

**Opening statement to Senate Standing Committee  
on Community Affairs (Legislation Committee)  
Inquiry into Aged Care Amendment (Implementing  
Care Reform) Bill 2022 [Provisions]**

Australian Physiotherapy Association

National President

Scott Willis

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## Opening statement, APA National President Scott Willis

Good afternoon I am Scott Willis, a proud Palawa man, speaking to you from the land of the Palawa people in Burnie, Tasmania.

As National President of the Australian Physiotherapy Association, I directly represent more than 31,000 members and speak for Australia's 37,000-strong physiotherapy workforce.

It is a privilege to have this opportunity to contribute to the impressive work of Minister Wells and the Albanese Government – who have taken office with clear intent to take action on aged care reform and to rebuild the sector.

I would like to offer a brief introduction to the position of the Australian Physiotherapy Association, which is committed to working constructively with you, the Committee, and with the Albanese Government to restore public confidence in the aged care sector and ensure that older Australians have access to the high quality care they need and deserve.

The APA believes that the aged sector must be rebuilt with needs-based care for older people front and centre. Therefore, reforms should be built upon comprehensive assessment, planning and delivery of high quality and evidence-based health care that meets individual needs.

The Royal Commission into Aged Care Quality and Safety singled out allied health such as physiotherapy as critical to restorative and reablement care – that is care that maintains and improves quality of life and rehabilitation - but we've been largely ignored.

Physiotherapy is one of only five professions that can diagnose patients. It is critical in falls prevention and reduction, building strength, balance and mobility and in rehabilitating older people recover post incident and surgery. We know that 50% of those in residential aged care have dementia and that physiotherapy is important in diagnosing causes of pain in those who cannot communicate for themselves and managing the behavioural and emotional impacts of the disease.

We support the legislation but would like to point out the large gaps in the reform process. Clearly there needs to be another tranche of legislation to address deficits in allied health provision.

The new funding model, the Australian National Aged care Classification is not the full solution. The AN-ACC is a classification model, not an individualised care planning model. Within the sector, it is widely recognised that allied health provision has not been properly addressed.

We support the intent of this Bill and its key components with some comments.

Transparency is critical to the success of a new aged care system and it must include further specification of what this means in practice as it relates to physiotherapy and more broadly allied health provision. Allied health is a broad umbrella term that covers a range of different health professions – and reporting should be made against each of these professions individually and in

detail. This will help us get a full and clear picture of the levels of care older people are actually receiving.

This reporting must be fed into the Star Rating system to give consumers transparency of the full range of services provided to empower their decision-making.

However, without a minimal standard or benchmarking these figures alone will be without context and not guarantee best practice care. More work needs to be done to benchmark and therefore mandate the minimum level of care we want to provide older people.

The APA supports capping charges that home care providers can charge recipients and the removal of exit amounts to ensure greater flexibility and consumer choice.

Nurses play a vital role in aged care in partnership with allied health professionals such as physiotherapists and the broader care team.

The introduction of 24/7 registered nurses to individual facilities – as a first step in addressing the inadequacies of current healthcare provision to aged care residents. Numbers alone will not guarantee high quality care. As well as the right number of staff, there needs to be the right skill mix to meet the complex care needs of older people whether at home or in residential aged care. Time-limited exemptions should be available to address a shortage of nursing staff.

It is vital to ensure the right skills mix within residential aged care within each staff member's professional scope of practice.

Physiotherapists work with other allied health professionals and alongside GPs, nurses and carers to provide high quality teams-based care to our most vulnerable. They support other health workers with manual handling and assistive technology expertise, diagnosis of causes of pain and pain management, and management of behavioural and psychological symptoms related to dementia.

We surveyed our members and conducted interviews with allied health providers. Unfortunately, uncertainty about the future job security, employment opportunities and career pathways has been reported to us strongly.

At the height of an aged care workforce crisis, with understaffing commonplace across the sector, we are receiving reports from our members of 50 per cent reductions in physiotherapy contracts and hours.

A diminishing allied health workforce will put further pressure on an already overburdened care and nursing workforce and not achieve the goals of this Bill. Further provision enabling a sustainable allied health workforce delivering high quality needs-based care to the full scope of practice is required.

We welcome the purpose of the Bill: “to amend the Aged Care Act 1997 (Aged Care Act) to effect meaningful changes to the delivery of aged care services and the means for care recipients and their families to assess the relative quality of service delivery by care providers and at individual care facilities.”

The Bill is a good start in achieving this purpose, and pleasingly signals a commitment to reform, however we believe there is much more that needs to be done.

The APA supports Schedule 1 – the introduction of 24/7 registered nurses to individual facilities – as a first step in addressing the inadequacies of current healthcare provision to aged care residents. Numbers alone will not guarantee high quality care. As well as the right number of staff, there needs to be the right skill mix to meet the complex care needs of older people whether at home or in residential aged care.

This amendment, along with the introduction of the Australian National Aged Care Classification (AN-ACC) and average carer and nursing care minutes per resident, should not be considered the completion of residential aged care reform as it relates to healthcare.

These measures do not provide certainty about ongoing access to allied health care such as physiotherapy, which the Royal Commission into Aged Care Quality and Safety identified as critical to maintaining and improving mobility and independence of older people.

Nor does it recognise the importance of ongoing multidisciplinary care planning and team-based quality healthcare.

Allied health, such as physiotherapy, provides quality teams-based support to carers and nurses; for example, with manual handling and assistive technology expertise, diagnosis of causes of pain and pain management, and managing symptoms related to dementia.

At the height of an aged care workforce crisis, with understaffing commonplace across the sector, we are receiving reports from our members of 50 per cent reductions in physiotherapy contracts and hours.

A diminishing allied health workforce will put further pressure on an already overburdened care and nursing workforce and not achieve the goals of this Bill.

Further provision enabling a sustainable allied health workforce delivering high quality needs-based care to the full scope of practice is required.

The APA is available to provide the Standing Committee on Community Affairs further information and appear at any hearing to expand on our submission.