

## **Aged Care**

**Activity Work Plan 2025/26 – 2027/28** 









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### **Commissioning Early Intervention Initiatives**

#### **ACTIVITY PRIORITIES AND DESCRIPTION**

#### PROGRAM KEY PRIORITY AREA

Aged Care

#### **AIM OF ACTIVITY**

The aim of this activity is to support senior Australians to live at home for as long as possible through the commissioning of early intervention activities and models of care for chronic disease management that support healthy ageing and reduces pressure on local health services. This activity also supports the empowering of GPs and other primary health care workers through training, tools and resources which contribute to improved health and care outcomes for older people.

#### **DESCRIPTION OF ACTIVITY**

The commissioned services provide early intervention initiatives that promote healthy ageing and the ongoing management of chronic conditions and are:

- Informed by the PHN's Health Needs Assessment.
- Designed to meet the specific needs of senior Australians in the Darling Downs and West Moreton region with a specific focus on Aboriginal and Torres Straite Islander communities and other priority populations including those who are culturally and linguistically diverse and those living in regional and remote areas.
- Monitor and evaluate existing programs to ensure that the services are effective and efficient and meet the needs of the community.
- Foster encouraging partnerships, and collaborative approaches between multidisciplinary teams and primary care providers.
- Provide Healthy Ageing Support to assist older people within the eligible cohort to coordinate and access the care and services they may require, to help them to remain living at home and in their community.
- Assist older people to retain functional capability in their usual activities of daily living, enabling them to live as independently as possible, for as long as possible, in their own homes and communities.
- Create meaningful social participation that connects people to family, friends, and community.
- Strengthen culturally appropriate health pathways to ensure at-home and primary/community services meet the cultural needs of Aboriginal and Torres Strait Islander peoples and other priority population groups.
- Provide necessary, appropriate, easy to understand and accurate information in health management, available services, and resource accessibility.

This activity will also include workforce education on how to connect senior Australians with necessary psychosocial, health, social and welfare supports and the availability of the above commissioned services initiatives. In addition, the activity will be aligned to the PHN Plan for Older People's Care 2021-2024, the West Moreton Hospital and Health Service and PHN Feel Well Live Well Strategy, and the Darling Downs Hospital and Health Service and PHN Feel Well Live Well Strategy.





#### **NEEDS ASSESSMENT PRIORITY**

NEEDS ASSESSMENT PRIORITY	Identified Need
Accessible and responsive services to support patients with complex care needs associated with ageing	Care Across the Lifespan
Use of protective health behaviours to deliver positive health outcomes across the lifespan	Priority Health Conditions

### **Care finder Program**

#### **ACTIVITY PRIORITIES AND DESCRIPTION**

#### PROGRAM KEY PRIORITY AREA

Aged Care

#### **AIM OF ACTIVITY**

The aim of this activity is to establish and maintain a network of care finders to provide specialist and intensive assistance to help people within the target population to navigate and access aged care services and connect with other relevant supports in the community.

These activities will:

- a) Improve outcomes for people in the care finder target population, including:
  - Coordination of support when seeking to access aged care.
  - Understanding of aged care services and how to access them.
  - Improved openness to engage with the aged care system.
  - Increase care finder workforce capability to meet client needs.
  - Increase rates of access to aged care services and connections with other relevant supports.
  - Increase rates of staying connected to the services they need post service commencement.

b) Improve integration between the health, aged care and other systems at the local level within the context of the care finder Program.

#### **DESCRIPTION OF ACTIVITY**

To continue to improve outcomes for people in the care finder target population, our PHN will re-commissioned three service providers in the Darling Downs and West Moreton PHN region. These service providers are:

#### Aged and Disability Advocacy Australia (ADA)

ADA covers the entire Darling Downs and West Moreton Region, and their associated target populations. The service will utilise additional funding to extend their focus on Multicultural clients in the two large metropolitan areas and settlement sites of Toowoomba and Ipswich.

#### Footprints Community Limited

Footprints Community Limited covers the Ipswich and, Boonah areas. They cover all target populations but focus on people who are homeless and at risk of homelessness.

#### STAR Community Services.

STAR Community Services covers the Warwick and Stanthorpe areas. They cover all target populations, but focus on care givers, Forgotten Australians and people who are homeless or at risk of homelessness.

The PHN supports these commissioned services by:

- Monitoring processes and supporting quality improvements activities to meet data collection and reporting requirements.
- Supporting the integration of the care finder network into the local aged care system.
- Supporting continuous improvement of the care finder program.
- Identifying and addressing opportunities to enhance integration between the health, aged care and other systems at the local level.

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Increasing the awareness of care finder services among General Practitioners and primary health care providers, by developing and embedding local referral pathways within the Health Pathways sites and ensure contracted providers directly undertake adequate promotion of their services to community referrers and intermediaries.

#### In addition, the PHN:

- Continues to collaborate with other PHN's through the care finders Aged Care Working Group. This group shares experiences, learnings and is solution focused.
- Continues to promote and raise awareness of the care finder network with potential referrers, intermediaries and the target population.
- Continues to add to our existing knowledge of the need in relation to care finder support through ongoing analysis of available data sources to understand the demographics, profile, and geographical distribution of those that may form the local care finder target population.

The ACH providers, Footprints Community Limited and STAR Community Services are now fully incorporated in our care finder program and provide valuable expertise in the homelessness area.

#### **CONSULTATION / COLLABORATION**

A Community of Practice has been established to provide a forum for funded care finders and other representatives to share their experiences and learnings of the care finder program. The Community of Practice supports continuous improvement through collaboration and responding to the evaluation of the program and adapting to the needs and trends within the target population.

This group meets quarterly and this year the group will have a greater focus to include our partners the Elder Care Support Program and how as a larger group we can meet the needs of our communities.

Collaboration with the following organisations will also be undertaken:

- Advocacy providers.
- Aboriginal and Torres Strait Islander health services.
- Culturally and Linguistically Diverse providers.
- LGBTOIA+ people and communities.
- Forgotten Australians providers.
- Health Service (Darling Downs & West Moreton) Department of Health Aged Care Assessment, Nurse Navigators, Community Health, Indigenous Health, Acute Geriatric Evaluation Service.
- Assessment Organisations.
- Social activity providers.
- Consumer Groups.
- PHN Clinical Council.
- GP / Health Service Provider Advisory Groups.

#### **NEEDS ASSESSMENT PRIORITY**

NEEDS ASSESSMENT PRIORITY	Identified Need
Improving the health of older Australians	
Accessible and responsive services to support clients with complex care needs associated with ageing	Care Across the Lifespan





## After Hours Access in Residential Aged Care Facilities

#### **ACTIVITY PRIORITIES AND DESCRIPTION**

#### PROGRAM KEY PRIORITY AREA

Aged Care

#### **AIM OF ACTIVITY**

The aim of the After Hours Access in Residential Aged Care Facilities (RACFs) activity is:

- To increase the number of RACFs with formal after-hours plans
- To increase knowledge and understanding of participating RACF staff regarding after-hours health care options and processes for residents
- Support the development of clinical governance systems across the RACF sector for after-hours care of residents
- To improve digital health record documentation following an episode of after-hours care.

#### **DESCRIPTION OF ACTIVITY**

This activity provides guidance to assist participating RACFs to develop and implement after-hours action plans which support their residents to access the most appropriate medical services out-of-hours. This includes educating participating RACF staff in out-of-hours health care options and processes for residents and supporting participating RACFs to implement procedures that ensure residents' digital medical records remain up to date. Our PHN also supports engagement between RACFs and their residents' GPs (and other relevant health professionals) as part of the development of their after-hours action plans.

These activities will be achieved by:

- Undertaking extensive stakeholder consultation.
- Creating a detailed engagement and communications plan.
- Scoping the existing after-hours services currently in place at RACFs, then reviewing the key issues and themes.
- Disseminating a diagnostic report for each RACF as to their current after-hours service provision.
- Developing an after-hours framework for RACFs.
- Developing a suite of resources which will include after-hours plan templates and guidelines
- Providing individual support for participating RACFs to develop and implement plans and resource tools
- Undertaking a post implementation evaluation process.

#### **NEEDS ASSESSMENT PRIORITY**

NEEDS ASSESSMENT PRIORITY	Identified Need
Accessible and responsive services to support patients with complex care needs associated with ageing	Care Across the Lifespan
Appropriate workforce capacity, capability and stability	Enablers







## **Support Residential Aged Care Facilities Increase Availability and Use of Telehealth Care**

#### **ACTIVITY PRIORITIES AND DESCRIPTION**

#### PROGRAM KEY PRIORITY AREA

Aged Care

#### **AIM OF ACTIVITY**

This activity aims to assist Residential Aged Care Homes (RACHs) to have access to appropriate telehealth facilities and equipment to enable their residents to virtually consult with their primary health care professionals, specialists and other clinicians.

#### **DESCRIPTION OF ACTIVITY**

The Darling Downs and West Moreton PHN invited RACHs in the region to participate in a digital capacity and capability assessment to determine gaps in RACH workforce and telehealth capacity. This enabled our PHN to develop targeted solutions as to what resources and training would be required to better enable the RACHs to provide their residents with telehealth services to access their primary health care professionals.

This activity continues to build on this initial assessment and use its findings by:

- Supporting the participating RACH's use the information gained from the individual and customised audit report relevant to their facility to increase their understanding of what is necessary to improve the facility's digital capacity and capability to improve telehealth access for their aged care residents.
- Promoting the use of enablers of digital health (such as My Health Record).
- Consulting with jurisdictional authorities to ensure these initiatives complement, and do not duplicate, efforts underway by State and Territory Governments to improve technological interoperability between the aged care and health systems.
- Providing training to participating RACF staff to support them to have the capabilities to assist their residents in accessing virtual consultation services.
- Implementing an evaluation process will complete this activity.

#### **NEEDS ASSESSMENT PRIORITY**

NEEDS ASSESSMENT PRIORITY	Identified Need
Accessible and responsive services to support patients with complex care needs associated with ageing	Care Across the Lifespan
Appropriate workforce capacity, capability and stability	Enablers
Effective use of digital health technology	





# Aged Care on Site Pharmacist (ACOP) Measure - RACH Support Grant Program

#### **ACTIVITY PRIORITIES AND DESCRIPTION**

#### **PROGRAM KEY PRIORITY AREA**

Population Health

#### **AIM OF ACTIVITY**

The program aims to increase the presence and use of on-site pharmacists in Residential Aged Care Homes (RACHs) in the Darling Downs and West Moreton Region. This activity will support RACHs to connect with community pharmacists that are available to assist with the management of medications for residents to improve safety and access to advice, work with RACH staff to improve health outcomes, and build trust with families and carers.

#### **DESCRIPTION OF ACTIVITY**

The Darling Downs and West Moreton will facilitate the successful implementation of the Aged Care On-Site Pharmacist Measure across Residential Aged Care Homes (RACHs) in our region. Our PHN will begin by identifying eligible pharmacists available to provide on-site services to RACHs and ensure that they meet the eligibility criteria to participate in the program.

The PHN will coordinate the provision of clear and detailed information about the initiative to RACHs within the region, in accordance with guidance issued by the Department of Health and Aged Care.

These activities may include:

- Conducting an assessment of Residential Aged Care Homes (RACH) and Pharmacies in the region to evaluate current service arrangements, identify existing gaps, and explore opportunities to optimise resource utilisation to effectively address unmet needs.
- Provision of summary information about eligible pharmacists that have expressed interest in the program, ensuring they are well-informed about the initiative and its benefits.
- Managing and responding to requests from RACHs seeking to engage eligible Pharmacists, acting as a liaison to connect RACHs with suitable candidates.

This will enable our PHN to utilise available resources in a way that addresses the unique needs of RACH's and pharmacists in our region, ensuring a more efficient, targeted and sustainable approach to matching.

Additionally, our PHN will provide participating RACHs with a list of eligible Pharmacists seeking employment under the initiative, helping to streamline the process of matching pharmacists with eligible RACH's and visa versa. The PHN will also support RACHs in successfully engaging Pharmacists, ensuring that the integration of these professionals into onsite roles are as seamless as possible.

Our PHN will utilise our established networks to facilitate communication and collaboration between RACHs, their on-site Pharmacists, the residents' General Practitioners, and other relevant healthcare professionals to ensure better coordination of healthcare services and enhance the quality of care provided to residents.

#### **CONSULTATION AND COLLABORATION**

Our PHN is consulting with RACHs in the Darling Downs and West Moreton region to ascertain the need and requirements for an ACOP and determining what supports they currently have in place. This information will be capture through our PHN - RACH Needs Assessment Survey being undertaken this year.

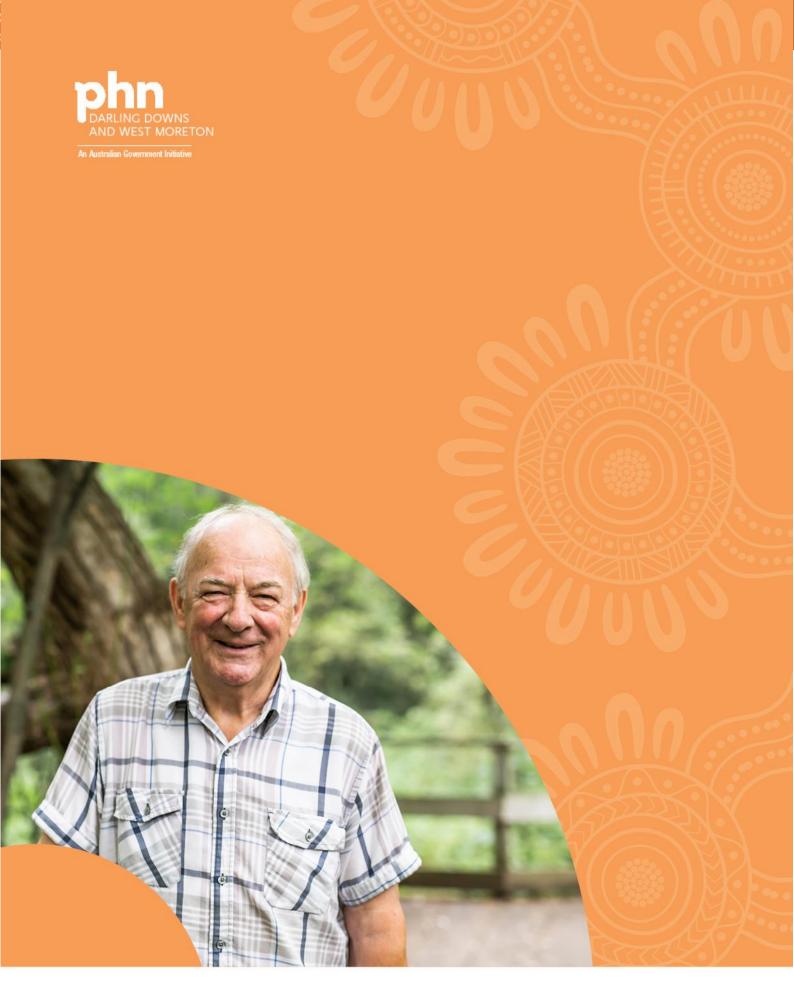
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#### **NEEDS ASSESSMENT PRIORITY**

NEEDS ASSESSMENT PRIORITY	Identified Need
Appropriate workforce capacity, capability and stability	Enablers



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