

National Aged Care Alliance Background Paper

Dementia and Aged Care

May 2003

Introduction

The National Aged Care Alliance (the Alliance) is a representative body of peak national organisations in aged care, including consumer groups, providers, unions and health professionals. The Alliance was formed in April 2000 to develop a united policy agenda to achieve better outcomes for the care of older Australians. The Alliance takes a broad view of the issues in aged care with a focus on residential and community care and the interdependence between the aged care sector and the health sector.

The Alliance's vision for aged care in Australia is that:

All people in Australia have access to planned and properly resourced, integrated quality aged care services that are flexible, equitable, that recognise diversity and promote choice and respect for users and workers.

Dementia and Aged Care

Currently the number of people in Australia with a diagnosis of moderate to severe dementia is estimated at over 160,000¹ – although as many people again may be in the early stages of dementia. By the middle of the 21st century it is predicted that over a half a million people in Australia will have dementia².

As the prevalence of dementia increases so does the importance of dementia as a cause of disability – dementia is set to become the largest cause of disability in Australia by 2016³.

Dementia has and will continue to have a significant impact on our community. The increasing numbers of those with dementia are a direct consequence of the ageing of the population. The frequency of dementia among people aged 60 is about 1% after which the prevalence doubles about every five years, to around 2% at age 65; 4% at age 70; 8% at age 75; 16% at age 80; and 32% at age 85. It is estimated that as many as two thirds of those in their nineties suffer from some form of dementia⁴.

1 Jorm A 2002 *Dementia: A Major Health Problem for Australia* Policy Paper 1 Alzheimer's Australia

2 Access Economics 2003 *The Dementia Epidemic: Economic Impact and Positive Solutions for Australia* prepared for Alzheimer's Australia Canberra p.1

3 Access Economics 2003 op cit p.80

4 Access Economics 2003 op cit p.31

About half of those people living with dementia are living in the community⁵. There is good evidence to show that the application of best practice carer education and support models can show significant benefits in terms of delay in admission to residential care. However, even with the provision of the best home services, for many people there comes a time when the transition to residential care is considered appropriate. Entry into residential care is better predicted by carer factors than by patient factors, possibly precipitated by adverse events (eg an accident or illness) or by carer burnout.

The end consequence is that dementia is a significant issue for residential care providers. Around 60% of people in Australia receiving high care and 30% of those receiving low care in residential aged care facilities have dementia. Some 90% and 54% respectively have an obvious cognitive impairment⁶.

Access Economics have estimated that dementia is the most expensive mental health item in Australia, costing \$3.2 billion in 2002. Of this amount a dominating factor is the cost of residential care (\$2.9 billion)⁷.

Dementia Care

Much has been achieved in recent years to provide better care for people with dementia, their carers and families. There has for example been a welcome expansion of respite services in recent years including for people with challenging behaviour through the Commonwealth's *National Respite for Carers* program as well as of community services more generally through the Home and Community Care Program. Again the funding provided to Alzheimer's Australia for the provision of *Living with Memory Loss* programs is breaking important new ground.

Despite this, consumers continue to report problems in accessing dementia services for people with challenging behaviours as evidenced in the Commonwealth Government's Two Year Review of Aged Care Reforms. This difficulty in accessing programs serves to heighten the trauma experienced by people with dementia, their families and carers at a most difficult time.

Among the priorities that the National Aged Care Alliance considers need to be tackled are:

1. Respite care that is tailored, timely, linked with other types of support, and provided by knowledgeable, skilled and flexible workers. Respite care is an essential part of dementia care.
2. Greater incentives to mainstream residential care providers to provide quality dementia care.

5 Access Economics 2003 p.29

6 Two Year Review of Aged Care Reforms (2001) AGPS p.216

7 Access Economics 2003 op cit p.1

3. An improved mix of capital/current funding to promote dementia specific care for people with challenging behaviours.
4. Adequate provision for those people with dementia and mental health issues who currently fall between the aged care and mental health systems.

A National Approach

Although dementia is an issue of central concern to aged care it impacts on every part of the health care and community service systems. There is as a consequence a need for a national approach to planning for the dementia epidemic and the action that is required. The National Aged Care Alliance supports dementia as a national health priority within a framework that covers dementia research, early diagnosis and best practice management to maintain an improved quality of life. In this way dementia can be recognised as a major health issue that goes beyond aged care and as requiring a coordinated approach by all levels of government.

The Alliance considers that the Federal Government should pursue a strategy that is designed to:

- Improve current and future service aged care provision for those people with dementia. Essentially this strand of the strategy would address those issues identified above in this paper.
- Promote demential research. The Alliance considers that the current official research effort on dementia – which could be as little as \$2.5 million, less than 1% of all NHMRC research expenditure – is an inadequate investment for the future⁸.

Recommendation

The National Aged Care Alliance recommends that the Federal Government should pursue with State and Territory Governments the adoption of dementia as a national health priority with a view to taking the action needed now to address the unfolding dementia epidemic.

Members of the Alliance

Aged & Community Services Australia; Alzheimer's Association Australia; Anglicare Australia; Australian Association of Gerontology; Australian Divisions of General Practice Ltd; Australian Liquor, Hospitality and Miscellaneous Workers Union; Australian Medical Association; Australian Nursing Federation; Australian Nursing Homes & Extended Care Association; Australian Pensioners & Superannuants Federation; Australian Physiotherapy Association; Australian Society for Geriatric Medicine; Baptist Care Australia; Carers Australia; Catholic Health Australia; Congress of Aboriginal and Torres Strait Islander Nurses; Council on the Ageing; Geriacton; Health Services Union of Australia; Lutheran Church of Australia; Pharmacy Guild of Australia; Royal Australian College of General Practitioners; Royal College of Nursing, Australia; UnitingCare Australia.

⁸ Access Economics 2003 op cit p.57