



Plan for Older People's Care 2021-2024

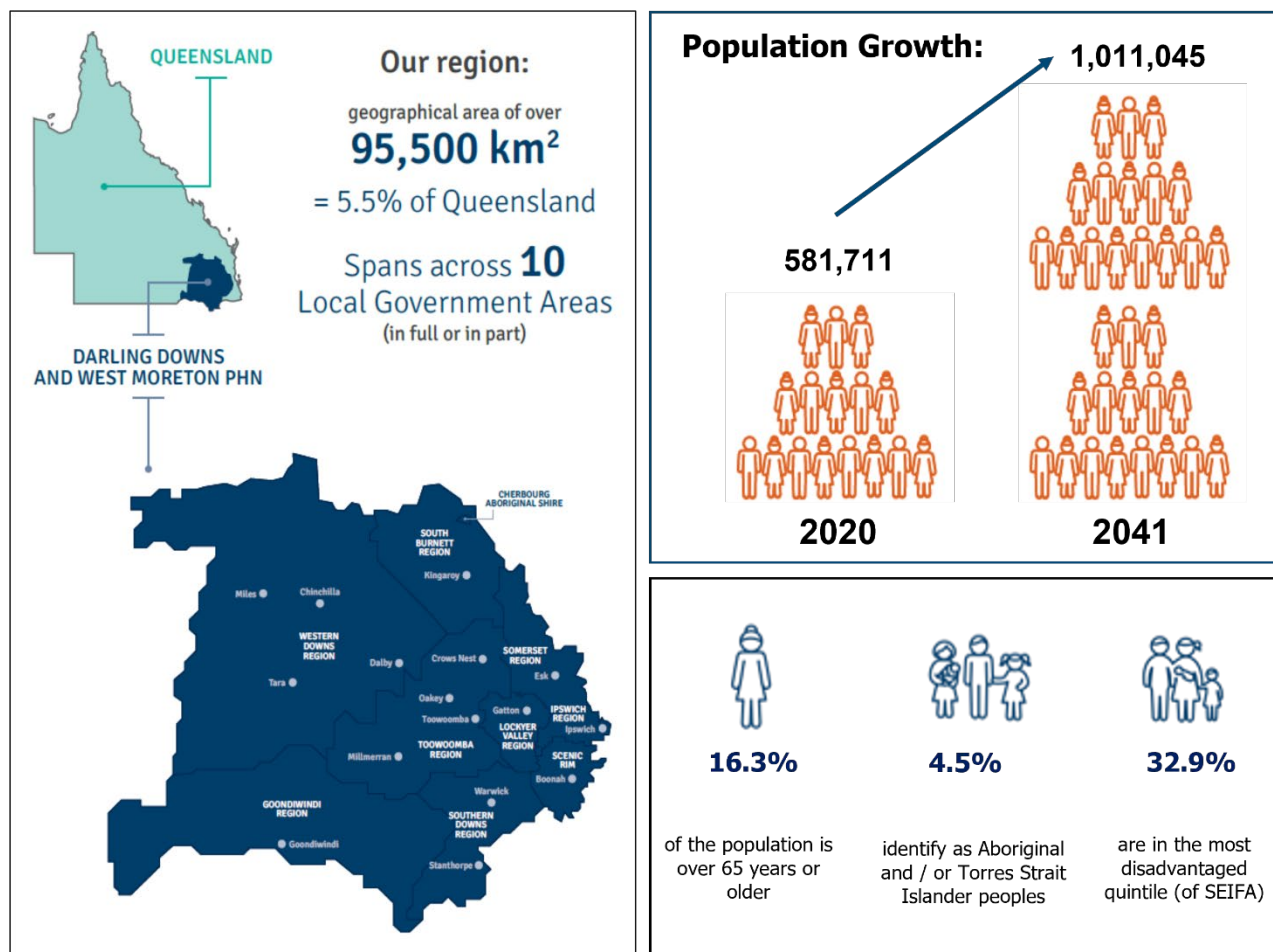
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Darling Downs and West Moreton PHN wishes to acknowledge Australia’s Aboriginal and Torres Strait Islander peoples as the Custodians of this land.

We pay our respect and recognise their unique cultures and customs and honour their Elders past, present and emerging.

Regional context



Health indicators

The health profile of the PHN region includes the following:²

- 11.5% of adults are regular (daily) smokers
- 47.9% of adults undertake insufficient physical activity
- 67.3% of adults are overweight (including obese)
- 35.8% of adults have high blood pressure

There were 3,745 registered deaths in the PHN region in 2019, which is 12% of all deaths in Queensland.¹ A total of 2,231 deaths occurred in the Darling Downs Health region,³ and 1,514 occurred in the West Moreton Health region. The median age for death in the PHN region is 79 years, and 39% of all deaths are classified as premature (people under 75 years).¹

Alignment with national, state and local context

Figure 1 (below) shows the Acts of parliament, strategies, plans and frameworks which have informed the development of the Plan for Older People’s Care 2021-2024; and the governance activities that will be created by the Plan.

Figure 1: Relevant Acts, Strategies and Frameworks informing the Plan



Recent policy developments

Despite the shift in focus and resources towards the global pandemic response since 2020, both the Queensland and Australian Governments have been active in the older people’s care planning space. In Queensland, the Parliamentary Inquiry into aged care, end-of-life and palliative care and voluntary assisted dying report was handed down in March 2020, and included 77 recommendations, 43 of which are specific to aged care. Whilst many of these recommendations are directed to the federal government, the Inquiry Committee acknowledged opportunities for the Queensland Government to take a lead role to improve aged care. Since the Parliamentary Inquiry, the Queensland Government have invested in specific programs to support safety and quality in aged care. For example, the Specialist Palliative care in Aged Care (SPACE) program and the Residential Aged Care Facility Support Service (RaSS).

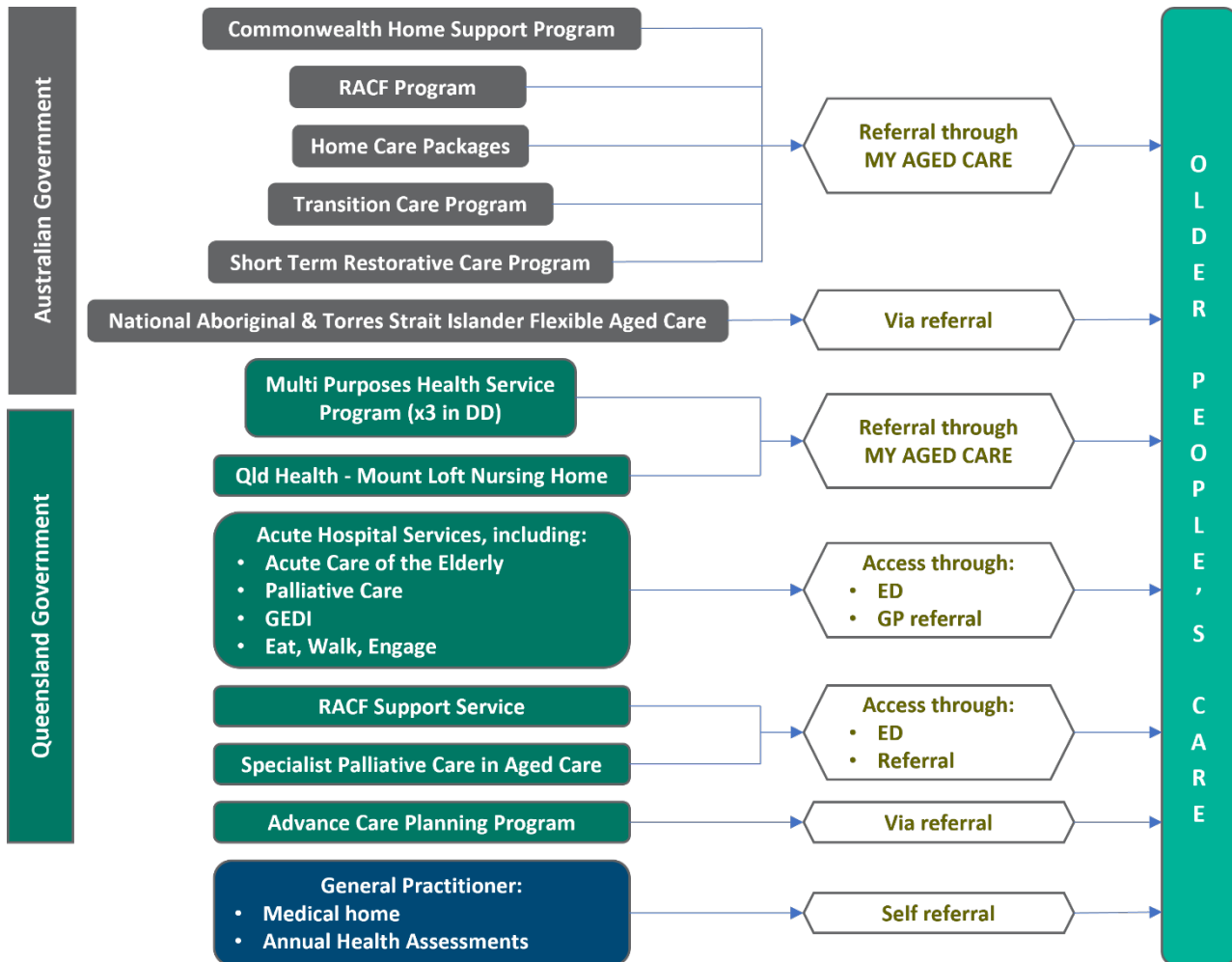
In February 2021, the Australian Government received the final report from the Royal Commission in to Aged Care Quality and Safety. This included 148 recommendations.⁴ The Government’s response to the final report was published in May 2021, where the Government accepted 126 of the recommendations, rejected six, offered alternatives for four and twelve remain under consideration.⁵ The Government committed \$17.7 billion to reforming aged care in the 2021 Budget, some of which will be deployed to PHNs for investment in aged care services.⁶

System of older people’s care

It is well documented that the system of care for older people in Australia is complex. With our federated system of Government, and the distribution of health responsibility between the Australian and state governments, access to care by older people, depends on type of care required, acuity of care / health needs and setting of care.

Figure 2 (below) shows a snapshot of what services are available, who has responsibility for administering and providing the service, and how the service is accessed.

Figure 2: System of Older People’s Care

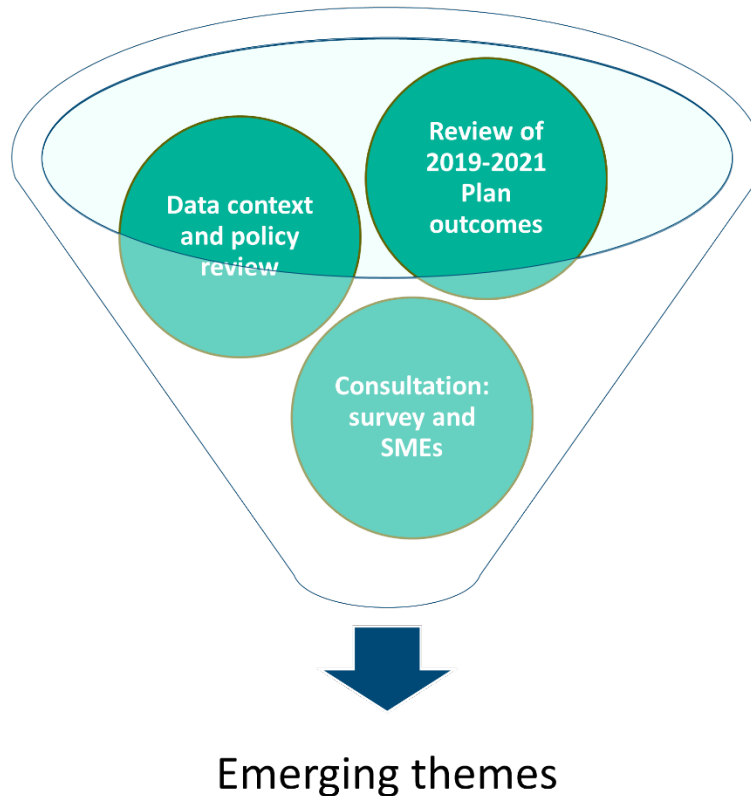


It is important to recognise that our consultation process indicated the system governing older people’s care is problematic. There were several submissions about the inaccessibility of My Aged Care for older people, and the wait times between making a referral to My Aged Care, being assessed, and receiving an appropriate package of care. Whilst the PHN acknowledges the volume of feedback on this subject, the Plan for Older Peoples Care 2021-2024 does not address this issue because it is outside the scope of the PHN. However, the PHN is committed to representing this feedback at relevant national forums.

Planning for Older People’s Care

This plan represents the second PHN Plan for Older People’s Care, the first of which was developed in 2019 and covered the period from 2019-2021. The methodology for developing the plan has three component parts. Data from these activities were combined and emerging themes were identified (see Figure 3).

Figure 3: Development of the Plan



Plan for Older People’s Care 2021–2024

The Plan for Older Peoples Care 2021 – 2024 includes four strategic priorities which align with keys themes that emerged from the consultation process. We have identified a series of actions to sit under each of the strategic priorities (see Figure 4). The strategic priorities are:

- connecting older people to care
- collaboration and integration
- community capacity building
- supporting our health and care workforce.

Plan for Older People's Care 2021–2024

Figure 4: Strategic Priorities and Actions



For each strategic priority, we outline:

- an overview of the priority area
- what we heard during the consultation process
- the anticipated timeframe to implement the actions
- the actions we will take to address the strategic priorities
- what needs to be evident to tell us the actions have been successful
- the anticipated timeframe to implement the actions.

Connecting older people to care

Overview:

The PHN region is large and includes significant areas of outer regional and remote settings. Connecting older people with existing health care services and supports will improve access to services and potentially reduce health crises in this population and hospitalisations. Exploring new health service delivery models, beyond the traditional face to face consultation model will create opportunities for innovation and reduce reliance on public transport networks.

What we heard:

Older people do not want to travel long distances for health care appointments, they would prefer to have access to home based services.

The escalation in telehealth services during the pandemic has greatly improved access to timely services for older people.

Whilst the availability of broadband connections can be a barrier to tele and virtual health models, the older people in our community are generally open to new technology, with appropriate support and access to hardware.

Objective:

Older people in our community can access the right care, at the right time, in the right place (for them) when they need it.

Action	How we will know we have achieved it	Timeline		
		2021-2022	2022-2023	2023-2024
Map older people's care services (actual and virtual) to improve navigation.	Comprehensive database for older people's care services, to be shared with internal stakeholders and partners for planning purposes.			
Support tele/virtual health delivery models for older people.	<p>Increase in number of tele/virtual health services in the region.</p> <p>Process and outcome evaluation data shows commissioned tele/virtual health programs are effective.</p>			
Review and strengthen health pathways for older people's care.	<p>Health Pathways in both HHS areas include up to date information and guidance regarding.</p> <p>Evaluation data shows information and content is accurate and useful for users.</p>			



Action	How we will know we have achieved it	Timeline		
		2021-2022	2022-2023	2023-2024
Explore primary care based navigation models for older people.	<p>Evidence of consultation with consumers, carers and stakeholders regarding potential primary care based navigation models.</p> <p>Implementation and evaluation data for a primary care based navigation model at a trial site.</p>			
Support information sharing about local older people's care services.	Evidence of an executed communication plan for older people's care information.			



Collaboration and integration

Overview:

Older people's care is a complex ecosystem, incorporating primary, secondary, and tertiary care systems, state and federal government funding sources, and the full spectrum of health and social settings of care. There are many challenges and barriers to inter-organisational collaboration, however, these are not insurmountable.

Older person-centred care requires health and care service providers to work collaboratively at the individual, organisational and system levels of care. Integrated models of care provide better outcomes and experiences for older people.

What we heard:

Whilst integration and collaboration have improved in the last few years (driven largely by necessity during the pandemic), more still needs to be done in this space.

The system of care is complicated, clunky and fragmented, making it difficult for older people seeking care to access it.

Our community of older people need programs and projects that support navigation and access to services.

Health and social care providers want to work together to improve accessibility, reduce duplication in the system and provide opportunities for innovation.

Objective:

We work with others to build a collaborative and integrated health system for older people in our region.

Action	How we will know we have achieved it	Timeline		
		2021-2022	2022-2023	2023-2024
Promote and strengthen the existing regional Collaboratives.	Evaluation of outcomes for each supported Collaborative indicates: <ul style="list-style-type: none"> Effectiveness of Collaborative activities / action plans Evidence of knowledge translation to health professional workforce and community (through the Collaborative research programs) 			
Develop joint action plans for older people's care with our HHS partners.	Approval and endorsement of joint 'Feel Well, Live Well' plans for older people's care with: <ul style="list-style-type: none"> West Moreton Health Darling Downs Health 			



Action	How we will know we have achieved it	Timeline		
		2021-2022	2022-2023	2023-2024
Promote codesign and engagement in commissioned activities.	<p>Evidence of codesign and engagement in Agreements and Schedules of all newly commissioned services, projects and programs.</p> <p>Evidence of co-design and engagement in progress and final reports from new commissioned services and projects for older people’s care.</p>			
Evaluate integration and collaboration in all commissioned services and projects.	Evaluation data collated from all commissioned services, projects and projects for older people’s care will show inter-agency collaboration and integrated models of care, where feasible.			



Community capacity building

Overview:

Whilst many older people in our community live well and independently without support, others need significant health and social care services. The barriers to providing in-home care supports in our outer regional and remote areas make this task difficult. However, such communities can often be mobilised to support each other, thus decreasing the dependency of professional support services. Examples include providing meals for an elderly neighbour, basic gardening support for an older person or providing connection and companionship to reduce isolation.

Compassionate communities are 'communities in which everyday people play a stronger role in the care and support as they age and at the end of life'.¹ It is a public health approach to care, which includes activation of local, community networks to offer and provide appropriate support where needed. The opportunity to integrate a compassionate community approach with augmentation of formal care service propositions will optimise health and wellbeing of older people in such communities.

The PHN is committed to building capacity within the community as part of the broader ecosystem of health and social care for older people. This includes education and information sharing, as well as supporting projects to mobilise communities.

What we heard:

There is poor community understanding of the process to access aged care services. The process is confusing and requires online access to apply for services. This is a barrier for many older people.

Raising understanding and awareness in the community about the needs of older people, and services will support access to care.

There is opportunity to build capacity within the community to optimise self-sufficiency in accessing aged care services and supporting initiatives that encourage community participation in care and support.

Objective:

We work with our community to deliver better services for older people.

Action	How we will know we have achieved it	Timeline		
		2021-2022	2020-2023	2023-2024
Identify opportunities for community participation in older people's care programs.	Evidence of implementation of a 'compassionate community' project. Evaluation of a 'compassionate community' project which demonstrates effective outcomes for older people.			
Promote the development of compassionate communities through the work of the Collaboratives.	Existing (and new PHN supported) Collaboratives can demonstrate compassionate community / community activation activities.			
Support community activation programs that	Evidence of an effective program (through formal evaluation)			



Action	How we will know we have achieved it	Timeline		
		2021-2022	2020-2023	2023-2024
strengthen older people's care.	Formal evaluation of commissioned community activation activities that improve the wellbeing of older people.			
Provide information and education about care of older people in communities.	Delivery of a community information/education program regarding older people's care (for example, advance care planning, accessing care, ageing well etc.).			



Supporting our health and care workforce

Overview:

The older people’s care workforce is huge and includes health and social care professionals in primary, secondary and tertiary care settings. This includes GPs, community aged care and residential aged care. They also include medical, nursing and allied health staff.

Training needs and gaps differ between disciplines and settings of care. However, the need for training is evident across all areas.

What we heard:

The sector would like more education and training opportunities for direct care service providers, as well as providing GPs with the resources and understanding of the aged care system, and when to recommend patients should access it.

Education and training should be tailored to the setting of care, target audience for most effective mode of delivery.

A focus area for training and development is professional (non-registered) caregivers working in community and residential aged care settings.

Project Echo has been very successful.

Objective:

We support our health and care professionals to provide the best care for older people through education and training.

Action	How we will know we have achieved it	Timeline		
		2021-2022	2022-2023	2023-2024
Continuation of Project Echo.	Evidence of regular Project Echo sessions. Evidence of evaluation showing Project Echo to improve knowledge and confidence of participants.			
Provide training opportunities for health and social care workforce.	Evidence of development and delivery of a tailored education and training program for older people’s care, based on needs analysis / gaps in training.			



Action	How we will know we have achieved it	Timeline		
		2021-2022	2022-2023	2023-2024
Implement a consistent approach to evaluation of training and education.	<p>Evidence of a consistent evaluation dataset for all training and education activities for the older people's care workforce (PHN provided and commissioned).</p> <p>Evaluations of all activities show the training is effective and improves knowledge and confidence of delegates.</p>			
Support the older people's care workforce's wellbeing.	Evidence of development and delivery of a wellbeing program for the older people's care workforce (PHN provided or commissioned).			



Enablers to support implementation

The project team have identified four enablers to optimise implementation and effectiveness of the Plan for Older People's Care 2021–2024:



Data is essential to informing current state, predicting future state and ensuring effectiveness of service delivery and commissioned projects. The PHN has invested significantly in data generation in recent years, including the 'Talk About' series which connects the PHN with members of the community to gather their experiences and opinions of health care. These insights will enable implementation and evaluation of the Plan.



The PHN has established robust and effective relationships with the major stakeholders for older people's care across the region. These relationships will enable codesign of the programs and projects driven by this Plan.



The expert reference group identified the growth and development of digital health as a significant enabler for this Plan. The pandemic prompted health service providers to pivot rapidly into telehealth and virtual health models of care. This has, in turn, led to the development of further software solutions to support these programs. Innovation is a guiding principle of the PHNs Strategic Plan.



The current policy context is a major enabler for this Plan for Older People's Care in the PHN region. The Royal Commission into Safety and Quality in Aged Care has led to significant Government investment in to Aged Care. This investment will enable implementation of the plan.

Evaluation framework

A Program Logic will be applied to the Plan for Older People's Care 2021 – 2024, and this will provide the evaluation framework (see Figure 5). A comprehensive monitoring and evaluation plan will be developed following approval by the PHN Executive Leadership Team.

Figure 5: Program Logic for the Plan

Aim: To progress towards achieving optimal health system performance for older people living in the Darling Downs and West Moreton PHN region.

Objectives:

- To enable older people in our community can access the right care, at the right time, in the right place (for them) when they need it.
- To work with others to build a collaborative and integrated health system for older people in our region.
- To work with our community to deliver better services for older people.
- To support our health and care professionals to provide the best care for older people through education and training.

Context	Inputs	Activities	Participants	Outputs	Outcomes	Goals
<p>The older population in the PHN region is growing, with over 70% growth in West Moreton alone by 2026.</p> <p>Many of our older people face challenges to accessing care. For example, the remoteness and distances in the Darling Downs region and the cost</p>	<p>Project team:</p> <ul style="list-style-type: none"> • Lead - Commissioning • Older Australians and Palliative Care Consultant • Commissioning Consultant • Digital Health Consultant • Business Manager 	<p>PHN:</p> <ul style="list-style-type: none"> • project related activities • commissioning of services, projects, and programs • consultation with stakeholders • codesign new services, projects and programs with stakeholders and 	<p>Target group:</p> <ul style="list-style-type: none"> • People over the age of 65 years living in the PHN region. • Indigenous Australians over the age of 55 years living in the PHN region. <p>Stakeholders:</p> <ul style="list-style-type: none"> • older people (as above) and their 	<p>The following list of potential outputs is not exhaustive:</p> <ul style="list-style-type: none"> • project documents, including plans • AWP's • interim and final reports • integrated models of care 	<p>More older people can access the right care, at the right time, in the right place (for them) when they need it.</p> <p>Local health and care providers are supported to collaborate and implement integrated models of care.</p>	<p>An accessible, seamless ecosystem of care for older people in the PHN region.</p> <p>Reduction in hospitalisations and emergency department presentations of older people.</p> <p>A compassionate community.</p>



<p>of services when 32% of the population are in the lowest socio-economic quintile.</p> <p>Older people's care is provided in primary, secondary and tertiary care, with many people moving through each. This can create a complex and fragmented system for older people to navigate, which can result in older people falling through the cracks in the system.</p>	<ul style="list-style-type: none"> • GCfAHPC Project Officer. <p>Financial:</p> <ul style="list-style-type: none"> • GCfAHPC funding • Aged Care Program funding • flexible funding. <p>Other:</p> <ul style="list-style-type: none"> • policy documents • referral Pathways • service providers and aged care workforce • Australian Government Agreement. 	<p>end users (where possible)</p> <ul style="list-style-type: none"> • deliver targeted projects that meet the needs of older people in the region • encourage and support GPs and health care services to understand and support the needs of older people, including palliative care 	<p>families / support network</p> <ul style="list-style-type: none"> • RACFs • palliative care services • community aged care providers • HHSs • councils • health and care staff (older people's services) • GPs and primary care staff • peak bodies. 	<ul style="list-style-type: none"> • research journal articles • education and training programs • information sources (documents, social media, websites etc.) • apps • communities of practice. 	<p>Improved awareness and capacity for the general community to support older people at home.</p> <p>Increase in training and education opportunities for health and social care professionals who care for older people.</p>	<p>A well training workforce.</p>
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Governance of the Plan

Following approval, implementation of the Plan for Older People’s Care 2021-2024 will commence in March 2022. Responsibility for implementation, monitoring and evaluation will sit with the Older Australians and Palliative Care Consultant in the Commissioning Team.

Figure 6: Governance Model



References

1. Resident Regional Profile Report (SA2 Level) for the Darling Downs and West Moreton PHN Region. 23 November 2021
2. Chief Health Officer of Queensland Report 2021
3. Queensland Regional Profiles – Time Series Profile. Darling Downs and West Moreton PHN Region. Downloaded from <https://statistics.qgso.qld.gov.au/qld-regional-profiles> 23 November 2021
4. Royal Commission into Aged Care Quality and Safety Final Report: Care, Dignity & Respect. February 2021
5. Australian Government Response to the Final Report of the Royal Commission into Aged Care Safety and Quality. May 2021. Australian Government, Canberra
6. Australian Government Budget 2021-22. Downloaded from <https://budget.gov.au/> in December 2021.



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