

Submission to the *Individual support, Ageing and Disability Support Draft 2 Validation* consultation.

July 2021

# Background

The Continence Foundation of Australia (the Foundation) welcomes the opportunity to respond to the Skills IQ consultation on *Individual Support, Ageing and Disability Support Draft 2*. The Foundation believes that systemic integration of safe and effective continence care and incontinence management into ageing and disability qualifications is fundamental to deliver person-centred care that empowers choice and treats consumers with dignity and respect.

## **Recommendations**

Following consultation on draft one, the inclusion of continence care as a core aspect within *CHCDIS024 – Provide specialised support* is most welcome. The Foundation also recognises continence-related terminology including *toileting, continence aids* and *assistive technology* has been included across various units of competency in the second draft. Despite this, there is still considerable room for improvement to translate existing task-focused care into genuinely personcentred continence care. To do this, safe and effective continence care and incontinence management must be integrated into all relevant aspects within the courses being reviewed.

The updates to *CHCDIS024 – Provide specialised support* in the Certificate IV in Disability Support provide a partial blueprint for how continence care should be incorporated into relevant aged care and disability units of competency. The inclusion of continence care in this unit across organisational policies and procedures, individualised and interdisciplinary care is essential to person-centred care but the unit remains incomplete. To ensure appropriate knowledge is demonstrated by students, performance criteria *3. Provide specialised continence care support* should be updated to include the following:

- Understanding individualised plans to identify continence care needs, preferences, tasks and specialised or individual programs (New criterion).
- Gather, check and prepare equipment and materials for continence care **following skin health and** infection control guidelines and according to individualised plan.

• Provide specialised continence care to meet individual needs and preferences and according to **the individual's continence care plan**, organisational policies and procedures.

• Performance criteria 3.4 to be split into two parts:

• Recognise and report irregular continence care situations according to organisational policies and procedures.

 Recognise, report and respond to changes in continence care situations according to organisational policies and procedures and the needs and preferences of the consumer.

The Foundation believes the inclusion of continence-related terminology in various units of competency, is necessary, but not sufficient to provide directions for care or support that meets individual needs. The Foundation has identified *CHCDIS024 – Provide specialised support* provides a starting point for integration of continence care into relevant units of competency, including in the following examples:

• CHCAGE013 Work effectively in aged care & CHCDIS021 Work effectively in disability support – Update Criteria 3.1 from 'Read individualised plans...' to 'Understand individualised plans to identify tasks and specialised or individual programs including toilet training/timing'.

• *CHCCCS031 Provide individualised support* – Add 'Re-enablement of continence' where 'toileting and the use of continence aids' is mentioned.

• *CHCSS0043 Support positive mealtime experiences* – Add additional performance criteria 'Implement strategies to manage mealtime issues' to *2. Improve mealtime experience* with aim of implementing toileting (as appropriate) before mealtime.

These are pragmatic changes across all qualifications in the training package that address high prevalence needs:

• A National Consumer Survey by the Foundation revealed that one in three people with disability experience incontinence.<sup>1</sup> This is likely considerably higher for people with disability requiring personal care provision.

- 75–81% of people in residential aged care settings live with incontinence (urinary and/or faecal) with most requiring high levels of assistance.<sup>2</sup>
- Rates of urinary incontinence for older home-care consumers ranges from 28-51%.<sup>3-5</sup>

With continence care comprising a large part of day-to-day tasks for care workers, it must be robustly embedded in the Certificate III in Individual Support, Certificate IV in Ageing Support and Certificate IV in Disability Support.

## The Foundation recommends:

• Incontinence is recognised as requiring both basic and specialised care and support and is sufficiently integrated into relevant units of competency across all qualifications.

• A unit of competency in continence care and management is introduced into the Certificate III in Individual Support and Certificate IV in Ageing Support as a compulsory elective.

• *CHCDIS024 – Provide specialised support* should become a compulsory elective in the Certificate IV in Disability Support.

The Foundation holds considerable concerns about the continued lack of appropriate integration of continence care in foundation courses for care workers resulting in unsafe and ineffective care provision. Data shows skill shortages of 25% and 33% respectively in residential aged care and home

care personal care workers.<sup>6</sup> Given the high prevalence of consumers with continence care needs and the large number of complaints<sup>7-10</sup>, the proportion with continence-related skills shortages would be far higher. Harm caused to older people by unsafe and ineffective continence care includes increased risk of urinary tract infections<sup>11,12</sup>, incontinence-associated dermatitis<sup>13,14</sup>, pressure injuries<sup>13,15</sup>, falls<sup>16-19</sup>, functional decline<sup>20</sup>, depression<sup>21</sup> and death.<sup>22</sup> Similarly, the lack of focus on continence across disability support units of competency means it is unlikely disability support workers hold appropriate skills to prevent these negative health consequences for consumers with higher support need.

To address the skills and knowledge gap, care workers will need a reference framework for best practice continence care and on-the-job training and professional development to fulfil their responsibilities. The Foundation has commissioned development of a Best Practice Model of Continence Care in Residential Aged Care, which is evidence-based and has been co-designed with aged care stakeholders. The Best Practice Model of Continence Care in Residential Aged Care is mapped to the Aged Care Quality Standards, and provides tools and guidelines for continence assessment and care planning that can be readily included in the training package units of competency and qualifications. The Aged Care Workforce Branch of the Department of Health has expressed interest in the Best Practice Model of Continence Care in Residential Aged Care as part of the Skills Development Program for Aged Care Staff project.

In response to ongoing care worker continence-related skill gaps, the Foundation has developed a suite of independent, evidence-based resources including online learning units, webinars and applications that build aged care and disability support worker capability. These can be utilised to support personal care workers with existing qualifications through developing a continence-related skill-set or 'micro-credential' to help close this skills gap.

#### The Foundation recommends:

- The *Best Practice Model of Continence Care in Residential Aged Care* is utilised as the frame of reference for developing a continence skillset for aged care qualifications.
- Independent, evidence-based resources are incorporated into the qualifications and units of competency across aged care and disability support for best practice continence care.
- Development of a continence-related knowledge and skill-set or 'micro-credential' for care workers with existing aged care or disability support qualifications.

Continence knowledge and skills is a vital part of a competent, person-centred workforce and it is fundamental that both the current and next generation of care workers are suitably qualified and trained in safe and effective continence care and incontinence management.

Please do not hesitate to contact me at <u>r.cockerell@continence.org.au</u> to discuss these recommendations or any other matter related to improved continence care.

Yours sincerely

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