

# Decent Work Good Care: International Approaches to Aged Care

## Keeping Well: Supporting the Care Workforce *Scottish Care*

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# Decent Work Good Care:

International approaches to aged care

Investigates how **national policy, funding & employment regulation**, operationalised through **organisational practices and work design** shapes **decent work and quality care**



# DWGC Project: Background

Underpinning premise: 'the conditions of work are the conditions of care' (Armstrong 2015)

DWGC Project builds on two key projects :

- **Quality Jobs=Quality Care** (2013-2016):
  - Co-designing/piloting/evaluating 'small wins' innovations to improve both job quality and care quality in 3 large Australian aged care providers → Toolkit: [www.qualityjobsqualitycare.com.au](http://www.qualityjobsqualitycare.com.au)
- **Reimagining Long-term Residential Care: International Promising Practices** <http://reltc.apps01.yorku.ca>
  - Multiple case studies across six countries found (Baines & Armstrong 2019): quality care is underpinned by **good quality relationship-based care** which needs:
    - Adequate staff and an appropriate staff mix
    - A stable workforce
    - Time
    - Standards (principles), effectively enforced and funded
    - Appropriate training and education
    - Appropriate working conditions
    - An integrated system
    - Tolerating some risks

# DWGC Project (2017-2020)

## Objectives:

- Better understand how policies, funding and regulation, operationalised through organisational practices & work design, shape both quality of work & quality of care;
- Collect evidence about how organisation of care relationships in aged care services between care workers & aged care recipients can promote job quality & sustainable, good quality aged care services.

## Methods:

- Regulatory mapping of Australian, NZ, Scottish and Canadian (Ontario) 'regimes' inc
  - Aged care policy 'architecture' & funding models; industry structure; emp regulation
- Organisational case studies: 'rapid ethnographic' approach – using 'insider' & 'outsider' researchers

## Team:

- Prof Sara Charlesworth (RMIT) Prof Donna Baines (Sydney/UBC), A/Prof Deb King (Flinders), Prof Ian Cunningham (Strathclyde), Prof Tamara Daly (York), Wendy Taylor (RMIT), Lee Thompson (AUT)

## Policy/Practitioner outputs inc:

- Promising Practices; Promising Policies; Evidence to Australian Royal Commission on Aged Care Quality & Safety...

COUNTRY	LTC COVERAGE & FORMAL LTC WORKFORCE BY SERVICE TYPE						
	LTC as % GDP	% of <i>total pop</i> 65+ using <i>at home LTC</i> 2016	% of <i>total pop</i> 65+ using <i>instit LTC</i> 2016	% of total pop 80+ using <i>at home LTC</i> 2016	% of <i>total pop</i> 80+ using <i>instit LTC</i> 2016	Formal LTC workers <i>at home</i> per 100 pop of 65+	Formal LTC workers in <i>instit LTC</i> per 100 pop of 65+
<b>Australia</b> (25.2 mil)	0.8% (2011)	5.7%	6.6%	13.9%	19.4%	2.2 (2016)	4.0 (2016)
<b>Canada</b> (37.5mil)	1.3% (2011)	8.6%	4.2%	17.3%	12.4%	0.5 (2016)	3.1 (2016)
<b>NZ</b> (4.8 mil)	1.3% (2011)	9.5%	12.5%	26.4%	14.6%	3.7 (2018)	3.0 (2018)
<b>UK</b> (67.6 mil)	1.5% (2015)*	Comparative data unavailable but a <b>decrease</b> in numbers of formal LTC workers between 2010-2017 - from 184,540 to 139,572 workers – a decrease of 27%					
OECD11 (2011) OECD14 (2015)	1.6%  1.7%*						

Sources: OECD *Health at a Glance* 2013, 2017\*; OECD *LTC Resources & Utilisation*

# Promising Policies to date...

## New Zealand

- 'Alliancing' framework → collaboration between providers
- Clear career structure & increased pay via pay equity settlement
- Paid travel time & improvements in working time conditions

## Scotland??

- Outcome-based care standards
- Care Inspectorate audits and public reporting
- Registration of care workers
- *Health and Care (Staffing) (Scotland) Act 2019* - duty on care services to ensure, along with quality care & safety, appropriate staffing (inc effects on staff wellbeing)

# NZ: Equal Pay Increases & New Career Structure Linked to Quals

Personal Care Assistant/Home Care Worker	2012	2018 (2021)
Level 1: No quals	\$13.50 NMW (\$14.50)	\$19.80 (\$21.50)
Level 2: NZ Cert 2 (Induction training 7 months)		\$21.00 (\$23.00)
Level 3: NZ Cert 3 (Training over 12 months)		\$22.50 (\$25.00)
Level 4: NZ Cert 4 (Advanced support training over 12 months)		\$24.50 (\$27.00)

## + Changes to Working Time Conditions...

Conditions	2017-2018
Travel time between clients + associated fuel costs	Workers paid @ min wage for av travel time under 15ks (8.5 mins) and for time spent in 'exceptional' travel 15ks+ Govt funding \$36.2 million in 2015/2016 + \$38.6 million in 2016/17
Cancellation of Visits	Paid at worker's ordinary time rate where visit cancelled <48 hours before scheduled visit Funded by MoH + on costs of 21.7%
Guaranteed minimum hours	80% of average hours over last 3 months/ regular additional hours over 6 weeks can be added + availability allowance

'equal pay' more than increase in hourly rate. Also crucial are:

- *number* of paid hours worked (inc travel time) +
- *predictable* scheduling of time

But some implementation issues...



# Some Promising Practices so far...

- Senior care mentors in home care (Aus)
- Full-time work contracts in home care (Aus)
- Integration of frontline staff in care plans/reviews in home care (Aus & NZ)
- Household model in residential care (Aus & NZ)
- Use of gardens /outside spaces in residential care (Aus & NZ)
- Integration of kitchen staff in meeting resident needs in residential care (Aust)

# Home Care Policy in Australia & New Zealand

AREA	AUSTRALIA	NEW ZEALAND
Responsibility	National – Department of Health	National - Ministry of Health
Funding administration	Centralised	Devolved to 20 District Health Boards
Funding	Individualised Funding – Consumer-Directed Care ‘packages’ follow clients	Block funding to providers – Tender processes in some DHBs
Philosophy/priorities	Competition, ‘choice and control’	Collaboration, partnerships, ‘alliancing’
Cost – Personal care	\$10.54 pd + means-tested fee (eg \$15.15 pd on \$40k annual income)	Free
Cost - Household support		Free to community service card holders
Access/waiting list	<2 yrs waiting list for Level 4 packages (highest)	Varies between DHBs – none in CS 1 & 2
Home Care Standards	More process-focused: standards met/not met; more focus on health KPIs	Home & Community Support Standard audits - More outcomes-focused

Sources: Department of Health 2019, [myagedcare.gov.au](http://myagedcare.gov.au); Director-General’s Reference Group for In-Between Travel 2015,

# System-driven competition / collaboration

## Australia: A Competition Model

*Now pre-open market, we have people queued, and because the social good of the system is still working where providers and discharge planners and social workers and all the people that used to make up a social network in the area, we were communicating with each other... We pulled everyone through really quickly.*

*Well on the 27th of February midnight, that stopped, suddenly we're all in competition with each other...*

*[it became] "I'm not going to share..., because I actually want to grab whoever's next on the list and, so that networking stopped..."*

*It is very difficult to plan in the new market*

Senior manager – CS 3

## New Zealand: An Alliance Model

*It was a huge change... giving away the DHB's control over the allocation of hours and money, giving that to providers, giving the provider the assessment role... And then the concept of getting everybody to sit around the table. [The model of alliance] ... has in it a shared risk approach...*

*over the course of the first two years we made quite a lot of progress and now we are really open... All client volume information is shared. There's some really robust conversations ...*

*The way the referrals are managed are essentially it goes one, one, one, one. Unless there is a client asking for a particular provider... it's reasonably shared. Senior manager – CS 1*

# Working time: Org policies & protective practices

## CS 1 (NZ) General

- Paid monthly meetings for support worker teams
- Responsive and localised support for workers out in field
- Worker flexibility to respond to client's preferences/advocate for clients

## CS 2 (NZ) Ethno-specific

- FT jobs to 'professionalise' the workforce + reliever pool to reduce schedule changes
- Strong external relationships with DHB assessors/regular client reviews, also initiated by HCWs
- Field co-ordinators support workers manage time and care issues with clients

## CS 3 (Aust)

- Org 'work arounds' of CDC – eg 'primary care worker' role enables HCWs to be involved in client care plans
- Managers offer clients 'choice': same worker or regular time to stabilise worker rosters
- Client demand (due to location) provides opportunity to offer FT work

# National policy regimes shape work organisation...

- Spatial arrangement of home care regime crucial
  - NZ: devolved system = proximity and responsiveness to providers
    - Devolved autonomy from MoH to DHB to agency to worker
  - Australia: distance from providers + DoH lack of responsiveness
    - Encourages CS 3 'work arounds' + location in fast growing outer suburbs = (some) inflexibilities of CDC on rostering modified
- Degree of individualisation of home care regime shapes time autonomy
  - NZ: block funding; personal care not means-tested; more outcomes focused
    - Location of assessment staff in agency facilitated involvement of workers in responding to changing client needs for time to care
  - Australia: CDC task-based, itemised & time limited - set within the confines of 'package' – CDC system doesn't 'count' support for work of HC, pushing cost onto agencies, workers & clients
    - Care plans inflexible tho CS 3 modifications allow workers to be involved in care plan review
- Role of organisations in buffering system risks is critical but not sufficient
  - Time inflexibilities/rigidities and underfunding of home care service delivery still shifted onto home care workers

# Australia: Royal Commission into Aged Care Quality & Safety

- Media focus on abuse & neglect in several aged care services → Royal Commission called in November 2018.
- Initial focus on individual 'bad' organisations & 'bad' workers has slowly shifted to a focus on the wider aged care system:

*'Fundamental change to the regulatory system for aged care is needed. We submit that piecemeal adjustments and improvements are unlikely to achieve what is required... A philosophical shift is required, placing the people receiving care at the centre of quality and safety regulation. A person-centred approach to regulation would place the needs and aspirations of care recipients at its centre. It would have regard not only to the older person but their family and the important people in their life. It would recognise the importance of the relationship between the older person and their care workers.'*

Peter Gray QC, Counsel Assisting, 9 August 2019

# Resources & References

## Websites

- Decent Work Good Care website: [decentworkgoodcare.com.au](http://decentworkgoodcare.com.au)
- Quality Jobs Quality Care Toolkit: [www.qualityjobsqualitycare.com.au](http://www.qualityjobsqualitycare.com.au)
- Re-imagining Long-term Residential Care: International Promising Practices <http://reltc.apps01.yorku.ca>

## Articles/booklets

- Armstrong, P (2015) 'Conclusion: Where do we go from here?' in Baines, D & Armstrong P (eds) *Promising Practices in Long Term Care: Ideas Worth Sharing* [https://www.policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2015/12/Promising\\_Practices\\_in\\_Long\\_Term\\_Care.pdf](https://www.policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2015/12/Promising_Practices_in_Long_Term_Care.pdf)
- Armstrong P & Lowdes, R (eds) (2018) *Negotiating Tensions in Long-Term Residential Care: Ideas Worth Sharing* <https://www.policyalternatives.ca/sites/default/files/uploads/publications/National%20Office/2018/05/Negotiating%20Tensions.pdf>
- Baines, D & Armstrong P (2019) 'Promising Practices in Long Term Care: Can Work Treat Both Residents and Providers with Dignity and Respect?' *Social Work & Policy Studies: Social Justice, Practice and Theory*, 1(1). <https://openjournals.library.sydney.edu.au/index.php/SWPS/article/view/11736/11519>

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