaboration with research organisations to progress innovations and ideas, so it's well worth keeping up-to-date with the grant funding round priority areas on the ARIIA website.

Chris Crago, Senior Manager Marketing & Communications, ARIIA
www.ariia.org.au

Towards the small house model

Reaping the benefits without major reconstruction.

In March 2021, the Royal Commission into Aged Care Quality and Safety recommended the implementation of ‘small household’ models of accommodation. It detailed its objectives, but remained vague in its description giving rise to simplistic interpretations, such as allocating fewer beds to a wing or around a courtyard and operating in smaller buildings.

In reality, this model has existed and is known to the residential aged care sector in Australia even before the Royal Commission outcome. Commonly known as a Small House model, they essentially deliver domestic scaled, homelike environments to residents.

Ideally, a residential aged care provider adopting the Small House model would create households, each designed to be self-contained and conducive to groups of seven to 10 people. Reflecting the homes familiar to their residents, the households convey domestic scale and aesthetics in their living, kitchen and dining spaces, with inconspicuous staff stations, carefully obscured operational equipment and, critically, they would be resolute on avoiding multiple bedrooms alongside lengthy corridors.

Evidence supporting its benefits stem from the Green House® project by Dr Bill Thomas, founder of the Eden Alternative. The first Green House® was built in Mississippi in 2003 and within a few years grew to over 100 developments throughout the USA and by 2010, became globally recognised as world’s best practice.

The Green House® is now an international trademark owned by Centre for Innovation, Inc. Use of that trademark requires licensing agreements and compliance with an extensive list of design and operational features. Few aged care operators outside the USA are prepared to accede to those provisions. To avoid infringing the rights of that trademark, many adopted and adapted the Green House® model and coined the term, Small House.

Throughout Australia, some institutional models and older style aged care developments remain in operation. Unable to meet current standards and expectations, their viability is limited and will likely diminish. Fortunately, there are practical options.

The aims of such redevelopment can essentially be simplified to three key objectives:

- scale – a domestic scale familiar to residents
- setting – a choice of settings conducive to a variety of activities and social groupings
- circulation – reducing distances from living areas to bedrooms thus improving accessibility, supervision, and wayfinding.



The Leonard Florence Centre for Living, Chelsea, Massachusetts, is an exemplary Green House® development servicing 100 residents in 10 households. (Source: DiMella Shaffer, Boston Massachusetts)

A common example comprises the conversion an existing wing of approximately 30 beds into three, 10-bedroom households. The process begins with identifying the most practical method to compartmentalise the smaller households without impeding core operations and, where possible, improve wayfinding.

Works include demolition of a few existing bedrooms towards the centre of corridors then repurposing them into intimate sized living spaces. This alteration reduces distances between those spaces and bedrooms, creates spatial relief and introduces natural light to otherwise lengthy corridors. It allows for settings approximating traditional homes – fewer residents to a household, domestic style kitchens, discreet staff areas resembling studies rather than hospital nurses’ stations and obscuring of operational equipment. To maintain overall bed numbers, parts of once community spaces outside of those households may be refitted into bedrooms.

Resources to facilitate such redevelopments are available. As part of its findings, the Royal Commission recommended expenditures of \$600 million in 2023 and \$1 billion in 2024 to implement that recommendation. Additionally, state government agencies are funding such upgrades of state-owned residences in regional Victoria.

Despite government funding, redevelopment of this nature is undeniably challenging. Effective project and development management remain critical. Grappling with operational and staffing structures may also persist for some organisations. Without making light of the complexities posed by such a venture, in the fullness of time, it is a significant improvement to inactivity.

Patrick Ong, Principal,
Seniors Living, Foreground Architecture
www.foregroundarchitecture.com.au

Defying ageism through intergenerational connection and co-design

It starts with planners recognising their unconscious bias

At ‘New/Old: Designing to Defy Ageism’, a panel discussion held at the University of Melbourne-led innovation precinct Melbourne Connect to celebrate Innovation Week late last year, leaders from aged care, seniors design, research and advocacy explored ways to challenge ageism through co-designing for inclusivity, personal agency and intergenerational connection.

Host James Kelly, Partner and Head of Seniors Living & Care at ClarkeHopkinsClarke Architects, opened with a frank observation, “Public discussions about innovation rarely include seniors.”

In response, moderator David Wright-Howie, policy researcher at COTA Australia (Council on the Ageing), took care to centre the conversation around the priorities of COTA members in the wide-ranging discussion that followed with James and co-panellists CEO of Donwood Community Aged Care Natasha Wilkinson, Principal Researcher and Exercise Physiologist at the National Ageing Research Institute (NARI) Professor Pazit Levinger, and Dementia Australia’s Executive Director of Advocacy and Research Dr Kaele Stokes.

“There’s increasing awareness both in government and the sector that services should be planned and developed with, not just for, older people, and that their lived experience really matters to achieve the best outcome,” David said. “So what does this mean for the physical design and cultural environment of our care services and our public spaces?”

The key themes that emerged were recognising our unconscious biases about ageing, focusing on the many positives and opportunities of ageing,

and co-designing with seniors to maximise their lived experiences, agency, and community connections.

Kaele described misunderstandings about dementia and the isolation and lack of consultation that can result for many of the nearly 500,000 Australians living with the condition.

“Often people with dementia aren’t asked what they want because there’s an assumption they don’t have the capacity to be able to engage,” she said. “That’s absolutely not the case. We have a vibrant community of people living with dementia around the country who participate in all sorts of activities for our organisation as advocates for systemic change. They have opinions, ideas and inspiration we can all draw from.

“That’s something we do need to think about when we’re designing spaces, communities, policies and programs too. Given that in residential care more than two-thirds of people are living with moderate-to-severe cognitive impairment and about 70 per cent of people living with dementia are living in the community, they can’t just be corralled off into a separate sphere.” Natasha said many of the 75,000 Victorians living in residential aged care are also underestimated. “So many who still have purpose and an ability to do so much for the community are put into an aged care home and sometimes forgotten,” she said.

“But the aged care industry is definitely changing and seeing these opportunities. Many aged care homes have integration with preschools and secondary schools, and bring residents out to other communities like universities to give talks. That brings so much purpose and experience out into our workforce, our younger generations, from a group of people who have time, purpose and experience, and still want to give to their community.”



James Kelly, Partner and Head of Seniors Living & Care at ClarkeHopkinsClarke Architects

Pazit said in her work creating seniors exercise facilities to help them maintain their health, wellbeing and social connections, peer advocacy is central to success. “We’ve found when there’s a choice, an older champion has more impact than a younger trainer because people can relate to them,” she said. “Having that engagement, getting them involved in decisions, they have so much wisdom and a lot of experience, which should be encouraged and listened to.”

James says his team co-designs with seniors to maximise residents’ involvement and agency and to maintain or enhance their community connections through shared facilities that draw in neighbours of all ages. “We ask residents what does their day look like, what might enhance it, and what would they love to do if they could?” he says.

“Building a project often takes a long period of time, and the people involved change. But there’s a real opportunity to bring people along on the journey, not only during the design phase, but when people move in. They can become champions of the design.”

ClarkeHopkinsClarke Architects
www.chc.com.au

An inviting living room occupies a communal area of the complex. Image credit: LAD Social

First vertical retirement village for Central Queensland

A change in strategy led to a new vision for Benevolent Living, to meet consumer demand and secure the organisation's future

Benevolent Living, a regional 'Profit for Purpose' provider in Rockhampton, Central Queensland, is on a mission to transform and reinvigorate the seniors living market in their region. This will be achieved via their \$47 million Rhythms of Life Project, due for completion in October 2023.

With quality of life for older people no longer purely about clinical care, Benevolent Living are transforming from a traditional medical model to a new lifestyle model that focuses on health, wellness, and living with purpose and meaning.

Focusing on long-term viability and the Aged Care Reform Agenda, the project began with a strategic review which led to a growth and diversification strategy. Paramount to the new strategy was finding ways to be more commercially orientated and less reliant on government funding.

Benevolent Living also wanted to position themselves for a de-regulated market, one where funding will be agnostic, and the customer will have more options in how and where they age. With the traditional 'nursing home' product well and truly over for most people, tomorrow's customers will have far higher expectations.

A competitor analysis identified a gap in the market in both residential aged care and retirement living, where these increased demands are not being met. In addition, local market research, conducted as kitchen table conversations, revealed the main thing people want in their ageing journey is to keep their independence and control of their own lives. They want a one-stop shop with people they know and trust.

With a clear mandate for a new direction, Benevolent Living engaged Deicke Richards Architects for the new Master Plan, with the brief to increase density on-site and to support a 'Continuum of Care' model with the inclusion of a new retirement village.

Wanting to create the region's first vertical village, based on four basic design principles – removal of barriers, greenspace, health and wellness, and true (not token) community integration – the design and interiors were to resemble a boutique hotel and be anything but boring and institutional.

The result is 'The Terraces', a new innovative residential care complex opened in July 2022, which forms part of Stage One of the new development. With 36 apartments over three floors, it has proven popular for its one-bedroom apartments, complete with separate living areas and kitchenette. The

building has tripled enquiries and attracted a lower care cohort, in particular couples not wanting to be separated. The building also attracts higher Refundable Accommodation Deposits and Additional Service Fees.

The refurbishment of older areas was also included in Stage One, with a new Town Hub precinct offering shared integrated spaces including a town hall, chapel/movie theatre, hairdresser, coffee shop, hotel reception, art gallery, art workshop, gymnasium, therapies room and learning hub.

Stage Two of construction, which will see the entire project completed, incorporates a new kitchen, laundry, central dock and a five-storey vertical boutique retirement village. It includes 40 spacious apartments with two bedrooms, two bathrooms and basement parking. It has been designed with 'Gold Living Standards' to facilitate ageing in place and high care in the home.

Home Care and Fee for Service will be delivered into the village to support people's needs and choices. If a person is unable to remain in their apartment due to acute care needs, a seamless transfer into residential care will provide a peace of mind guarantee – because Benevolent Living community is a home for life.

When considering a theme for their community, it was an easy choice to pick the 'Arts'. They wanted to create a beautiful aspirational place to work, live and visit. The new Creative Arts Strategy will result in a permanent art trail throughout the



The retirement village looks more like an apartment complex than an aged care facility. Image credit: LAD Social

site and four major exhibitions per year in the Long Gallery, along with art workshops, artists in residency and artist talks at exhibition openings, as well as interactive art and intergenerational activities.

The Benevolent team have not only created a legacy project for the region, but they are ensuring the organisation's future.

Alison Moss, Chief Executive Officer, Benevolent Living
www.benevolent.com.au

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Are they receiving the correct penalty rates, overtime and weekend hours? Do pay rates reflect the latest changes to awards or national minimum rates?

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The Missing Link

How blurring the lines between business and pleasure created a thriving community

In 2017, Brightwater Care Group (BCG) had a vision: to bring the heart of their organisation and their people – both staff and residents alike – under one roof, putting into practice the values of Brightwater’s ‘one spirit philosophy’ to create authentic human connection.

Fast forward to today, the newly opened Brightwater Central in Inglewood has expanded to become a three-storey building, with two levels of residential aged care sitting comfortably on top of the Brightwater Research and Corporate Services central office. The 128-bed aged care home has external gardens, balconies and courtyards, with access to services such as hairdressing, gym and back-of-house amenities (kitchen, laundry) on the ground level.

Award-winning interior designers, MKDC, who specialise in creating both aged care and corporate workplace environments, know what it takes to combine workplace and aged care design successfully, so it was a challenge they were well placed to accept.

Working with creative collaborators, architects MJA Studio, and their mutual client, they set out to create a one-of-a-kind, world class facility for Brightwater that successfully blended the best of both worlds – aged care and workplace design.

From the inside out, they designed the building drawing on their core philosophy, which centres around the idea that every building needs a heart and soul which ultimately sustains healthy, harmonious living and working. ‘The Link’ space plays a pivotal role in redefining how to successfully do both.

What is The Link?

The Link is the space that physically unites and connects aged care residents living over the two storeys above with the wellness hub and corporate offices – the central entry point to the whole building.

It’s a metamorphic space, functioning like a ‘Swiss army knife’ of place-making experiences – a beautiful welcoming arrival hall, a self-serve concierge, a friendly face at the welcome desk, a café and collaboration hub, a remote co-working



Merging a head office with a residential aged care home is creating authentic human connection. *Photography by Osprey Photography.*

space, a conference and function space – or anything else you might imagine it can morph into.

Purposefully designed to embody joy and comfort for everyone who uses the space, The Link offers a diverse, inclusive and intergenerational hub which supports connection and spontaneous human interaction – both of which epitomise the key indicators of best practise design for aged care and workplace design. And, even though people live and work on the campus, the need for intimacy and space to retreat is thoughtfully featured in many areas.

Keeping in mind The Link's broad audience and their many needs, its interiors have been masterfully planned drawing from MKDC's hefty bag of design tricks they've gathered and honed over the years. Dementia design principles, biophilic design, best-practice diversity and inclusion design factors, and designing for innovation have all been smartly integrated to create a beautiful duality accommodating future growth and intimacy.

This translates to a mix of furniture types placed strategically to create different experiences. Be it for reflection in solitude or togetherness, each piece is specified for comfort, support and enablement, with natural timbers and fabrics that are aged care appropriate. The colours and shapes were chosen for their universal and organic natural appeal while

maintaining contrast for those with visual impairment to ensure safety and easy wayfinding.

The space also gives access to gender neutral ambulant powder rooms, complimentary tea making facilities, and a discreet café for those wanting something more substantial to eat. It can accommodate large stand-up corporate functions of up to 300 for morning teas and cater for resident movie nights or community art exhibitions, making The Link a functionally versatile and beautifully ambient space for people to enjoy in their own way.

With connection to nature top of mind, The Link also conjoins adjacent parkland at either end. So much so that the dogs from the park pop their keen noses in from time to time, much to the merriment of Brightwater residents and staff!

The combination of all of these elements has really brought this community atmosphere to life, blending people's experiences, movements and sounds inside a generous space. Whether it's to find solace in a comfortable lounge or share stories with friends and family, everyone is welcome at The Link.

Kathleen Kusinski, Director,
MKDC Design Consultants
www.mkdc.com.au



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The comforts of home

Carefully selected furniture creates calm

The aged care landscape is evolving and growing at a rapid pace across Australia. With our ageing population, increased life expectancy and overall diverse living arrangements and locations, we are seeing greater demand for a range of high quality aged care services.

No more are we simply designing functional spaces in aged care residences, the goal now is to provide innovative lifestyle environments that cater for the progressive nature of aged care and incorporate all the luxury of a hotel along with the comfort of home.

While the architectural spaces, lighting and paint colour choices are an important part of how an aged care home feels, furniture is also a key element.

Research suggests that home-style aged care settings can significantly support health and wellbeing, by evoking a sense of calm and comfort.

The right furniture helps create a welcoming and comfortable environment, with colours that evoke the familiar surrounding natural environment and make a space feel like home. Furniture styles and functionality also play an important role in promoting safety, particularly for residents with limited mobility.

The feeling of home was achieved with the refurbishment of Stockton Residential Home by Presbyterian Aged Care, through the upgrades to original facility designs, transforming it from cold and clinical to warm and welcoming.

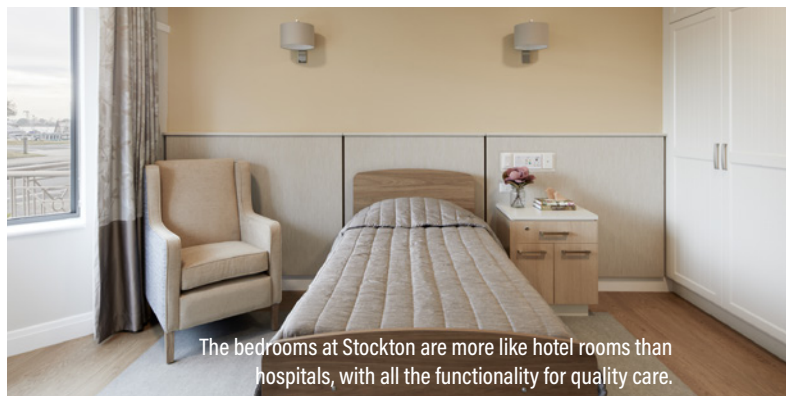
Workspace Commercial Furniture was contracted to supply the furniture for this project. Workspace has long provided our expertise to the aged care and allied health segments through the design, manufacture and supply of aged care and health specific complimentary furniture products.

With our company history richly planted in domestic furniture since 1911, our skilled joinery, chair making and custom cabinet making division, combined with our effective and efficient automated manufacturing, result in aged care furniture that is timeless and appropriate.

Working collaboratively with aged care designers, builders and aged care providers, we seek to break the stereotype of aged care and deliver bespoke and standard product ranges



Stockton's warm and welcoming living area with generous and relaxed seating.



The bedrooms at Stockton are more like hotel rooms than hospitals, with all the functionality for quality care.

and inspirational projects that are driven by functional need and exceed aesthetics stereotypes.

For the Stockton project, we worked closely with Gilmore Interior Design, to create a warm and welcoming feel to the home through the use of custom fabric choices and a mixture of lounge and seating combinations.

Workspace supplied a range of furniture solutions to the Black Swan Wing, Pelican Wing and foyer. Custom storage solutions were designed and manufactured in-house to suit the Workspace retreat ranges supplied throughout the project.

Colour, texture and vibrancy are all elements that Workspace actively incorporates into all our aged care furniture solutions. The brief of the Stockton project was to bring life into the space and rejuvenate it, focusing on warm colour tones and soft textures to allow residents to feel at ease with the new furniture and building elements.

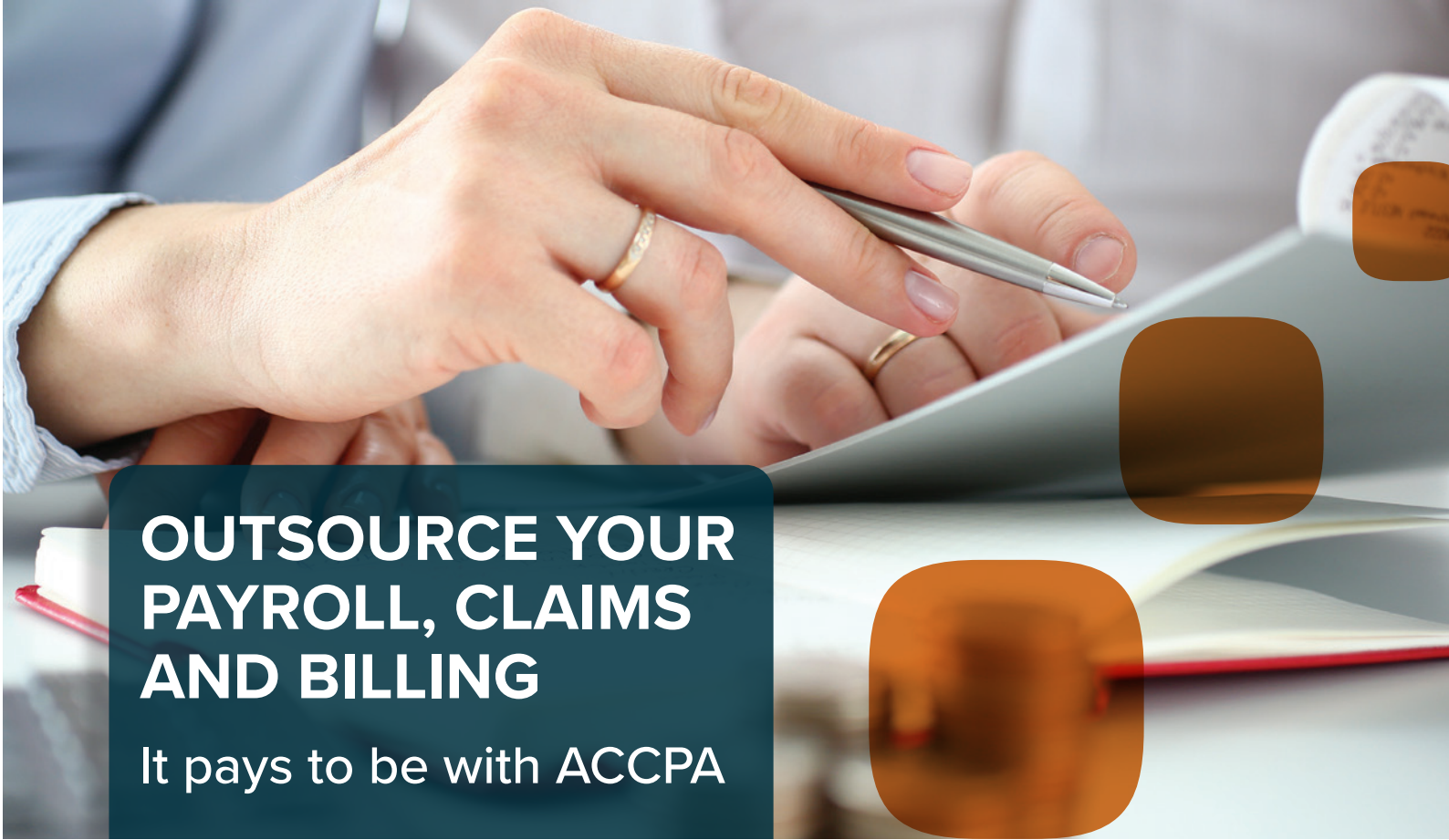
The result is something that everyone can be proud of, with residents overjoyed at the transformation of their home into a bright, welcoming space that is entirely aged-care compliant.

Drawing from our expertise in hospitality, accommodation and office environments, Workspace provides solutions for all areas of aged care homes, including administration and office areas.

Committed to Australian manufacturing at our South Australian manufacturing facility, we offer experienced in-house design and planning teams, efficient logistics and local installation services.

Workspace understands that upon completion, quality is a minimum expectation. We back our commitment to quality through market leading product warranties and aftermarket service.

Workspace Commercial Furniture
www.workspace.com.au



OUTSOURCE YOUR PAYROLL, CLAIMS AND BILLING

It pays to be with ACCPA

We are fortunate to work in a purpose-focused industry driven by quality of life and care for the people we support. But your staff don't work for love alone. Ensuring they are paid accurately and on time is critical in keeping employees motivated and retaining quality staff.

Managing payroll effectively, as well as Residential Claims and Billings, can place a huge burden on small to medium sized organisations in the age services industry. ACCPA can help lighten the load, whilst reducing your overheads.

Trust ACCPA to manage your payroll

ACCPA has been delivering payroll services for Member organisations for over 20 years. Our team have a complete understanding of modern and older awards as well as the many varied enterprise agreements.

We offer professional, cost effective and accurate payroll processing and comprehensive reporting for each pay cycle, each month and at end-of-year.

Services include:

- Costing reports
- PAYG tax reports
- Superannuation with clearing house
- Single touch payroll
- Online time and attendance & rostering
- Fringe benefit payments
- Pay reconciliation
- Deductions

Residential Claims and Billing Services

As well as payroll services, ACCPA can also provide claims and billing services. Our team can manage your accounting function for you, to make sure you maximise your funding entitlements and your residents or clients are billed correctly.

- Monthly Resident Billing Runs
- Updating and Finalising Medicare claims in PRODA
- Reconciliation of payment statement to maximise funding
- RAD/Bond Register Maintenance and Refunds
- Monthly Reporting (AR Reports, Transaction Analysis, Fee and Deposit batches)
- Means Tested Care Fee Reconciliations
- Monthly client fees, RAD and Bond statements

Benefits of outsourcing

- Reduce internal administration
- Reduce your overheads
- Reduce the need for people management, career development or holiday cover

Why ACCPA?

- Over 20 years experience
- Skilled and reliable team
- We ensure accurate and timely payment, always

Industry icon evolves and enters a new era as NeRA Cloud, with features that greatly improve the resident agreement process

NeRA Cloud is the next evolution of resident agreement software, offering providers sophisticated features in a more connected, productive and secure environment.

Introduced in 2006, NeRA software set the industry benchmark by transforming the resident agreement generation process. NeRA still plays a pivotal role in helping hundreds of providers produce compliant legal agreements successfully.

The move to cloud technology marks the start of a new era. Providers can access data securely from anywhere, using either a smart device or computer. Combined with advanced functions powered by cloud technology, NeRA Cloud will have a positive impact on workplace efficiency, outcomes for residents and the provider's bottom line.

To look at how you can keep your aged service moving forward using NeRA Cloud, visit www.e-tools.com.au or contact e-Tools Software to schedule a free online demonstration on 03 9573-3277.

Soodox™ Soothe & Protect Barrier Cream

Maintaining healthy skin is crucial for overall health and well-being. Soodox™ Soothe & Protect Barrier Cream is an excellent preventive measure against skin irritation caused by occupational exposure to irritants. This is where barrier creams are effective, now available is Soodox™ Soothe & Protect Barrier Cream which is Australian made, 100% natural, paraffin and fragrance free. It is gentle enough to use on the most sensitive areas - incontinence rash, skin folds, under breasts, bedsores, and chafing. This cream is highly recommended for use before and during work, as it forms a lubricating film on the skin, preventing water depletion in the skin's outermost layer.

This protective effect may help prevent irritant contact dermatitis and allergic contact dermatitis, which are common conditions that often result from moisture depletion. It is essential to choose a product that is suitable for your skin type and needs, Soodox™ Soothe & Protect Barrier Cream is the perfect choice!

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Pathways Cronulla Pines Residential Aged Care Facility is putting the good news about the SUNBEAM program into action

All permanent residents who are appropriate to participate in this program are being invited to engage in a four-week trial of enablement at THRIVE wellness centre. The experience involves twice weekly small group sessions focusing on balance and strengthening utilising HUR equipment. Residents enjoy the confidence the equipment gives them to participate in strengthening and balance challenges. Smart-card technology makes it easy to track progress within and between exercise sessions for each individual participant.

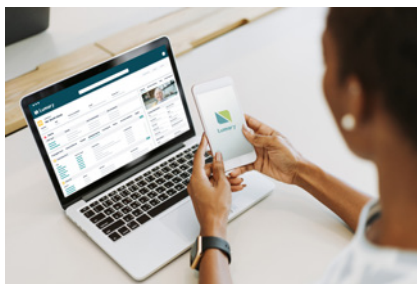


Basic strength and balance measures are taken before and after the four-week experience help inform the decision by carers whether their loved one continues in the program. The social aspect of participating in a small group cannot be underestimated, and this makes the program even more attractive to the participating residents.

For more information, please go to <https://thrive-wellness.com.au/>

Revolutionising Australian healthcare with next generation software

In an ever-evolving healthcare ecosystem, technology is at the heart of progress. The healthcare industry especially seeks innovative solutions to achieve better outcomes for people in their care - Lumary has delivered that with their specialist next generation software designed by experts in the field. Taking an expert-led approach to design means providers can now offer an even greater level of service.



With powerful technology now available at our fingertips, it's becoming easier than ever for aged care, disability and allied health providers to differentiate their business by delivering better services and improving client outcomes. From optimised operations and streamlined workflows to higher levels of client engagement, these innovative tools are revolutionising the way we deliver care - unlocking opportunities that would have been impossible just a few years ago!

Purpose-built care management software is designed to help healthcare providers streamline their operations, improve communication, and deliver better outcomes for their clients. Whether you're operating in the aged care, disability or allied health industries, with Lumary's next generation software, providers can manage all their client information, schedules, and billing in one place.

One of the significant benefits of operating with an all-in-one software solution is that it enables providers to manage their workforce more effectively, run their business more smoothly, whilst meeting the care needs of their clients. With features like efficient rostering, travel and transport tracking, providers can ensure that their employees are always in the right place at the right time. As a result, clients receive the care they need, when they need it - and employees can work more efficiently.

Another powerful advantage of Lumary's purpose-built software is that it is designed with and for healthcare specialists. Providers and their staff can access the software from any device with an internet connection, making it easy to stay up-to-date with their clients' needs and operate in

real-time. With a user-friendly interface, Lumary's care management software is easy to navigate, where providers can quickly find the necessary information they need about their clients to deliver high-quality care.

With the healthcare industry continuing to innovate, Lumary's next generation

software is designed to support providers to maintain compliance and scale as the industry does. Designed for niche healthcare markets, Lumary eases the regulatory burden that healthcare providers face, including maintaining compliance across a wide range of governed rules. With features like audit trails, secure messaging and document control, Lumary's software ensures that providers can maintain accurate records, making client privacy a priority.

Lumary's software is also designed to help providers collaborate more effectively. Integrated communication and messaging tools help providers to work together seamlessly whilst at the same time increasing engagement with clients, allowing them to receive coordinated care. And, the workforce can work more productively.

As providers across the aged care and disability sectors look to digitise, it's never been easier to provide quality services whilst supporting economic sustainability and a modern workforce. Lumary's next generation software is designed to support providers as they seek to differentiate themselves in-market and increase productivity. As providers expand their operations, they need software that can keep up with their needs. Lumary's care management software is scalable. From onboarding new clients and employees, to expanding service delivery, Lumary's software can adapt to meet the needs of the growing provider.

Whether you're a healthcare provider working in the aged and home care, disability, or allied health industries, Lumary is here to help you as a tech partner. For a software solution that can help you differentiate your business by putting people first, Lumary's next generation software is the perfect choice.

To find out how Lumary's range of care management software can help you to improve client outcomes, book a consultation today. www.lumary.com or enquires@lumary.com.au

Health Staffing Australia

Before Labor came into power back in late May, they made some big promises about the aged care industry, and what they intended to do to improve it. Since being elected they have introduced a number of changes, many of which directly affect aged care providers. While the changes - including the introduction of the Star Rating System and a cap on home care charges - are beneficial to older Australians and their families, they do put more pressure on providers at a time

when many are already operating at a loss. The introduction of the Australian National Aged Care Classification (AN-ACC) funding model has not satisfactorily addressed this. However, it's important to remember that fixing our aged care system is going to require long-term planning, and providers must continue to be part of the conversation in order to advocate for their own requirements and to help transform the industry into one that is sustainable for everyone.

Visit www.healthstaffingaustralia.com.au or phone 1300 132 595 for more information.



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