



Hon Steven Miles MP
Minister for Health and
Minister for Ambulance Services

Supporting healthy ageing of older Queenslanders is a priority for the Queensland Government.

This strategy focuses on what older Queenslanders tell us matters most to them. You told us that you want a health system that supports you to stay well in your community. When you need care, you want it closer to home, and seamlessly connected to other health services.

Our clinicians are already hard at work to improve health services for older people and this strategy will strengthen their efforts to keep older Queenslanders well for longer.

I'm proud that the Queensland health system is one of the best in the world, and this strategy will help us continue delivering high quality care as Queensland's population grows and ages.

Healthy ageing:

A snapshot of the strategy for older Queenslanders

We have heard from consumers, carers and clinicians. You have informed our health system priorities.

Our vision

Good health and wellbeing that matters to older people

Our priorities

1. **Staying in good health for longer** – Build older persons' capacities to stay independent, well and active in their communities
2. **Person-centred care for older Queenslanders** – Adopt holistic person-centred care for older people in hospitals and other care settings
3. **Integrating health and other support services** – Adopt integrated models of care to deliver more acute and sub-acute health services in the home and community



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Government**

Consumers, carers and clinicians have been heard

In the consultation process, older people, their families and carers, clinicians and other health service providers were asked what a health system that supports healthy ageing looks like

Delivers care in the home or community

“Older people should receive their health/ palliative care in/or as close to their home as possible...”
(Primary Health Network)

Enhances health literacy and community awareness

“Increasing health literacy skills of older people and carers/ families to research and express these needs and preferences”
(Consumer)

Supports families and carers and older persons' broader support networks

“A person receiving care exists within a support network that includes family, friends, informal and formal community connections and professional care”
(Clinician)

Recognises that healthy ageing includes physical and cognitive decline, terminal illness and dying

“...Ageing is a normal and valued part of the life course”
(Statewide Clinical Network)

Builds older persons' capacities to stay independent, well and active in their communities

“A health system focused on health (not just treatment)”
(QLD Department of Health)

When clinical care is required, it is older person centred and integrated across care settings and teams

“Hospital and Health Services are organised as older person health services with appropriate Key Performance Indicators”
(Clinician)

Provides a physical environment that enables access and quality care of the older person

“Age friendly hospitals should also incorporate universal design principles...”
(Statewide Clinical Network)

Supports vulnerable populations and ensures equitable health access

“It is important that all older people have access to the health services they need, when they need them, regardless of where they live...”
(Peak Body)

Builds the capability of the healthcare workforce in the care of older people

“Healthcare workers are trained in the care of older people...”
(Hospital and Health Service)

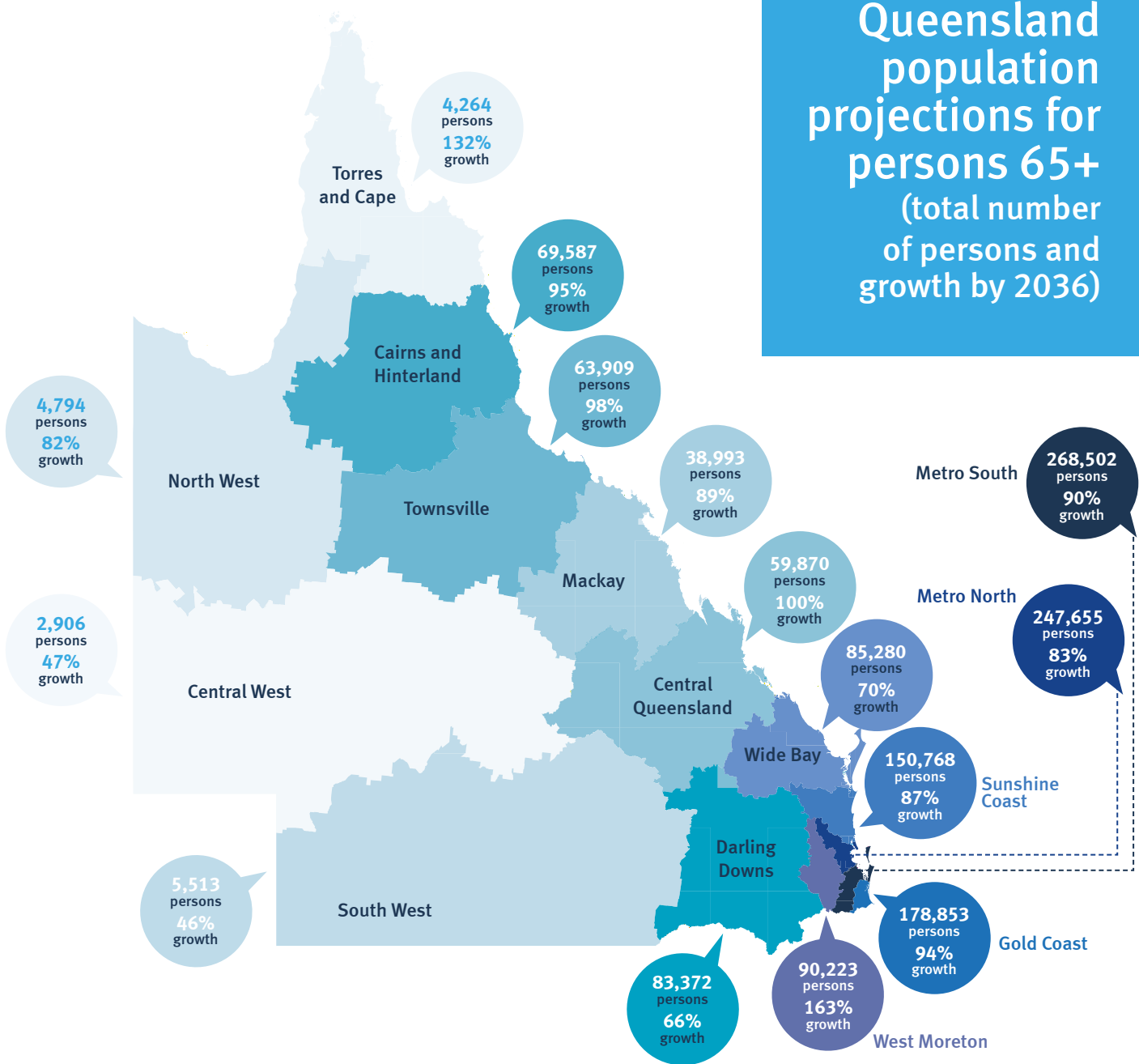
Focuses on prevention and health promotion and targets the social determinants of health

“What a health system is could be broadened in line with contemporary trends to potentially encompass addressing the social determinants of health”
(Hospital and Health Service)

Values and respects the older person

“The quality care of the older person is core business”
(Hospital and Health Service)

Queensland population projections for persons 65+ (total number of persons and growth by 2036)



Queensland population aged

65+
has increased from 325,000 to **580,000** from 1991 to 2011

85+
has increased from 25,000 to **70,000** from 1991 to 2011

In the ten years to 2016, the older population

grew by 47%
228,637 persons

the national rate was **38%** 1.1 million persons

There are approximately

150,000 frail Queenslanders over the age of 65 with a further **342,000** experiencing pre-frailty

Most common **chronic conditions**

93% sight problems

44% arthritis problems

41% deafness or ear problems

21% high cholesterol

One in ten people over 65 have **dementia** with this rate increasing substantially to **three in ten** amongst those aged 85 and over

Culturally safe and appropriate services support our widely distributed

8,000

older Aboriginal and Torres Strait Island Queenslanders



Our strategic direction



Staying in good health for longer

Older Queenslanders enjoy improved health and quality of life

Health System Objectives

- Enable universal and targeted prevention strategies to improve and sustain health and wellbeing across the life course, particularly for people of middle-age, to slow declines in capacity.
- Enable active and healthy lives through enhanced knowledge and skills and motivation, and by creating environments that support healthier choices and to address loneliness.



Person-centred care for older Queenslanders

Older Queenslanders have improved outcomes and experience of healthcare

Health System Objectives

- Encourage and support older Queenslanders to be active partners in their own care.
- Empower clinicians with the training and tools to deliver the best care to older people.
- Enhance flexibility in the way in which services are organised and delivered to improve access and timeliness.



Integrating health and other support services

Older Queenslanders experience connected care and support across the health, aged and community services sectors

Health System Objectives

- Engage partners across sectors to improve health outcomes.
- Address funding and policy barriers to connected care.
- Enable information sharing between primary and secondary care and across sectors to achieve better healthcare.



Success indicators

- Higher prevalence of healthy behaviours among people aged 45+ years
- Improved self-reported health for people aged 65+
- Ability to build and maintain relationships with family, friends and broader social connections

Health System Actions

- Implement universal and targeted prevention strategies to improve and sustain health and wellbeing across the life course, particularly for people of middle-age, to slow declines in capacity.
- Encourage and support older people to have active and healthy lives through enhanced knowledge and skills, and by creating environments that support healthier choices.

Success indicators

- Patient and carer experience – self reported
- Right care – evidence based, best practice
- Fewer adverse events and complications of care
- Timely care – care within clinically recommended timeframes
- Accessible care – flexible and responsive to patient need
- Increased number of innovative models of care implemented
- Increased number of patients being returned to their own home
- More in-reach in out of hospital settings
- Slower growth in older persons attending at emergency departments and being admitted to hospital
- Reduced avoidable delays in leaving hospital to avoid deconditioning
- Reduced length of stay in hospital
- Increased number of completed Advance Care Plans

Health System Actions

- Promote the quality care of older people as core business.
- Expand models of care, such as innovative emergency and hospital service delivery models to minimise avoidable delays in timely treatment and discharge from hospital.
- Develop and utilise quality of care indicators and evidence based best practice guidelines to monitor and drive improvement.
- Investigate and expand the number of home and community based services.
- Expand the use of evidence-based decision-support tools to assist patients, and their carers and families, to actively participate in decision-making about their care.
- Develop workforce capabilities and models of care for older persons with cognitive impairment including dementia.
- Implement enhanced in-reach and out-reach services to support patients from residential aged care facilities to avoid unnecessary transfer to hospital.
- Enable elderly patients to be engaged in decisions regarding their healthcare.

Success indicators

- Reduced rates of potentially preventable hospital admissions
- Patient and carer experience of connectivity of services – self-reported

Health System Actions

- Extend case management, coordination and navigation services to enhance self-care, service accessibility and utilisation for older persons with multiple health conditions.
- Expand partnerships to plan and coordinate older persons' health and community support services.



Our enablers

- **Health Service Policy:** develop strategic partnerships across all levels of government to align policy and planning to support integrated/networked care and health promotion for older persons in Queensland, across health, ageing and social sectors.
- **Health Service Planning:** plan for health services at the system and local levels to ensure equitable access to and sustainability of health services for older persons living in all areas of the state.
- **Clinical Excellence and Innovation:** enable clinical innovation and research to address priority clinical needs for older Queenslanders: frailty, management of patients with multi-morbidities, rehabilitation and reconditioning, and palliative care.
- **Performance:** transition to outcome-based measures of success to incentivise and reward services for achieving good health outcomes for older persons.
- **Funding and Purchasing:** increase flexibility to better enable health services to design and deliver care in ways that best meet the needs of older people, including removing disincentives for partnerships across sectors and delivery of care in the most appropriate settings.
- **Workforce:** increase health workforce awareness and expertise in relation to the health and wellbeing of older persons to improve the responsiveness and quality of care provided; and workforce redesign to meet the health service needs of an older population.
- **Infrastructure:** design or modify physical environments (and processes) aimed at making health service environments safe and easy to navigate for older persons and their carers.
- **eHealth and Digital Technologies:** facilitate information systems and technologies that support integrated care across settings and sectors.



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