



**Revised Aged Care Quality Standards
Draft for Consultation
Department of Health and Aged Care
25 November 2022**

Consultation: Revised Aged Care Quality Standards: Detailed Draft for Consultation

Introduction

The **Australian Council of Deans of Health Sciences (ACDHS)** represents the university faculties engaged in pre-professional education and research for allied health sciences. As the educators of allied health professionals, ACDHS sits at the nexus between healthcare and education sectors. Allied health professionals comprise almost a third of the country's healthcare workforce and deliver over 200 million health services annually¹. Allied health services are an essential component of the health, aged and disability care systems in Australia. More information is available at <https://acdhs.edu.au/>

ACDHS welcomes this opportunity to contribute to the development of new Aged Care Quality Standards (the Draft Standards) and is pleased to see the strengthened focus on person centred care and a rights-based approach, diversity and addressing issues raised in the Royal Commission into Quality and Safety (the Royal Commission) such as clinical standards and food and nutrition.

ACDHS comments below relate to Standards and Outcomes of the detailed version of the Draft Standards.

Standard 2: The Organisation

Outcome 2.9 Human resource management:

ACDHS Recommends consideration be given to an action: The provider implements strategies to ensure and support health workers to deliver services within their scope of practice.

ACDHS acknowledges and supports allied health professions' concerns that cost constraints and workforce shortages are driving substitution of allied health assistants or other lifestyle coordinators to provide services that are within the scope of practice for an allied health professional². This presents significant risk to patient safety. Allied health assistants are not qualified to make decisions regarding patient care and

¹ Allied Health Professions Australia at <https://ahpa.com.au/what-is-allied-health/> Accessed on 3 November 2022

² Proposed Allied Health Aged Care Solutions for Jobs Summit. Allied Health Professions Australia August 2022. accessed at <https://ahpa.com.au/wp-content/uploads/2022/08/AHPA-Proposed-Allied-Health-Aged-Care-Solutions-for-Jobs-Summit-300822.pdf>



require supervision by allied health professionals. Embedding training competencies and best practice arrangements for delegation and supervision by allied health professionals into systems is required.³

Education providers have a key role here, across university and TAFE sectors, to provide not only qualified allied health professionals but also graduate certificate and diploma qualifications.

Standard 3 The Care and Services:

ACDHS recommends that this outcome be amended to include access to early and adequate assessment for allied health services.

Outcome 3.1 Assessment and planning. We agree that the older person must be actively involved in developing and implementation of service plans. However we consider that this Draft Standard does not sufficiently address the need for early and adequate assessment for referral to allied health professional services. The Royal Commission recognised allied health as a core part of aged care services. Consumers of aged care services require access to a range of allied health services from a mix of disciplines according to their need, yet this is currently far from the case. The assessment process must ensure that clients understand the range of services available to them to suit their individual circumstances. This includes identifying where allied health services can assist the older person and to achieve quality of life, preserve independence and avoid premature institutionalisation.

Standard 5 Clinical Care.

ACDHS recommends that this Standard be revised to include a focus on preventive, reablement and restorative care, including care provided by allied health.

We fully support a system that supports older people to be partners in their own care and welcome the strengthened approach to clinical governance and more detailed expectations in relation to clinical care.

However we are concerned that this Standard (and Outcomes that sit under it) does not adequately go to the importance of preventive interventions. This Standard appears to have been prepared with a focus on reactive care solutions rather than early interventions that maintain independence and delay or prevent progression onto higher care levels (eg physiotherapy services reduce the risk of falls, improved nutrition reducing the risk of bone fractures). A preventive approach would provide early assessment of risk (see above for comments on standard) and the delivery of allied health professional services that preserve older peoples' physical, cognitive and emotional capacities, maintain independence in the community and reduce costly premature or avoidable institutionalisation and hospital admissions.

If you have any questions on the ACDHS response then please do not hesitate to contact ACDHS at secretariat@acdhs.edu.au.

³ ibid

