



**Dementia
Australia™**

Aged Services Industry Reference Committee

The Reimagined Personal Care Worker

Dementia Australia

27 July 2020

About Dementia Australia

Dementia Australia (formerly known as Alzheimer's Australia) is the peak, non-profit organisation for people with dementia and their families and carers. We represent the more than 459,000 Australians living with dementia and the estimated 1.6 million Australians involved in their care.

Dementia Australia works with people of all ages impacted by dementia, all governments, and other key stakeholders to ensure that people with all forms of dementia, their families and carers are appropriately supported – at work, at home (including residential aged care) or in their local community.

Our close engagement with individuals and communities means that we can advocate for those impacted by dementia and we are also well placed to provide input on policy matters, identify service gaps and draw on our expertise to collaborate with a wide range of stakeholders, including researchers, technology experts and providers.

In addition to advocating for the needs of people of all ages living with all types of dementia, and for their families and carers, Dementia Australia provides support services, education and information aimed at addressing the gaps in mainstream services.

Dementia Australia is a member of Alzheimer's Disease International, the umbrella organisation of dementia associations around the world.

Introduction

Dementia Australia welcomes the opportunity to provide our comments on the Reimagined Personal Care Worker discussion paper, looking at what the role of personal care workers (PCW) should be moving forward, with a specific focus the following three areas:

- The breadth of care recipients' needs
- The range and complexity of the skills and capabilities required to meet those needs
- The extent to which an individual worker can meet those needs versus the scope of the role as part of a multi-disciplinary team.

Before addressing some of the questions posed in this consultation, Dementia Australia would like to make the following overarching comments about the future of personal care workers.

Dementia Australia strongly advocates for any restructures in qualifications, skills and training for PCWs be developed in the context of the [Human Rights Approach to Ageing and Health](#), which focuses on a person centred framework being meaningfully connected to practice. Consumers are the central point around which the workforce should be supported to build their capacity to deliver consistent high-quality care. Building workforce capacity is key, which we have documented in our communique [Our Solution: Quality care for people with dementia](#).

The next issue to consider is that of the attracting sufficient appropriately skilled and qualified workers given the projected growth in demand. It is currently already challenging to attract aged care workers into the industry and it is important that, in any redesign of roles and responsibilities, there are not resultant unintended consequences or further barriers to people taking on aged care roles. The PCW of the future will need to work differently to those currently, with greater flexibility in the structure of their role and improved competence and capacity with new and emerging technologies. They will also need to be supported to effectively meet the care needs of the 'baby boomer' generation and in that will be a greater expectation on consumer directed care.

Additionally, raising the bar on quality, support and education for PCWs will have an implication for the cost of care. The question then arises: who pays? How much is government going to pay? How much are providers going to pay? How much are individual workers going to pay? And how much cost is potentially going to be passed onto the consumer? These questions need to give consideration and clarity provided around how much consumers ought to pay to receive higher quality care, because both the sector and government will not be able to meet the increased costs.

Further consideration should also be given to the issue of supporting existing workers. Their current employment and existing education status should not be a barrier for aged care workers already delivering quality care within the sector, noting that many will not have all the necessary qualifications or meet emerging requirements. Recognition of prior learning, minimum qualifications and ongoing professional development ought to be considered for current as well as new workers moving into the future. The existing workforce may also need additional support to transition to any new processes/policies put in place as well as redesigned jobs. Consistency around approach will be important as allowing for local

variation could mean inconsistent levels of quality, rather than achieving greater consistency in the quality of aged care nationally.

As such, consideration of the personal qualities displayed by aged care workers will become increasingly important; for example does the person demonstrate patience, compassion and empathy? These are skills that cannot easily be taught through a qualification, but they are key attributes to being a competent worker in the aged care sector, both now and in the future. Of course, the challenge of monitoring 'soft skills' is regulating and monitoring the consistent application of these attributes. It would be worth exploring the roles of both the Aged Care Quality and Safety Commission as well as the Australian Health Practitioner Regulation Agency (AHPRA).

In this exploration of the reimagined PCW, it will be important to consider how older people want to be supported into the future but equally, it is difficult to predict this at this point in time as the context is ever changing. Consequently, it is difficult to know what an aged care worker of the future requires to fulfil their role and meet needs. Our response to this paper therefore is an educated speculation based on what could be and what skillset may be required to meet such needs.

The role of PCWs in the future and meeting the key needs of people living with dementia, their families and carers

The role of PCWs in the future will be to increasingly meet the individualised care needs of the person. This comes down to delivering high quality person centred care, where the PCW knows the person they are caring for and how to meet their unique care needs. There will be a requirement of PCWs to increase their capacity to understand each individual they are caring for, not just in terms of health care needs, but also playing a key role in helping people realise their social needs as well. This might include participating in physical activities with the person being cared for, or going to a community based class or workshop.

“There needs to be a commitment to individualised tailored services and care.” - Person living with dementia

“People living with dementia need to feel safe and supported physically and emotionally and be treated with kindness, empathy and respect as the individuals they are. They should be encouraged in their own self-care, be involved in decisions about their care and be able to contribute their own preferences in relation to it. People with dementia need to have meaningful purpose in their lives and good social relationships with the people caring for them.” – Carer

The role of family members or carers will also play a key role in how PCWs deliver care to people living with dementia in the future. With an increasing preference of people wanting to

be cared for in their homes, the PCW will greatly benefit from working more closely and in partnership with family carers.

“Family members and carers know their family member better than anyone and must be consulted and communicated with as an invaluable source of information so that PCWs and other health workers may know the person they care for as well as they possibly can.” – Carer

The PCW will be required to make meaningful connections with the people they are caring for and help them remain engaged and socially connected within the community. The role will not solely be about care; connectedness will become increasingly important. It requires a different skillset to the current one in terms of building interpersonal skills and relationships.

“One the key needs for people living with dementia is the key issue around communication and our ability to take in and understand language.” – Person living with dementia

As such, the PCW of the future will need both confidence and competence in building relationships in the broader community to address issues around isolation, discrimination, meaningful engagement, and participation. There will be a greater emphasis on keeping the consumer happy (client satisfaction).

“A person receiving aged care services, their families and carers should be treated by trained staff members particularly those who have knowledge of dementia care and have the right empathy, imagination and communication skills.” – Former carer

Additionally, with the changing demographics in ageing and people living for longer, there is a greater likelihood that people will have co-morbidities, which will change the nature in which care is delivered and received. There will be a requirement of PCWs to have a greater level of expertise to support someone with multiple health complaints. This will require more knowledge and skills than PCWs have at present. The bar will need to be raised by PCWs in this context.

“Future roles of personal care workers will depend on their levels of training, not only in preparation for their roles, but also ongoing training that ensures that their skills base can continue to be expanded, and their value to their employing organisation enhanced.” – Carer

As previously mentioned, there is a growing trend towards people wanting to age in place and receive home based aged care. As such, the PCW of the future will need to adapt to providing care in less formal service environments. There will be a requirement of workers to work in more unstructured ways where they create their own boundaries and frameworks to maintain a personal and professional balance. The experience of this for the consumer may be about receiving a service that does not feel like a service, but rather supports people as individuals to live a life the best way they can choose.

“Because in-home care is delivered in an unsupervised and largely unsupported venue, only experienced workers should be employed here. However, they do need to be able to call on staff with greater or different levels of knowledge, should any situation develop that is outside of their capacity.” – Carer

Additionally, consumers will have a greater responsibility to purchase services tailored to their needs and with this comes a greater focus on customer service skills among PCWs.

They will need to work with more autonomy that sits outside formal services structures as we currently know them to be. They will need to have an understanding of the unique needs of people living with dementia, particularly that of loneliness and isolation and deliver supportive care that addresses this need.

Future carers should be committed to the task, understand the individual as well as the type of Dementia involved and be patient and proactive on the job. A caring individual who understands the changes which can occur and is prepared to learn how to deal with those needs – Former carer

The way PCWs communicate in terms of the style and approach to communication will also need to improve. There will be a greater need for PCWs to develop competence around non-verbal communication and how to effectively communicate with people living with dementia. This comes back to personalised care, with a greater need to address culturally safe care with continuing to employ a range of workers from various cultural and linguistic backgrounds. In doing so, there will be greater importance in ensuring PCWs have the appropriate English language proficiency to meet client needs. The care recipient will need to match the PCW to form relationships and address the cultural safety of the client.

“PCWs need to have basic English language, literacy and numeracy skills and understand CALD, Aboriginal and Torres Strait Islander and other minority groups.” – Person living with dementia

Required skills of the PCW to meet these needs

“To employ the multiplicity of skills necessary in dementia care, the PCWs must first be aware of the complex nature of dementia.” – Carer

There are many skills that the PCW of the future will require to meet the needs of people living with dementia, their families and carers. Specifically, they will need an interest and willingness to engage with others and strong interpersonal and relationship building skills. This extends to having an understanding of verbal and non-verbal communication and how best to support someone when verbal communication is limited or lacking.

“Special skills in deciphering what may be troubling someone with cognitive impairment, memory loss and often an inability to express what may be causing them distress takes a PCW a great deal of insight into that individual to alleviate the distress.” – Carer

PCWs will need to be flexible in their approach to delivering care and show a great level of respect for the clients they are caring for. Having a positive view of older people and seeing them as valuable participants of the community will help people stay connected and socially engaged in their communities.

PCWs will need to:

- Strong interpersonal and relationship building skills
- Understand the process of ageing

- Understand dementia
- Be competent with current and emerging technologies, including telehealth, and communicative technologies
- Hold minimum qualifications in dementia
- Have effective communication skills – both verbal and non-verbal
- Be proficient in English, both speaking and listening
- Have an understanding and show respect to different cultures and groups such as those who identify as LGBTIQ, CALD or Aboriginal and Torres Strait Islander
- Understand the principles of supportive care
- Have knowledge of medication management
- Participate in continuous education and upskilling in aged care

“PCWs need to be able to ascertain what degree of support they need to give a person living with dementia. They will need to be able to read reports, understand terminology used to describe a person’s situation, be able to ask appropriate questions and to actively listen in order to ascertain people’s needs.” – Carer

Additionally, there will need to be appropriate assessment, screening and selection processes that determine people have the right attitudes, aptitudes and values to work in aged care put in place. The role of the PCW is much more than technical skills, there are many softer skills required to fulfil this role. Other technical skills can be taught, but if someone is not the “right fit,” it can create many challenges.

“It is essential for the personal care worker to have ‘a level head,’ that is good judgement about what is needed in various situations, along with a measure of assertiveness to make their concerns heard.” – Carer

Due to the increasingly complex care needs of people living with dementia, and older people more generally, there will be a requirement of PCWs to improve knowledge about clinical issues. This will be particularly important as a growing number of older people are being cared for in their own home with more complex care needs. This will include knowing when to escalate things to clinical staff as well as having a greater capacity to perform low-level clinical practices.

“The role would need to be re-classified to reflect the responsibility placed on a capable worker in the T-shaped role (identified in the paper) that is someone with significant depth in the care of older people as well as a broad general knowledge in a range of other areas, or transdisciplinary.” – Carer

There will also be a requirement to build a generation of PCWs who are competent and confident with a greater level of professionalism. A key aspect of this is having professional judgement, and problem solving skills that sit behind this. These are not currently required of PCWs and there is a major piece missing for the workforce to meet the needs of people living with dementia. Indeed the current Certificate 3 level qualifications do not require the development of these skills.

“They would put my husband in the lifter but not explain to him what was happening, then he would get scared and lash out so they would restrain him. But all they had to do was speak to him, to his face instead of speaking behind him and say “we’re going on the swing.” – that sorted it out. He just needed supportive, personal care – someone to hold his hand -

sometimes you just need to sit there and hold their hand, so they feel they are not alone.” – Former carer

This example highlights a greater need for critical judgement and decision making of PCWs without needing to check in with their supervisor. These skills can be built through continuous professional development learnt on the job.

“The PCW can be given different tasks as they journey through their career, For example becoming assistants to Allied Health professionals, taking more responsibility for medication management, supervising/training new members of staff, spending more time one-on-one with residents forming relationships with them to know their needs and habits and subsequently improving their quality of life. Not being expected to do morning and afternoon teas -that is responsibility of hospitality staff.” – Carer

If we get to the stage of having a change in the culture in the aged care sector we may be able to have – The Right People with the Right Training in the Right Place At the Right Time with the Right Remuneration.” – Former carer

Key differences between the role of PCWs and a multidisciplinary team

The key difference between PCWs and multidisciplinary teams in the future will be less than it is at present because there will be a greater responsibility on PCWs in the way services will be delivered. That being, in the community rather than residential based care.

As the service environment setting is increasingly preferred toward home based care, PCWs could work semi-autonomously, while linking into work with other teams as required. This could include online mentoring and coaching in the application of new knowledge and skillsets. The PCW will need to raise clinical knowledge and problem solving skills, and there will be a requirement to work collaboratively with other clinical/allied health workers.

“PCWs will need to learn about what other specialists are available within the organisation where they work, and are able to call on these specialists at need.” – Carer

Both PCWs and multidisciplinary teams have an important role to play in the care for people living with dementia. There will need to be clear delineation of roles and responsibilities and an upskilling of the PCW to help improve their competence and confidence in caring for people living with dementia in the future.

“There is a need for a multidisciplinary team as there are so many different areas of care which require attention for a patient’s overall wellbeing.” – Carer

While there will be different training and skills base of each, PCWs are part of the team. All members of the team should be granted the capacity to learn from and with each other to enhance skills and capabilities. This would create an environment where the sum total of

learning and experience becomes greater than the individual, which could enhance quality of care and quality of life for the person living with dementia.

“Mixed-skills teams seem to give the greatest chance of meeting the complex needs of the consumer from a positive enablement perspective.” – Carer

In saying that, this needs to be a more regulated workforce because of the growing expectations placed on PCWs. This will be partly determined by the marketplace and what consumers will be seeking, and will often be more about values than skills. If PCWs are to operate in a more consumer directed workplace, will registration be something consumers seek or will it be softer skills? What consumers want will influence the importance of registration versus personal skills to meet needs.

“A multidisciplinary team might pick up on a range of different insights but what do they do with that? There is less scope for personal relationship but possibly multiple understandings of what is happening - what directions are going to be useful or not useful. The combination of both PCWs and multidisciplinary teams would be best.” – Carer

Conclusion

The current experience of people living with dementia and their families and carers affirms the need for improvements in the quality and focus of the current aged care workforce. Projecting forward with a growing ageing population, increased numbers of people living with dementia and changing consumer expectations the role of an aged care worker will most certainly change.

This submission provides some insights into how we might expect the future requirements for aged care workers to change. Having consumers at the centre of this and future discussions will be key to ensuring that the role is reimaged to better meet the needs of those living with dementia, their families and carers.