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[Submitted online]

Dear COVID-19 Response Inquiry Panel

Thank you for the invitation to make a submission to the COVID-19 response inquiry to inform recommendations for improving Australia's preparedness for future pandemics.

The Aged & Community Care Providers Association (ACCPA) is the national Industry Association for over 1000 aged care providers offering retirement living, seniors housing, residential care, home care, community care and related services.

In considering the experience of aged care providers and their responsibilities to ensure safe and quality care during the COVID-19 pandemic, we have identified improvements under the themes of coordination and consistency between the Commonwealth and the state and territory governments, funding, implementation, and communications.

COVID-19 was an unprecedented situation for aged care providers, aged care workers and for the Australian community. The aged care sector faced ongoing uncertainty regarding national and state and territory responses, with insufficient support for critical areas such as funding and workforce, and advice from government that at times was conflicting or unclear.

In addition, the level of operational guidance provided to residential aged care providers was not afforded to home and community care providers, leading to confusion across states and territories. There was also minimal operational guidance provided to retirement living operators.

### **1. Coordination and consistency between the Commonwealth and the state and territory governments**

Issues facing the aged care sector were at times complicated by the fact that the aged care sector is regulated and predominantly funded by the Commonwealth government, but health decisions and restrictions were made by state and territory governments. This meant aged care providers operating in more than one state or territory could face different requirements in different locations, resulting in challenges in consistently meeting the differing and changing requirements – including communicating the requirements to staff. Aged care providers were also required to report the same or similar things to both the Commonwealth government and state and territory governments.

There were also difficulties when border restrictions were put in place for aged care workers living in one state or territory and working in another state or territory, as well as issues for aged care workers getting to work when travel restrictions were put in place.

In relation to the health care/aged care interface, agreed principles and protocols needed to be in place ahead of the pandemic to reduce uncertainty about where and how aged care residents with COVID-19 would receive care, when aged care residents with COVID-19 would be transferred to hospital, and when health workers would be needed to temporarily work in residential aged care facilities during an outbreak.

The availability of Australian Defence Force personnel and surge workforce to work in residential aged care facilities during an outbreak, although in limited numbers, was a significant and positive development and welcomed by ACCPA members who received this support.

**Recommendation 1:** Develop a National Agreement between the Commonwealth, state and territory governments for the care and support of older Australians during a pandemic (in consultation with the aged care sector).

## 2. Funding

Funding arrangements for aged care providers are determined by the Commonwealth government and result in limited capacity for aged care providers to make, or seek, changes to increase funding for urgent circumstances. While confirmation of additional funding for the sector to address the significant additional costs from COVID-19 was welcome, it was rolled out reactively, iteratively and via administratively burdensome grant mechanisms.

For example, home care providers are required (under legislation) to negotiate necessary increases in prices with care recipients to provide COVID-safe care, a process that takes time and may not be agreed by all care recipients. Further, the reimbursement of COVID-19 expenses through grants has proven problematic with significant administrative costs incurred for both providers and the Commonwealth government, combined with lengthy delays in disbursing much needed funds.

Workers, who worked tirelessly to support and deliver care for older Australians during the pandemic, could have been better recognised and supported. For example, the Aged Care Workforce Retention Bonus announced on 20 March 2020 was only available for direct care workers. Yet, it takes a team of aged care workers undertaking a variety of roles to ensure quality and safe care is provided to care recipients.

**Recommendation 2:** Establish the structural framework required to provide direct (even if temporary) funding during a pandemic that will be timely, administratively efficient and sufficient, to address the increased expenditure required to meet safe and quality care.

**Recommendation 3:** Identify measures to support and retain aged care workers across all roles, to maintain stability and continuity of care and operations during a pandemic.

## 3. Implementation

The development and release of the COVID-19 vaccine was an important milestone in responding to COVID-19. However, the implementation of the vaccination roll-out to vulnerable Australians living in residential aged care was initially complicated by a lack of coordination between the delivery of the vaccine (with strict handling requirements) and the vaccination teams on the ground. This resulted in confusion, delays and increased administrative burden.

The aged care sector has also been supported by the delivery of personal protective equipment (PPE) and rapid antigen tests (RATs). However, there were implementation issues with some PPE not suitable for use due to expiration dates and providers receiving an oversupply of PPE, which required additional storage arrangements and costs. There were also issues with P2/N95 masks from the national medical stockpile not fitting many staff, and it was difficult to fit test staff for those masks.

**Recommendation 4:** Develop a protocol (in consultation with the aged care sector) for the timely and efficient delivery of vaccinations and other necessary advice and supports such as medicines to aged care providers in a pandemic.

**Recommendation 5:** Prepare a national plan (in consultation with the aged care sector) for the accurate procurement and dispersal of PPE during a pandemic to ensure aged care providers receive the PPE they need and when they need it.

## 4. Communications

To improve Australia's preparedness for future pandemics, accurate and effective two-way communication is needed between the aged care sector and all levels of government.

In home and community care, government guidance (at all levels) was ineffectual regarding COVID-19 vaccinations and isolation requirements for Home Care Package and Commonwealth Home Support Programme staff and volunteers.

Further, older and vulnerable Australians do not all live in residential aged care facilities or receive aged care services. These older Australians, including those living in retirement villages, also needed timely and relevant advice about COVID-19 – including infection prevention measures, isolation requirements and vaccine availability.

Another challenge facing aged care providers was public commentary that was unreasonably negative towards the sector. The circumstances facing Australia were unprecedented and challenging for everyone. Comments that appeared to assume aged care providers and aged care workers were not doing their best, with the available resources and information they had, were and continue to be unhelpful. The evolution of a visitor code is an example of the sector coming together to find a way forward to enable providers to ensure safe and quality care, while also supporting social needs during a stressful period for older people, their families and carers.

There was also inconsistency in Commonwealth Government communication, where they sometimes contacted the site managers of aged care services rather than the key personnel of the provider – resulting in confusion and delays in the communication of important messages to key personnel.

Over the course of the pandemic, regular communications were established between aged care peaks and relevant Commonwealth and state government departments, and these continue in one form or another today. These arrangements were supported by funding for the relevant peak bodies to play an information and coordination role with their members, and feed issues back to the bureaucracy for preparation of responses.

**Recommendation 6:** Create a Commonwealth and state/territory framework to ensure one set of directions/guidance agreed by all governments that can be implemented consistently across Australia and can be adapted by aged care providers to local circumstances supported by one online source that is easy to understand, accurate, and with clear signposting of any updates.

**Recommendation 7:** Require the Commonwealth Government to ensure they have up-to-date contact information for aged care providers and key personnel, including protocols about which roles to contact for what purpose during a pandemic emergency response.

**Recommendation 8:** Prepare accessible information aged care workers can provide to a client when going to a person's home, aimed at educating older people and their families on the safe provision of services, the challenges of providing services during a pandemic (including staffing), and how to limit risk during visits.

In conclusion, we recognise the unprecedented circumstances that the nation faced in relation to COVID-19 and acknowledge the learnings that will come from this Inquiry. We support and encourage the Panel to identify ways forward to give confidence to the Australian community that older people will receive safe and quality care in the event of any future pandemic event.

Finally, we recognise the dedication of all those who worked or volunteered to protect older people in a time of great stress and uncertainty. We thank them for their care for older people, no matter their role, showing what we can all achieve as an industry and as a community.

If you have any questions or would like to discuss, please contact us at [policy@accpa.asn.au](mailto:policy@accpa.asn.au).

Yours sincerely

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