

A brief overview

Queensland Health's Directions for Aged Care

2004 – 2011



Foreword

Our seniors hold a wealth of knowledge and insight which contributes towards making Queensland a wonderful state.

And in an ever-developing state with people living longer and longer, the influence and effect of our older population is becoming even greater.

Over the next 20 years the population aged over 65 years will grow at three times the rate of the population between 15 and 64 years and in some rural and remote areas this growth rate is expected to be four to five times that of the younger age group.

Older people are already the greatest users of health services and Queensland is committed to a health system that will cater for increased demand.

To ensure this there are many issues to consider.

We know that many people wish to stay in their homes as they age so that they need community services to make this possible. Older people also often have different care needs in hospital compared to younger patients and may also need more time to recover.

Aboriginal and Torres Strait Islander peoples and those from culturally and linguistically diverse backgrounds must receive care appropriate to their needs.

Older people living in rural and remote areas must have good access to services.

Our workforce is committed to providing quality health care to older people. They have to be supported with opportunities for ongoing education and training on health care to older persons. The contribution by this workforce, carers and volunteers must be recognised and supported.

Queensland Health's *Directions for Aged Care 2004-2011* provides a clear guide for delivering even better health services to older people. It reflects the *Queensland Health Strategic Plan 2004-2010* intent to promote a healthier Queensland and will ensure the consumer is the focal point of the health care system.

The development of this document would not have been possible without the input of past and present health professionals, carers and volunteers. I would like to thank those who contribute to the continued delivery of quality health care services to all Queenslanders.

The Hon. Gordon Nuttall MP
Minister for Health
Member for Sandgate

Introduction

Queensland and more broadly, Australia's aged care system is structured around two main forms of care: residential and community. These may operate separately or be amalgamated.

The Australian Government's Department of Health and Ageing finances and regulates residential aged care, Community Aged Care Packages (CACPs) and Extended Aged Care at Home (EACH) packages, which provide high care services to older people in the community in place of residential aged care.

To ensure that only those who are highly dependent are placed in residential aged care or alternatively receive high care community based care packages, Aged Care Assessment Teams (ACATs) have been established nationally to determine a client's need for these services.

State and Territory governments retain the major responsibility for providing public health services, including public and psychiatric hospital systems, rehabilitation, public health, and the Home and Community Care (HACC) program that is joint Australian Government and State Government funded.

Although the aged care system has many positive features it has become incredibly complex for consumers, carers and service providers to negotiate through the mix of services provided by the various levels of government.

Recognising the differences in responsibility for aged care service provision, Queensland Health is committed to working with the Australian Government to improve the continuum of care for older people and to introducing system improvements to maximise the effective use of resources for aged care. This includes continued negotiations with the Australian Government for funding that recognises the growing care needs of an ageing population.

Like many other developed countries, Australia's population profile is changing with proportionally more older people in the population than before. At a more local level the proportion of people in Queensland aged 65 and over in 2001 was 11.4 per cent. By the year 2051, this is expected to rise to almost 28 per cent. The proportion of Queenslanders aged 85 years and over is expected to increase by more than eight times, from just over 1 per cent in 2002 to around 8 per cent in 2051¹.

Additionally, older people have special care needs that must be recognised by the system. For example, older people:

- often have a slower recovery rate than younger people after an acute episode and therefore require increased support services while recovering
- may undergo unnecessary and multiple assessments to receive support services

1 ABS Population Projections Australia 2002-2101. Cat no. 3222.0.

- may have a carer that is a similar age and who therefore must be considered in the planning and delivery of services to the client
- often require more than one support service and coordinating these across government jurisdictions can at times be challenging
- generally would prefer to stay in their homes rather than go to a residential aged care facility
- are at greater risk of developing dementia and therefore require specialised diagnosis, treatment, management and support services
- with a pre-existing mental illnesses will require both mental health and aged care services
- living in rural and remote areas of Queensland do not have the same access to services as those living in regional and metropolitan areas. Older Aboriginal and Torres Strait Islander peoples particularly experience problems as many live in isolated communities in rural and remote areas of Queensland

The *Smart State: Health 2020 Directions Statement* (Queensland Health 2002) provides a general description of key directions for the Queensland Health system and is the visionary document by which Queensland Health operates. *Smart State: Health 2020* states that strategies for the delivery of health services to older Queenslanders must address integrated and accessible health care, strengthening primary and community care, effective rehabilitation services and, providing access to residential aged care. In addition there is acknowledgment that an ageing population will increase demand for health services over the coming two decades.

Queensland Health's Directions for Aged Care 2004-2011 endeavours to build upon the vision provided in *Smart State: Health 2020* to provide a more detailed strategy for the delivery of aged care services in Queensland. The document does not specifically target health promotion or disease prevention strategies, as these are addressed in other Queensland Health documents.

Directions for Aged Care was developed after extensive Statewide consultation with representatives from aged care service providers (including Aboriginal and Torres Strait Islander providers), general practitioners, aged care advocacy and member organisations, individual consumers/carers, volunteers, and Queensland Health staff.

Directions for Aged Care is primarily targeted to those 65 years and over and those 45 years and over who are from Aboriginal and Torres Strait Islander backgrounds. It is recognised however, that persons younger than this may require interventions and support that are characteristic of older persons.

Key policy areas

Directions for Aged Care covers seven key policy areas:

- Acute hospital services
- Care for older Aboriginal and Torres Strait Islander peoples
- Community care
- Dementia care
- Mental health services
- Residential aged care
- Workforce

applying the following principles:

- Dignity
- Independence
- Client focus
- Access
- Coordination
- Quality
- Carer recognition
- Collaboration

It is important to emphasise that each policy area does not stand alone and many of the strategies identified will only work with coordination and collaboration across a number of sectors and settings.

Acute hospital services

Older people are high users of treatment services, particularly hospitals. The trend for shorter lengths of stay in acute hospitals may not always be appropriate for older people. Many older people have complex health care needs, often involving more than one condition, and involving both chronic and acute conditions.

Older people may have ongoing support needs for chronic conditions. They may also require support services following acute episodes because they have a slower recovery rate than younger people.

In future, hospital services will need to allow for longer hospital stays for older people and improve the coordination of their services with community health and social care services.

Large hospitals face challenges in coordinating patient care from a variety of disciplines. Smaller rural hospitals need improved access to specialist geriatric care. In many cases, due to the absence of residential aged care beds in the area, smaller rural hospitals take on the long term care of many older persons.

As a result of implementation of the *Directions for Aged Care*:

- Older patients presenting to Queensland public hospitals will receive appropriate, comprehensive and efficient assessments of need
- Older people will have access to aged care specific health services according to need
- Care will be delivered that addresses the unique needs of older persons including broader social and psychological needs
- Avoidable admissions of older persons will be reduced and unnecessary re-admissions minimised
- The needs and contribution of carers will be considered when an elderly person is in a hospital setting
- There will be strengthened partnerships in delivering acute care services and their integration with the community
- There will be integrated support for research and development into best practice service delivery

Care for older Aboriginal and Torres Strait Islander peoples

Aboriginal and Torres Strait Islander Australians have a much younger profile than other groups in the population. Their life expectancy at birth is up to 20 years shorter. Therefore, Aboriginal and Torres Strait Islander peoples may access aged care services from the age of 45 years onwards.

Older Aboriginal and Torres Strait Islander peoples and their carers prefer to remain in their community for as long as practicable. The capacity of families and communities to act as carers is crucial. If communities cannot cope, frail aged people are at greater risk of premature or inappropriate admission to a residential aged care facility or a hospital.

Many older Aboriginal and Torres Strait Islander peoples experience problems accessing services because they live in isolated communities in rural and remote areas of Queensland.

Directions for Aged Care supports the principles of community participation and ownership, cultural respect in delivering care and flexibility in care strategies.

As a result of implementation of the *Directions for Aged Care* there will be:

- Improved cultural appropriateness and effectiveness of assessment services
- Improved access to services across the care continuum for clients and carers
- Improved service delivery which is culturally respectful
- Increased capacity within Aboriginal and Torres Strait Islander communities to fulfil their role as carers
- Strengthened partnerships in planning, designing and delivering health and aged care services to Aboriginal and Torres Strait Islander peoples

Community care

The clear preference of older people and their carers is to remain at home for as long as practicable. Assisting people to act on that preference is a key objective of Queensland Health.

Queensland Health provides or funds programs and services for older people who are frail or suffer from one or more chronic conditions. These include health promotion initiatives, health maintenance and support programs such as the Home and Community Care Program (HACC), assistance with aids and appliances, spectacles and dental schemes and various ambulatory care services. The Australian Government is also a major contributor of funds for community services.

Unfortunately, community care has become unnecessarily complex. Finding the right organisation to provide the right service is not always an easy task.

Older people and their carers can face a series of assessments from different service providers or a detailed assessment when only a simple service is required. A more integrated approach to assessment is needed.

Consumer and provider organisations support the need for a continuum of community care that enables older people to age in place with support increasing in direct proportion to need. HACC support is at the beginning of the continuum, usually when people are still in their own homes. Once clients are assessed as meeting the criteria for admission to residential aged care, alternative Australian Government funded services are required to maintain them at home.

The community care system has many strengths, including dedicated and skilled staff and a long tradition of volunteers supporting older people, but formal community care and health services are only part of the equation. Partners, families and friends, as live-in carers or supporting carers, play vital roles in maintaining frail older people living in their own homes with a degree of independence.

As a result of implementation of the *Directions for Aged Care* there will be:

- Reduced duplication and unnecessary assessment of older people accessing community services
- Improved access to community care services
- Community care services that continue to improve efficiency and client focus
- Carers who will have improved access to a greater range of support
- Strengthened partnerships in delivering community care services

Dementia care

Dementia is a syndrome that can result from a number of diseases that affect the brain. Its variable presentation makes it difficult to understand and there are still many gaps in our knowledge regarding this condition.

The incidence of dementia rises with age. As the population ages, particularly with the increase in those aged 85 and over, there will be a significant increased demand for dementia care. Dementia is one of the main reasons for people needing residential aged care.

Directions for Aged Care will deliver improved early assessment, diagnosis and early interventions for people living with dementia, and will ensure that health practitioners differentiate between delirium and dementia.

People living with dementia and their carers should be able to access appropriate acute, community and residential aged care services. Staff need to be aware of the special needs of people with dementia and must be trained to work confidently and supportively with them.

Carers play a vital role in supporting older people living with dementia to remain in the familiar environment of their own homes. Carers need appropriate support to sustain their caring role in the community. They need to be able to access respite care in times of crisis and to be an active partner in service planning processes.

As a result of implementation of the *Directions for Aged Care* there will be:

- Better targeted and more appropriate assessment of older people living with dementia
- Improved access to a range of services for people living with dementia
- Enhanced coordination and quality of care
- Access to appropriate information, advice and support, to enable carers to sustain their caring role
- Strengthened partnerships between services/organisations associated with improving care to those living with dementia

Mental health services

Mental health services for older people were identified as a national priority in 1992. Older persons' mental health services are a 'component of the mental health service which targets older people with mental illness who require both specialised mental health and aged care expertise.'

Psychogeriatric services are primarily aimed at people aged over 65 who either suffer from a mental disorder complicating an underlying disorder related to ageing, a mental disorder that has arisen for the first time, or a disorder related to ageing complicating a pre-existing mental disorder.

Psychogeriatric services can support health providers caring for people with severe behavioural difficulties associated with organic brain disorders such as dementia.

Directions for Aged Care recognises that consumers and carers need to be more involved in all aspects of their care including service planning, delivery and evaluation of new models of care. *Directions for Aged Care* also addresses mental health promotion and prevention of mental health problems for older people and the issue of suicide.

As a result of implementation of the *Directions for Aged Care* there will be:

- Comprehensive multi-disciplinary assessment services throughout Queensland
- Improved access to specialised mental health care and increased access to aged care facilities for older people with a mental illness
- Holistic models of service delivery that integrate in-patient care, community care, mental health promotion, illness prevention and early intervention for older people's mental health
- Increased client and carer involvement in individual care choices and broader policy and implementation issues
- Reduction in carer burden
- An integrated approach to partnerships with key service providers in the government and non-government sectors

Residential aged care

The Australian Government with its legislative, policy development and funding responsibilities under the *Aged Care Act and Principles 1997* will ultimately determine the future strategic direction of residential aged care.

However, Queensland Health, with 15 percent of the high care places in Queensland, is a significant provider of residential aged care in this State and is committed to maximising choice, access and the quality of service provision within zonal and district networks. Fourteen health service districts are responsible for operating 20 State Government residential aged care facilities across Queensland.

Directions for Aged Care embodies Queensland Health's commitment to quality, resident-focused care in facilities that meets national standards and provides policy direction for all health service districts – not only those responsible for a residential aged care facility. In many health service districts hospitals provide long-term care to older people in the absence of alternative care settings.

As a result of implementation of the *Directions for Aged Care*:

- There will be improved assessment processes for Queensland Health's residential aged care services
- There will be improved equity and access to Queensland Health's residential aged care services
- State owned residential aged care services will remain consistent with the *Aged Care Act and Principles 1997*
- Residents will continue to be provided with quality care in purpose built facilities
- Improved services will be available to rural and remote communities
- Carers will have improved access to a greater range of support
- Partnerships will be strengthened with non-government providers of aged care services

Workforce

Best practice needs a workforce culture that values its people and supports high achievement.

Queensland has a highly skilled workforce in the acute, residential and community sectors providing services across Queensland. There is also a dedicated group of volunteers, who have a long tradition of providing invaluable support to older people.

Maintaining a highly skilled workforce is crucial to delivering quality health services. This challenge is heightened because the people currently providing services to older people, especially those in the residential care sector, are generally older than the average service provider. Additionally, the workforce as a whole is shown to be 'ageing' as the population 'ages'.

Key workforce objectives are ensuring that all aged care staff receive appropriate levels of cultural awareness training, and that there is more encouragement for Aboriginal and Torres Strait Islander peoples to work in all aspects of aged care service delivery.

Queensland Health will focus on:

- recruiting and retaining appropriate numbers of skilled staff and ensuring their access to career development opportunities
- providing a supportive and attractive environment for the workforce
- recognising the valuable contribution of volunteers, especially in residential aged care facilities and in hospital settings

As a result of implementation of the *Directions for Aged Care* there will be:

- Enhanced training and education of highly skilled health professionals who are able to deliver quality services across a variety of sectors
- Enhanced recruitment and retention of highly skilled health professionals who are able to deliver quality services, in a variety of sectors, across the State
- Enhanced recruitment and retention of Aboriginal and Torres Strait Islander staff
- A workplace that continues to value, attract and retain a quality volunteer workforce

Implementation and evaluation

Implementation of strategies identified in *Directions for Aged Care* will be aligned with the *Integrating Strategy and Performance (ISAP)* initiative, which is Queensland Health's vehicle for achieving the Queensland Government's *Smart State: Health 2020* vision and the *Queensland Health Strategic Plan 2004-2010*.

Implementation will be guided by an implementation plan that allows for strategies to be rolled out in two phases.

Phase I (2004 to 2005/6) will focus on:

- development and enhancement of interdisciplinary partnerships
- evaluation of trials and pilot projects
- identification of best practice models to be rolled out across the State
- promotion of cultural change by District "champions" who are willing to use new approaches
- following different patterns and timeframes in different Health Service Districts and Zones depending upon the state of existing services and infrastructure.

Phase II will be developed at a later stage of implementation.

An evaluation of Phase I of implementation will occur in late 2005. The evaluation will be based on key outcomes identified in the document and performance indicators that are relevant to Phase 1.

Footnote

1 ABS Population Projections Australia 2002-2101. Cat no. 3222.0.

Further information

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The full version of Queensland Health's Directions for Aged Care 2004-2011 is available on line at: www.health.qld.gov.au