

30 October 2024

Department of Health and Aged Care - New Aged Care Act Consultation
By Online Form submission
Copy to email: AgedCareLegislativeReform@health.gov.au

Dear Sir/Madam

Consultation Draft - Aged Care Rules 2024

Opal HealthCare (OHC) is pleased to provide the attached submission on the *Consultation Draft Aged Care Rules 2024 (Rules)* released on 26 September 2024.

OHC supports the policy objectives of the Aged Care Bill 2024 and implementing Rules to provide a transparent, robust and sustainable aged care legislative framework that can be effectively governed and enforced. OHC wishes to see Australia continue to strengthen the resident rights-based, high-quality care system that commenced with the reforms introduced following release of the Royal Commission Final Report.

The attached submission sets out concerns on two aspects of *Section 58 – Residential everyday living*, with the aim of ensuring that providers meet resident care needs, and at the same time offer choice to residents and provide a safe workplace for team.

The two aspects for consideration in Section 58 are:

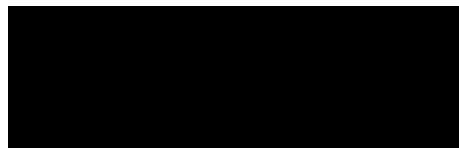
- (a) **Item 6(e) Recliner chairs in each resident room:** OHC requests that the proposed requirement for a recliner chair in each resident's room is reviewed. It is recommended that the current chair requirement in the Quality of Care Principles (Item 1.4, Schedule 1) is enhanced in the new Rules by the addition of appropriate range of recliner and non-reclining chairs in common lounge and media areas.
- (b) **Item 9(c) Flexibility in mealtimes:** OHC seeks clarification and guidance on the meaning of "flexibility" in provision of mealtimes. Clarity is required to enable adequate planning and team roster management.

OHC welcomes the opportunity to engage with the Department to discuss the concerns raised in this submission.

Yours sincerely



CEO



Chair

Draft Section 58 – Residential everyday living

A. Provision of recliner chairs in resident rooms

Section 58 Residential Everyday Living *Item 6 Bedroom and bathroom furnishings subparagraph (e)* “a recliner chair with arms, that meets the individual’s care, safety and comfort needs (including a chair with particular features if needed, such as air, water or gel chair;”

For the reasons set out below, OHC recommends that the current requirement for provision of a resident chair set out in *Item 1.4, Schedule 1 (Quality of Care Principles 2014) – Care and services for residential care services – PART 1 – Hotel services – to be provided for all care recipients who need them* (extracted in attachment) is retained, and enhanced by the addition of a requirement to provide an appropriate range of recliner and non-reclining chairs in communal lounge and media areas.

The above recommendation would achieve a balance between resident care, safety, and comfort needs, and provide resident choice. Following are reasons to support this approach.

1. Resident Choice

Currently residents have choice whether they would prefer a recliner chair or to bring a chair from their home when they are admitted to our Care Communities. Not all residents would choose to have a recliner chair.

No one type of chair is appropriate for every resident. Residents are assessed for the optimal design chair to meet their needs. The selection of an appropriate chair is evidenced by the following features:

- (a) Pressure management.
- (b) Falls prevention.
- (c) Early mobilisation.
- (d) Posture & function.
- (e) Wound care & injury prevention.
- (f) Safe patient handling.
- (g) Infection control.
- (h) Bariatric care.

Provision of recliner chairs in communal areas enables resident choice between remaining in their room or engaging socially with other residents and team.

2. Restrictive Practice

A chair that is not appropriately assessed for a resident’s needs and function could lead to reduced function and mobility for that resident, resulting in a restrictive practice.

This is because a resident remaining in their room in the chair, isolated from social opportunities and potentially unable to mobilise, would be deemed an environment and physical restraint.

3. Work Health and Safety

The requirement to include a recliner chair and a visitor chair in each room as well as a bed and other furniture that a resident may choose to bring with him or herself, raises Work Health and Safety risk to team.

Of particular concern is the impact on manual handling practices, critical for resident care and safety. The use of manual handling equipment in a room with additional furniture means that equipment cannot be used safely by team.

Other adverse impacts include:

- (a) A longer period time to perform the manual handling task while furniture is moved;
- (b) increased risk of an injury to team due to repetitive dynamic and static handling of furniture that may need to be removed from the room for equipment to be placed in the room; and
- (c) temporary storage or relocation of the equipment increases fire safety risk in the event that common areas proximate to the resident's room, such as corridors, need to be used.

B. Clarity regarding flexibility in mealtimes

Section 58 Residential Everyday Living *Item 9 Meals and refreshments subparagraph (c) "flexibility in mealtimes, if requested by the individual;"*

OHC understands and supports an increase in resident choice for meals and mealtimes.

OHC seeks clarification on the meaning of "flexibility" in Item 9 of the draft Rules. For example, would a selection of two mealtime windows satisfy this requirement such as in the case of lunch 12pm – 1pm or 1pm – 2pm.

Additional guidance is required to enable adequate planning and team roster management.

Attachment – Schedule 1 (Quality of Care Principles 2014) – Care and services for residential care services – PART 1 – Hotel services – to be provided for all care recipients who need them

Item 1.4 Furnishings

Bedside lockers, chairs with arms, containers for personal laundry, dining, lounge and recreational furnishings, draw-screens (for shared rooms), wardrobe space and towel rails.

Excludes furnishings a care recipient chooses to provide.

Additional guidance

A provider cannot charge a resident for: a chair with arms to meet the resident’s care, safety and comfort needs if the resident is unable to walk or move about independently and cannot use a conventional arm chair, includes an arm chair with particular features to meet the resident’s needs, such as an air, water or gel chair.

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