Submission by the Australian Nursing and Midwifery Federation

First Nations Aged Care Commissioner

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Australian Nursing and Midwifery Federation / First Nations Aged Care Commissioner

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Introduction

- The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of more than 326,000 nurses, midwives and care-workers across the country.
- 2. Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. We work with them to improve their ability to deliver safe and best practice care in each one of these settings, fulfil their professional goals and achieve a healthy work/life balance.
- 3. Our strong and growing membership and integrated role as both a trade union and professional organisation provides us with a complete understanding of all aspects of the nursing and midwifery professions and see us uniquely placed to defend and advance our professions.
- 4. Through our work with members, we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.
- 5. The ANMF thanks the Interim First Nations Aged Care Commissioner (the Commissioner) for the opportunity to provide feedback on ensuring there is an aged care system that, for First Nations peoples, is accessible, available in community and on country of a person's choosing, culturally safe and appropriate, sustainable and with oversight from an independent, permanent statutory First Nations Aged Care Commissioner.
- 6. The ANMF recognises that Aboriginal and Torres Strait Islander controlled and led care is critical to the provision of culturally safe and trauma-informed care. The ANMF advocates for the attraction and retention of Aboriginal and Torres Strait Islander health and care workforces, with fair and equal wages, decent working conditions, and funding for education and training. The design and implementation of policy for the development of an aged care Aboriginal and Torres Strait Islander workforce must always be First Nations led and co-designed.
- 7. The ANMF recognises the historical traumas and ongoing social and economic impacts of colonisation faced by ageing and older Aboriginal and Torres Strait Islander people. These are reflected in the inequities and significant barriers faced by First Nations people when accessing safe, high-quality aged care as, when and where it is needed. Given the ANMFs expertise as a trade union and professional organisation, this submission will largely focus on the role of the aged care workforce in delivering the best possible outcomes for ageing and older Aboriginal and Torres Strait Islander people. However, we acknowledge that it is written in the context of these broader social and economic complexities and structural disadvantages which the aged care system, and Government and wider society, must face and grapple with.

The Workforce

- 8. The ANMF shares the views of other sector stakeholders that training and developing the Aboriginal and Torres Strait Islander direct care workforce will not only attract and retain more First Nations people to work in the sector, but it will also benefit the sustainability of, and therefore accessibility to, First Nations providers and services.
- 9. The Royal Commission into Aged Care Quality and Safety found that, 'In the same way that Aboriginal and Torres Strait Islander people prefer to receive care from organisations that have



ties to their own local communities, they often have a strong preference for face-to-face care being provided by other Aboriginal and Torres Strait Islander people.'¹ Evidence shows that staff, including management, who are recruited locally i.e. from the community in which the service is run or to which the majority of residents/participants belong, provide culturally safe, best practice care.²

10. Aboriginal and Torres Strait Islander aged care workers can often face compounding barriers to attraction and retention. The ongoing workforce challenges faced by the sector, including historically undervalued and low-paid work, job insecurity, and poor training and education pathways, can be exacerbated at the intersections with racism, trauma, and other systemic barriers causing inaccessibility to education and employment.

Data and an Aboriginal and Torres Strait Islander Aged Care Workforce Plan

11. While there are data gaps for the Aboriginal and Torres Strait Islander aged care workforce, general census data shows the largest number of Indigenous employees are nurses and midwives, followed by nursing support and personal care workers, and Aboriginal and Torres Strait Islander Health Workers.³ The ANMF supports the recommendation of the Royal Commission for the First Nations Commissioner to collate and analyse a comprehensive data set for the Aboriginal and Torres Strait Islander aged care workforce.⁴ Better data would inform a 'comprehensive national Aboriginal and Torres Strait Islander Aged Care Workforce Plan'⁵, the development of which should be an urgent priority for Government and the Department of Health and Aged Care.

Appropriate and Safe Assessment Services

- 12. Aged Care Assessment Teams and Regional Assessment Services are delivered by senior and highly experienced nurses, allied health professionals and geriatricians. The expertise of these multidisciplinary teams is invaluable. High-quality assessment services are critical to older people, who face the compounding stressors of entering the complex aged care system at the time they are experiencing acute or continuing decline of their health and wellbeing.
- 13. For Aboriginal and Torres Strait Islander people, the transition to aged care can also be beset by a deep distrust of government and institutions, caused by experiences of marginalisation, discrimination, disadvantage and racism.⁶ The ANMF supports the recommendations of NAGATSIAC and the Royal Commission to establish and fund Indigenous-specific assessment pathways, delivered wherever possible by Indigenous Assessors.⁷
- 14. The ANMF opposes the Government's current policy to privatise assessment services, however we acknowledge that this policy shift is now underway. We recommend that aged care providers now undertaking assessments have a mandatory requirement to employ Aboriginal and Torres Strait Islander Assessors wherever available and necessary to services provided, and that all assessors receive cultural safety and trauma-informed training. Such training and conditions

¹ Royal Commission into Aged Care Quality and Safety, *Final Report: Care, Dignity and Respect*, Volume 3A, 2021, p. 258. ² Ibid, p. 260.

³ Australian Government, Australian Institute of Health and Welfare, National Indigenous Australians Agency, Aboriginal and Torres Strait Islander Health Performance Framework, Tier 3.12 Aboriginal and Torres Strait Islander people in the health workforce, Canberra, 2020, <u>https://www.indigenoushpf.gov.au/measures/3-12-aboriginal-and-torres-strait-islander-people</u>, (accessed 26 June 2024).

⁴ Royal Commission into Aged Care Quality and Safety, *Final Report: Care, Dignity and Respect*, Volume 3A, 2021, p. 259.

⁵lbid, p. 261.

⁶ Ibid, p. 248.

⁷ Ibid, pp. 249-250, and National Advisory Group for Aboriginal and Torres Strait Islander Aged Care, 'Our Care, Our Way, Our Future: Transforming care pathways for Aboriginal and Torres Strait Islander Elders 5-Year Plan for Aboriginal and Torres Strait Islander Aged Care (2021–2026)', *National Advisory Group for Aboriginal and Torres Strait Islander Aged Care*, Melbourne, VIC, 2021, p. 12,

https://natsiaacc.org.au/wp-content/uploads/2023/01/Our-Care-Our-Way-Our-Future-5-YEAR-PLAN-16-June-2021-FINAL-1.pdf, (accessed 27 June 2024).



should also be applied to state and territory health services carrying out assessments, noting that important cultural safety measures in the aged care assessment framework have not been consistently implemented or enforced previously.⁸

Mandatory qualifications and ongoing training

- 15. The ANMF supports the recommendation of the Indigenous Urban Health Institute (IUHI) to 'implement policy to train every Aboriginal and Torres Strait Islander direct care worker in the Certificate III in Individual Support, to drive a consistent quality standard of service to Indigenous Elders'.⁹ The Institute has also adapted training materials, so they are culturally appropriate and provides Indigenous Mentors who maintain a personal, direct relationship with all students.¹⁰ We support recommendations from the IUHI that funding must be provided to cover education, training and mentoring costs.
- 16. The ANMF advocates for a personal care worker registration and accreditation scheme in aged care, recognising it as one mechanism through which workers can attain qualifications and access ongoing professional development. Such a scheme, with the mandatory minimum qualification of Certificate III, would also provide workers with visibility for wage and career progression, including into nursing professions.
- 17. The scheme's design and implementation for Aboriginal and Torres Strait Islander workers must be done in the terms recommended by IUHI and with ongoing co-design and collaboration with representatives from the Aboriginal and Torres Strait Islander aged care workforce, and Aboriginal and Torres Strait Islander education, aged care and government advisory groups and individuals. At a minimum, this should include the IUHI, NAGATSIAC and the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM).
- 18. Nurses, and other health practitioners in aged care must be enabled to work to their full scope of practice. Career pathway and qualification recognition opportunities must be equally available and inclusive of Aboriginal and Torres Strait Islander nurses. The First Nations aged care workforce is vital to support ageing on and return to country.

Aboriginal and Torres Strait Islander content in education and training

- 19. The CATSINaM has made important recommendations regarding education and training for Aboriginal and Torres Strait Islander nurses. The ANMF supports their calls for mandatory Aboriginal and Torres Strait Islander content on health, history, and culture, and on cultural safety (discussed further below), in all education and training programs leading to nursing registration and nursing endorsement, along with continuing professional development and lifelong learning activities for the purposes of meeting mandatory continuing education requirements by the Nursing and Midwifery Board of Australia.
- 20. The ANMF recognises that providing Aboriginal and Torres Strait Islander people with equal access to nursing education and aged care nursing careers requires Government initiatives and incentives. Concerted efforts between local, state and national governments and relevant education and health agencies will be required to develop appropriate curriculum and policy. Aboriginal and Torres Strait Islander nurses must be involved in the development of accreditation standards for nursing curricula. The Commissioner's office has an important role to play in

⁸ Ibid, p. 12.

⁹ Ibid, p. 21. ¹⁰ Ibid.



bringing stakeholders together and facilitating aged care nursing workforce development discussions and policy design, including on education.

Culturally safe and trauma informed care

- 21. The aged care workforce is culturally and linguistically diverse, just as the people accessing aged care services are too. Despite this diversity, cultural safety and trauma informed training is not consistently delivered. The absence of mandated qualifications and ongoing training for large cohorts of the aged care workforce i.e. personal care workers and assistants in nursing, means that content on Aboriginal and Torres Strait Islander health, history, and culture (as discussed above) is largely absent from aged care education. This must be addressed as a matter of priority.
- 22. All aged care stakeholders involved in care delivery, not just direct care staff of services, must undertake such training. Cultural safety and trauma informed training and education for aged care workers should be delivered with concerted efforts from training and service providers and supported by Government funding so workers do not bear the cost. Non-direct care staff, management, governing persons, staff of the Department, the Regulator and relevant Ministerial offices should also be required to undertake cultural safety training. Training should be developed to be local and reflect that 'connections to culture or Country are [not] uniform for all Aboriginal and Torres Strait Islander people and that cultures are dynamic, not static'.¹¹
- 23. Providing cultural awareness, safety and trauma-informed training will have myriad and complementary benefits. Aboriginal and Torres Strait Islander people will begin receiving aged care services suitable to their cultural identity, practices and preferences, and which appropriately considers and addresses intergenerational trauma, racism and discrimination. Appropriate training will also raise awareness and facilitate best practice care amongst non-Aboriginal and Torres Strait Islander aged care workers. Implementing training and policy to overcome systemic racism will create safer workplaces for First Nations and other culturally and linguistically diverse workers.

An independent, permanent statutory First Nations Commissioner

- 24. The ANMF welcomes the appointment of the Interim First Nations Aged Care Commissioner. The role and its office have a critical role to play in oversight of the aged care sector, ensuring it is culturally aware, safe and part of the efforts to closing the gaps for ageing and older First Nations people. However, as expressed in our submission on the Exposure Draft for a new Aged Care Act, the ANMF is concerned that under relevant legislation, the First Nations Commissioner would be reportable to the Aged Care Quality and Safety Commissioner.
- 25. We recommend this role be independent of the ACQS Commissioner, given the potential for conflict of interest. We also argue that the role has its own independent statutory powers and framework included in the Act. This is necessary to ensure that information and complaints handled by the Commissioner is considered independently, has a framework protected in legislation, and can conduct meaningful compliance and enforcement activities. An independent and permanent First Nations Aged Care Commissioner would ensure transparency.

¹¹ Royal Commission into Aged Care Quality and Safety, Final Report: Care, Dignity and Respect, Volume 3A, 2021, p. 249.