



An initiative of the Knights of the Southern Cross

19 September 2019

Committee Secretary
Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee
Parliament House
George Street
Brisbane Qld 4000

health@parliament.qld.gov.au

Dear Committee Secretary,

I refer to your email letter of 10 September 2019 inviting submissions on the proposed *Health Transparency Bill 2019*.

I write on behalf of Southern Cross Care (Qld) who deliver not-for-profit private residential aged care services at 11 sites in Queensland.

In particular, Southern Cross Care (Qld) provides its submission regarding the public reporting of staffing information under the proposed *Health Transparency Bill 2019* by Commonwealth-approved residential aged care services.

We consider that the public disclosure of personal care and nursing staff inputs as proposed in the Bill will be of limited use to consumers for differentiating the quality of services.

There is no conclusive evidence that personal care and nursing staffing inputs are a reliable indicator of quality of care and quality of life experienced by residents in aged care services. Many other staffing-related factors influence quality outcomes, including the skills, qualifications and experience of staff, the quality of their training, the culture of the organisation, the appropriateness of the skills to the care needs of the resident profile in each service, the quality of leadership, management and clinical governance, and the effectiveness of the interfaces with the wider health system. Aged Care homes are not stand-alone health services.

Moreover, staffing input data are not straight forward for consumers to interpret and, if relied upon, likely misleading. Staffing levels and composition in residential aged care services can be expected to vary for good reasons that are not always apparent to the public and consumers, e.g. the design and layout of the aged care home, the size of the aged care home, models of care being employed, and the resident profile of each home which determines the level of care funding each home receives. With regard to the latter, average care funding per resident per day received by aged care services, which is regulated by the Commonwealth, varies between less than \$70 to over \$210. Such a variation has significant implications for staffing profiles and staffing inputs across services.

The Bill's focus on personal care and nursing inputs also assumes a medical model of care in aged care homes, and does not adequately recognise the contribution of allied health, social, lifestyle and pastoral roles and the role of volunteers. The contribution of these roles is critical for quality of care and quality of life in long term care environments, as distinct from episodic hospital-based clinical interventions.

We are also concerned that the introduction of State-specific reporting would result in confusion and duplication concerning Commonwealth funded and regulated services for which national standards should apply in support of national consistency, noting also that many aged care service providers operate across state and territory borders. In this regard, the Commonwealth is currently embarking on a program of reform to improve transparency and public reporting as part of an enhanced quality regulatory framework, including consumer experience reporting, performance rating of services and national quality indicators.

The Royal Commission into Quality and Safety in Aged Care is also expected to inquire into and make recommendations for reform at the national level which addresses the quality of the aged care workforce and improved public reporting to support quality services and informed consumer choice and control.

While supporting the intention of the Bill in relation to public disclosure, we consider that the proposed publication of staffing input data focussed on personal care and nursing is of limited use to consumers and likely misleading, and that the more appropriate process for further improving public disclosure and service quality in relation to aged care services in Australia is to engage with the Royal Commission and, as appropriate, COAG processes.

Furthermore, we consider that as private residential aged care facilities are funded and regulated by the Commonwealth, that these matters remain matters for the Commonwealth. As such, we are of the view that any duplication of regulation and/or reporting at the State level is unhelpful to our core endeavours to provide quality care and quality of life.

We also note that the State-owned facilities are greatly subsidised by the State Government and in the event that there is State regulation of Southern Cross Care (Qld)'s operations (arising from the proposed Bill or otherwise), we would welcome any assistance available, especially in rural and regional areas.

As the Bill is currently drafted, whilst Southern Cross Care (Qld) will, at all times, comply with its legal obligations, including responding to the required notice from the Chief Executive. However, we do not intend to voluntarily submit residential care information (including staffing numbers) and hence, will exercise its rights to 'opt out' of the reporting of this information.

Should you have any queries regarding our response, please do not hesitate to contact myself at

Yours sincerely



Damien Finger

INTERIM CHIEF EXECUTIVE OFFICER