



MEDIA RELEASE, 26 February 2021

### **Address ageism in health care and focus on preventative health, says peak university body.**

**Ageism is contributing to premature institutionalisation, ill health, and less emphasis on extending independent living for older people and we need to take urgent action, claims the peak body for allied health educators.** The comments come as the Royal Commission Report into Aged Care Quality and Safety public announcement is delayed until next week.

Professor Gregory Kolt from the **Australian Council of Deans of Health Sciences** (and Dean of Health Sciences at Western Sydney University) says ACDHS looks forward to seeing the recommendations from the Royal Commission, emphasising **more needs to be done to assist older Australians to access preventative health services, and to understand capacity for recovery, adaptation, and wellbeing in older age.**

Evidence presented in 2020 showed most aged care residents in Australia do not receive the kind of access to allied health services that would enable better quality of life. **A University of Wollongong research paper found that only 2 per cent of Australian residents in aged care facilities currently receive the internationally benchmarked allied health care recommendation.**

“Although a new Aged Care Act would be a step forward, more needs to be done to address the rights of older people to access the full range of health and social care systems,” Professor Kolt said.

### **Ageism contributes to cost blow-outs**

“Ageism in health care contributes to ill health and ultimately contributes to cost blow-outs as older people in residential care facilities or at home are unable, or less inclined, to access broader enablement or rehabilitation services that can keep them out of emergency rooms.”

**Professor Kolt said there was a need to reframe society’s perception of the aging process and to reflect on the subtle discrimination of ageism and how bias can impact on health provision more widely.**

“How often are elderly people offered the opportunity to access a psychologist? Or to work with a physiotherapist on an ongoing basis to recover from an injury, or pursue a program to prevent falls with an occupational therapist or a podiatrist -- services should be accessible to everyone as their needs require, wherever they are living.

“It shouldn’t be complicated or limited by prescribed activity allocations, caps on number of services, or barriers to accessing a diverse range of primary health services. Older people need to be able to determine what services they require to meet their particular needs, not providers.”

### **Future workforce planning needs work**

Professor Kolt said while much of the discussion about future workforce planning had been on the ratio and quality of nursing and care workers in aged care facilities, there was need for a broader discussion of workforce needs, with allied health professionals set to play a significant part in aged care health delivery in the future.

“Timely access to allied health professionals can have a significant impact on quality of care and quality of life, including preventing decline, managing pain, and providing end-of-life and palliative care.”

**He said universities, and their clinical training partners, are responsible for allied health education and had a role to play in facilitating new pathways to careers in aged care settings. These pathways provide the vital, necessary link between theory and practice.**

“Allied health student training placements in private aged care facilities and disability care have been limited to date, but this needs to change.

“For aged care services to deliver the quality of care that the community expects then placement capacity will need to increase. Mechanisms that facilitate and support partnerships between health and education, allowing more students to experience aged care outside of an acute setting like a hospital where many patients may be at their most frail is the vital next step”.

Professor Kolt said clinical training placements in residential aged care and in the community which support older people will help to break down discrimination.

“This may also encourage students to consider long-term careers and further education in aged care.”

## **ENDS**

**For more information, media interviews with Professor Kolt:**

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Pre-records and case studies are available.