We all know Australia has an ageing population, which means a growing demand for aged care health services. Which is why it seems incomprehensible that the government would rip $1.2 billion from the aged care sector—and yet that’s just what they have done.

The cuts to the forecast growth of the Aged Care Funding Instrument is all in the name of ‘stabilising’ government subsidies paid to aged care providers, following higher than expected growth in spending.

Impact will be felt long-term
The instrument takes into account the frailty of patients to determine how much funding is given to individual aged care providers.
The government says the measure is all about preventing claims that deliberately rort the system.
In reality, this will unfortunately mean funding reductions, particularly in the areas of complex health care, including dementia care.
As this is a cut to the forecasted growth of funding, it will ultimately impact aged care providers over the next three to four years.
And as providers have not employed adequate numbers of Registered Nurses over the past few years, the cuts will further impact the capacity of providers to attract the numbers of Registered and Enrolled Nurses required to deliver complex care.

We cannot afford more cuts
Nurses working in aged care facilities are rightfully troubled by this announcement.
The $1.2 billion proposed cut will follow the $800 million that has already been ripped from the sector in the government’s previous two budgets, according to an ABC report.
And no matter how the government attempts to justify their announcement, a cut of this magnitude to a sector already at breaking point will inevitably be felt by nurses and those in their care.
Aged care nurses are already stretched to the limit, with some RNs being required to care for more than 100 residents on every shift.
The only long term outcome of inadequate funding will be deterioration in the overall quality of care provided for our elderly Australians.
Providers must shoulder some of the blame
For many years, providers have been replacing RNs with cheaper unregulated carers and directing them to administer scheduled medicines (under the guise of ‘assisting’). Providers are also directing unregulated carers to do other nursing work such as taking examination observations like blood pressures, or managing the day-to-day cares for residents in dementia units.
This has allowed providers to continue increasing their complex health care funding without also increasing their staffing, skill mix or care hours.
Aged care regulators are not blind to this. They know providers are using unregulated carers to deliver complex health care and yet still claim the subsidies for care that used to be delivered by RNs, all the while increasing their profits.
In fact, according to the Bentley report, profits of aged care homes increased by 40% in 2015, while operators cut the care hours provided by nurses.
It’s little wonder regulators think providers are claiming too much for what they deliver.
However, reducing the funding is not the answer.

Call for leadership on aged care
We need a federal government that tackles the staffing and funding issues head on by mandating that complex health care must be delivered by RNs and ENs.
We need a government that ensures providers employ an RN on every shift and that they receive comparative wages and working conditions.
And we need a government that mandates nurse-to-resident ratios in every aged care facility. These steps will go a long way to securing the future of safe, quality aged care for the nation.

Aged care a focus for election
Adequate funding to boost nursing numbers is one of the QNU’s key priorities this election.
Our Ratios Save Lives campaign to establish minimum ratios in public hospitals has always been a starting point, and we believe it should extend to aged care and private facilities as well.
QNU members have spoken loud and clear about the problems currently facing nurses working in aged care facilities.

“[Aged care facilities] are like a production line with no time to care properly, shower, dry, cream and assess skin,” said one nurse in her response to a QNU survey on ratios.
“I am unable to give clients enough one-on-one attention that they deserve to assess and manage their particular medical, physical and emotional needs,” said another nurse.

Patient care must be priority
According to the Australian Nursing and Midwifery Federation, there is currently a shortfall of 20,000 nurses across Australia to care for elderly patients.
QNU Secretary Beth Mohle said the situation would only get worse unless we act to restore vital funding and services and provide our nurses with proper support.
“At a time where nurses are spread dangerously thin with unmanageable workloads, it’s troubling that the government’s solution is to cut more than a billion dollars from the sector,” Beth said.
“‘The cut is driven purely by financial interests and shows the government has no plan to address the challenges facing our ageing population beyond focusing on the budget bottom dollar.”

WE NEED A FEDERAL GOVERNMENT THAT TACKLES THE STAFFING AND FUNDING ISSUES HEAD ON BY MANDATING THAT COMPLEX HEALTH CARE MUST BE DELIVERED BY RNS AND ENS.