

Osteopathy Australia wants to thank the Department of Health and Aged Care for inviting stakeholders and community members to provide views on the New Aged Care Act.

In this submission, we focus on ensuring that allied health professionals, particularly osteopaths, are considered part of the broader multidisciplinary team. Allied health professionals are key components of the care provided to older people in ensuring they are mobile and receive preventative and early intervention in their care approach.

We have concerns with all healthcare professionals being grouped as aged care workers under the New Act. There is no consideration of the intricacies of each profession and the basis on which they provide services at aged care facilities. Some healthcare providers, like osteopaths, often provide consultative services and are not available onsite 24/7. The increased responsibility and burden placed on aged care workers is concerning for an already thin workforce.

There is a need for the provision of appropriate training and education for registered providers and aged care workers to ensure older people receive equitable care. With the lack of a transition period, we are concerned about the practicality of the rapid change that will be required to be implemented across the sector.

The New Aged Care Act omits the recognition of the legislation around other schemes and the funding the older person may receive. This includes schemes such as the National Disability Insurance Scheme (NDIS) and the Department of Veterans Affairs (DVA). Better streamlined care should be afforded to older persons receiving care in an aged care facility.

The Statement of Rights and Statement of Principles require refinement and consideration of how the inclusion of allied health will be integrated into multidisciplinary team care.

### **Osteopathy and Osteopathy Australia**

Osteopathy Australia is the peak body representing the interests of osteopaths, osteopathy as a profession, and consumer's rights to access osteopathic services. Our core work is liaising with state and federal government and all other statutory agencies, professional bodies, and private industry regarding professional, educational, legislative, and regulatory issues. Most registered osteopaths are members of Osteopathy Australia.

Osteopaths in Australia are university-qualified allied health practitioners registered with the Australian Health Practitioner Regulation Agency (Ahpra). Osteopaths complete either a dual bachelor's or bachelor's and master's qualification covering functions of anatomy, biomechanics, human movement, the musculoskeletal and neurological systems, as well as clinical intervention approaches, which are all underpinned by a biopsychosocial management approach.

## Recommendations and feedback

Osteopathy Australia welcomes the opportunity to provide feedback on the new Aged Care Act. Our feedback is broken down into sections based on our suggested improvements to the revised legislation.

### Allied health integration

There is a lack of allied health integration in the New Aged Care Act. The New Act calls for multidisciplinary team integration and interaction but omits to include that allied health professionals play a pivotal role in preventative care. Allied health professionals are integral in working as a part of a multidisciplinary team and should not be an afterthought when an older person requires access to these services on an ongoing basis.

Allied health professions, including osteopathy, should be included in the aged care assessment process. Current needs assessors must have a better understanding and a standardised approach of the aged care system, by bringing a multidisciplinary lens to aged care assessments. This ensures a well-rounded assessment approach. Training and information resources should be developed for assessors to ensure they understand the breadth of scope of practice of the various allied health professions.

Early intervention is important so that the older person receives the care they need as soon as possible. Falls prevention is another critical aspect of aged care, and osteopaths working with older persons typically aim to prescribe safe exercises to keep them moving to help minimise the risk of falls. Allied health professionals are also crucial to the provision of preventative and early intervention for musculoskeletal conditions.[1] Preventative and early interventions reduce the burden on the public health system by lowering the number of avoidable hospitalisations. Avoidable hospitalisations can be managed by a multidisciplinary team, including osteopaths, prescribing safe exercises to enhance mobility rather than waiting until the older person has a fall and is admitted to the hospital.

We have concerns with the following quotation under the New Act:

“supporting the improvement of the individual’s physical and cognitive capacity, where the individual chooses to, including by keeping the individual mobile and engaged if they are living in an approved residential care home;”

This insinuates it is the responsibility of the older person to determine whether they are mobile or immobile with limited support by the multidisciplinary team. A lack of access to the right supports, including osteopathy, can be detrimental to an older person's mobility and contribute to the increased risk of falls. This may include a reduction in the older person’s maintenance or lead to a decline in function. If an older person is provided with access to a multidisciplinary team, this can reduce avoidable hospitalisations and the financial burden on the public health system.

### Aged care workers

Osteopathy Australia notes that the New Aged Care Act defines all healthcare workers, whether contracted to an aged care facility or a permanent member of staff, as an aged care worker. This is

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<sup>1</sup> Steel, A., Vaughan, B., Orrock, P., Peng, W., Fleischmann, M., Grace, S., Engel, R. M., Sibbritt, D. and Adams, J. (2019). Prevalence and profile of Australian osteopaths treating older people. *International Journal of Osteopathic Medicine* 43, 125-130.

problematic for healthcare workers who often provide consultative services, such as osteopaths, who may not visit the facility frequently.

The New Aged Care Act places an additional burden on aged care workers, including more responsibility and accountability for adverse events. The aged care workforce is a thin market and placing additional responsibilities and burden on the existing workforce will have negative repercussions on those working in aged care and may lead to an even higher turnover of staff.

The New Aged Care Act places a regulatory burden on the already burnt-out workforce. Reduction of regulatory burden may serve as an incentive to strengthen the aged care workforce. Conversely, increasing regulatory requirements may exacerbate the strain on an already struggling aged care workforce, emphasising the need for a balanced approach to maintaining workforce resilience.

The New Aged Care Act assumes that there is the right skill and mix of workforce available to implement changes under the new legislation. We continually see workforce maldistribution and a lack of the right workforce available to sustain the required changes. The utilisation of smaller professions, like osteopathy, can help to address the gap in the required workforce and thin markets.

### The registration process

We note the registration process for providers mirrors the NDIS registration process. With limited information about how the registration process for providers under the revised changes to the NDIS may work, Osteopathy Australia has concerns with the new registration process expected for providers. We recommend that:

- multiple regulations across the care sectors are mirrored or aligned to avoid duplication, cost or administrative/regulatory burdens.
- any additional regulation must be affordable and geared towards improving quality and safety.
- Ahpra registration and the quality, safety mechanisms and complaint investigations it provides should be recognised to avoid duplication of checks and processes.
- registration is sustainable and affordable, with a preference for registration to have zero cost for health professionals.

We note that separate obligations will apply to aged care workers. It is important that the New Aged Care Act outlines this and provides a clear and transparent registration process that does not duplicate the Ahpra registration process.

### Training and education

Osteopathy Australia understands that the new risk-based regulatory model will increase provider and individual accountability. We recommend that providers and aged care workers receive ample guidance and training on the revised requirements. This guidance requires clear instructions on the new changes that will occur to provider registration categories.

Osteopathy Australia acknowledges that content will be packaged and sent to aged care providers to assist them with the new changes. We understand that this content will be released in early February and includes draft guidance for each of the seven strengthened standards, the evidence mapping framework and auditing tools. We recommend that in addition to this content, education and training materials are created for registered providers and responsible persons to train them on their new obligations under Commonwealth and State and Territory laws. Key changes should be

thoughtfully communicated with older people, providers, and aged care workers. This will enable harmonisation in the implementation of these changes.

Clear and concise communication must be delivered to providers, aged care workers and older persons accessing this care. Providers must be clear about the new expectations required and how they must comply with relevant provider registration categories. Transparent expectations about the conditions for worker screening requirements and their new statutory duties must also be outlined. Aged care workers should have transparency and a sound understanding of the statement of rights and principles, including receiving adequate communication about the conditions for worker screening requirements.

Further legislative changes due to occur in 2025 require clear and accurate communication to the sector to ensure registered providers and aged care workers are not in breach of requirements under the new framework. This includes adequate time for consultation and implementation of recommended changes.

### Implementation timeframe

We are significantly concerned about the lack of an implementation timeframe for the New Aged Care Act. The new Act comes into force on 1 July 2024 and does not include a transition period. The period to transition to the new Act is from the release of the final New Aged Care Act to its implementation date.

The draft Act in its current form requires changes to be made following the close of the consultation period. This requires time to ensure all feedback provided has been adequately considered and included, as well as the development of ample training and information resources for providers and aged care workers before the launch of the New Aged Care Act. We suggest an implementation period of at least six months is given to aged care providers and workers to ensure that ample time is provided to update policies, train staff on the new changes and transition to the new arrangements.

### Equitable care

We have concerns about the lack of consideration of care and equitable access provided to the older person between their initial assessment and palliative care or end-of-life care. The New Act does not consider the rights of individuals receiving care at a point in time when their initial assessment has occurred, and they are not nearing end-of-life. This is concerning and does not consider the whole person whose needs continually evolve. This requires attention and amendment to consider the middle period where an individual's needs may change in comparison to their initial assessment stage or near end-of-life care.

### Integration with other legislation and schemes

There needs to be more consistent communication between government services creating a unified system that is consistent across aged care, disability, mental health, community services, primary care, workers compensation and transport accident schemes. The New Aged Care Act needs to consider the governing acts and legislation that may interrelate with the older person. This unified system could offer cross-sector training for care providers to enhance their understanding of various schemes and improve their ability to guide older persons through the complexities of accessing services under different programs. It would have the potential to introduce specialised navigation services that could assist consumers in navigating the intricacies of various schemes, guiding

available options, eligibility criteria, and funding tailoring a person-centered approach. By adopting these measures, the Australian Government could create a more integrated, user-friendly, system that addresses the diverse needs of Australian consumers and could potentially save and preserve rather than exhaust already burdened resources.

The recently released NDIS Review outlines that:

“The Australian Government should implement legislative change to allow participants once they turn 65 to receive supports in both the NDIS and the aged care system concurrently and clarify when aged care supports are reasonable and necessary.”

The New Aged Care Act does not outline that older persons receiving aged care funding have the right to receive funding under the NDIS. It simply assumes that the older person only receives aged care funding and care. Integration and a streamlined process, effective planning, coordination and accountability across governments and systems to ensure the person receives care from existing avenues are required to ensure a whole-person approach is considered.

Simply developing a services list that provides details of available providers is not sufficient for older people. They require integration and interaction with other existing schemes like care and funding provided under the NDIS and DVA.

### Statement of rights

The Statement of Rights lacks focused detail and does not enable a conduit to address current allied health limitations, like the provision of necessary allied health services.

Section 20(1)(a)(ii) outlines that:

“An individual has a right to (a) exercise choice and make decisions that affect the individual’s life, including in relation to how, when and by whom those services are delivered to the individual.”

If a consumer requires osteopathy services and the provider tells them that they have no osteopathy services, this will more than likely result in the consumer being required to pay for the service out of pocket. Similarly, subsections 20(2)-(4) say nothing about the individual’s right to be clinically assessed for their allied health needs.

### Statement of principles

Overall, the Statement of Principles require refinement. For example, section 22(2)(c) states that the Commonwealth aged care system supports the delivery of funded aged care services by registered providers that *recognises* the rights of individuals under the Statement of Rights. It is unclear how non-adherence to the Statement of Principles would be addressed, and the potential consequences under the existing regulatory system.

Osteopathy Australia would again like to thank the Department of Health and Aged Care for the opportunity for consultation. For any additional information or comments, please get in touch with us by phone at 02 9410 0099 or by email at [clinicalpolicy@osteopathy.org.au](mailto:clinicalpolicy@osteopathy.org.au).