



# **QUALITY AND POLICY IN NURSING HOMES IN AUSTRALIA: A CRITICAL DISCOURSE ANALYSIS**

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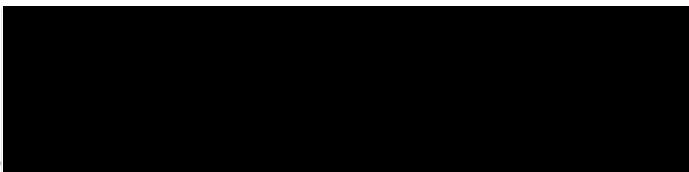
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I certify that the substance of this thesis has not already been submitted for any degree and is not currently being submitted for any other degree or qualification.

I certify that any help received in preparing this thesis, and all sources used, have been acknowledged in this thesis.

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Mary D. Courtney

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## **List of Abbreviations**

ABS	Australian Bureau of Statistics
ACAT	Aged Care Assessment Teams
ACOSS	Australian Council of Social Service
ACOTA	Australian Council on the Ageing
ACRS	Aged Care Reform Strategy
AGPS	Australian Government Publishing Service
AHMAC	Australian Health Ministers' Advisory Council
CADE	Confused and Disturbed Elderly
CAM	Care Aggregated Module
DCS	Department of Community Services
DCSH	Department of Community Services and Health
DHHCS	Department of Health, Housing and Community Services
DON	Director of Nursing
GAT	Geriatric Assessment Teams
HACC	Home and Community Care
NHMRC	National Health and Medical Research Council
OCRE	Other Costs and Reimbursement Expenditure Module
RCI	Resident Classification Instrument
RN	Registered Nurse
SAM	Standard Aggregated Module
TARCRAC	Training and Resource Centre for Residential Aged Care
WHO	World Health Organization



# Key to Transcripts

In the presentation of research findings of this study, and particularly in relation to excerpts from transcribed interviews, the following convention has been used:

22.10.93	Day, month, year of interview
RH7	names used to refer to participants
Text-unit:72	line number of text
...	omission of material
[square brackets]	words added by the researcher to provide clarity or explanation

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## Abstract

This study investigates the development and implementation of the Aged Care Reform Strategy, in particular, the Commonwealth Outcome Standards Policy and its subsequent impact on the quality of care provided in nursing homes. The aims of this research are to review the public discourse on aged care policy, to analyse the meaning of quality care for elderly people in nursing homes from the residents' viewpoint and to compare the residents' view of quality with that of care providers and policy-makers within the public discourse on aged care.

This thesis uses some of the principles surrounding a post-structural theoretical framework, namely, power/knowledge, language, subjectivity, space and normalisation technologies in the analysis of the meaning of quality of care for elderly people living in nursing homes. The framework is particularly informed by the work of Foucault (1972, 1975, 1977, 1979a, 1980). Ethnographic research tools (participant observation and key informant interviews) and discourse analysis were used to collect data. In line with Foucault's analytical framework as presented in *The Archaeology of Knowledge* (1972), discourse analysis is used in order to derive central themes from the written and spoken discourse.

The findings of this research will not only contribute to the understanding of quality and how it might be more effectively operationalised within the nursing home industry in Australia, but will also assist in the identification of a number of implications for policy-makers and care providers. It is not the intention of this thesis to evaluate the Commonwealth Outcome Standards program but rather to contribute evidence concerning the implications for policy-makers and care providers in nursing homes, in relation to the development of standards and the future management of regulation for ensuring quality in nursing homes in Australia. Prior to the introduction of the Commonwealth Outcome Standards program in Australia, various standards monitoring mechanisms existed both at the State and Commonwealth levels. Whether the replacement of these other mechanisms by the Outcome Standards program results in the anticipated benefits, this thesis argues, remains open to question. This study examines how the 'rhetoric' of public bureaucratic discourse has obscured the 'reality' of nursing home life as it is experienced by residents living in nursing homes and care providers working in nursing homes.