

# The Medical Journal of Australia • MJA

# MEDIA RELEASE

## **ALMOST 60% OF AUSTRALIAN AGED CARE RESIDENTS LIVE IN INADEQUATELY STAFFED FACILITIES**

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MORE than half of all Australian aged care residents are in facilities that have inadequate staffing levels, and only 1.3% are in facilities with staffing levels considered to be best practice, according to the authors of a Perspective published online today by the Medical Journal of Australia.

Professor Kathy Eagar, Director of the Australian Health Services Research Institute at the University of Wollongong, and colleagues were tasked by the Royal Commission into Aged Care Quality and Safety to conduct a review of staffing levels in residential aged care facilities (RACFs).

“This involved a review of staffing standards internationally and an assessment of current Australian staffing levels against international and national standards,” Eagar and colleagues wrote. “We found that the five-star rating system used in the US by the Centers for Medicare and Medicaid Services (CMS) is the most relevant system internationally for judging aged care in Australia. It has a strong evidence base and has been in widespread use for nearly 20 years.

“Research into the CMS system found that homes are more likely to ‘experience quality concerns’ when staffing levels fall below a certain level. This threshold is equivalent to the minimum requirement for a three-star rating (ie, 30 minutes of registered nurse time and 215 minutes of total time per resident, per day). Therefore, we determined that anything less than three stars is inadequate for Australian RACFs.”

Using the CMS rating system, the authors found the following:

- more than half of all Australian aged care residents (57.6%) are in RACFs that have inadequate (one or two stars) staffing levels
- a little over a quarter (27.0%) are in RACFs that have three stars;
- 14.1% of residents are in RACFs with four stars; and,
- 1.3% are in RACFs with five stars.

“Bringing all RACFs in Australia up to at least three stars would require an average staffing increase of 37.3% in those RACFs currently rated one or two stars, which would result in an overall increase of 20% in total care staffing across Australia,” Eagar and colleagues wrote.

“Achieving four stars would increase total staffing by 37.2% and five stars by 49.4%. Importantly, these increases are total numbers for the sector as a whole and need to be adjusted according to the mix of residents when applied to individual RACFs.

“The existing system has failed to ensure residents uniformly receive quality care. Some residents receive excellent care. Too many others don’t.

“It is no longer acceptable to describe RACFs simply as a person’s home or for advocates to argue that what is required is a social model of care delivered with a wellness philosophy.

“While on the surface it sounds attractive and in line with what consumers want, the evidence from the Royal Commission is that these arguments are now being used as a justification for inadequate care.”

Eagar and colleagues concluded that “residents in Australian RACFs have a right to be safe and to receive clinically competent and adequate care”.

“This care needs to be provided within a non-institutional environment that is respectful of individual choices and affords every resident the opportunity to be meaningfully engaged to the extent possible.

“There does not need to be a trade-off between a social model of care and a clinically competent model. Aged care residents have a right to both and do not have the time to wait.”

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