

# Aged Care Planning and Service Development Project

## What did you tell us? -

# Key messages from the service provider consultation

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# Overview

- Project overview
- Hume Region snapshot
- Consultation
  - What did you tell us?
  - Interpretation
- Next stage

# Project aim

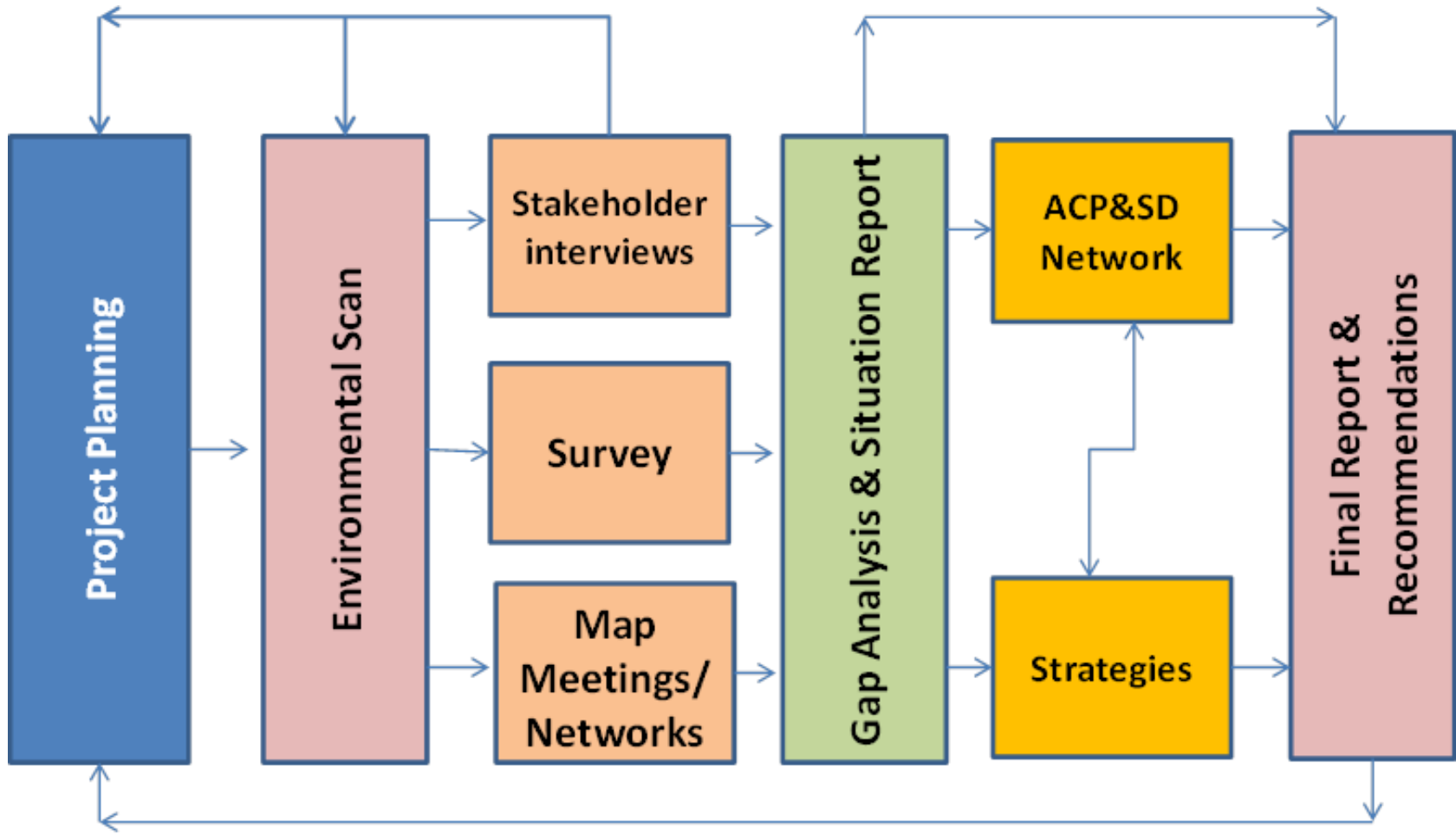
- To facilitate strategies to achieve the recommendations of the HIACP, through a partnership management approach;
  - Recommendation 1: Promote effective collaboration
  - Recommendation 2: Improve mechanisms to provide and share information



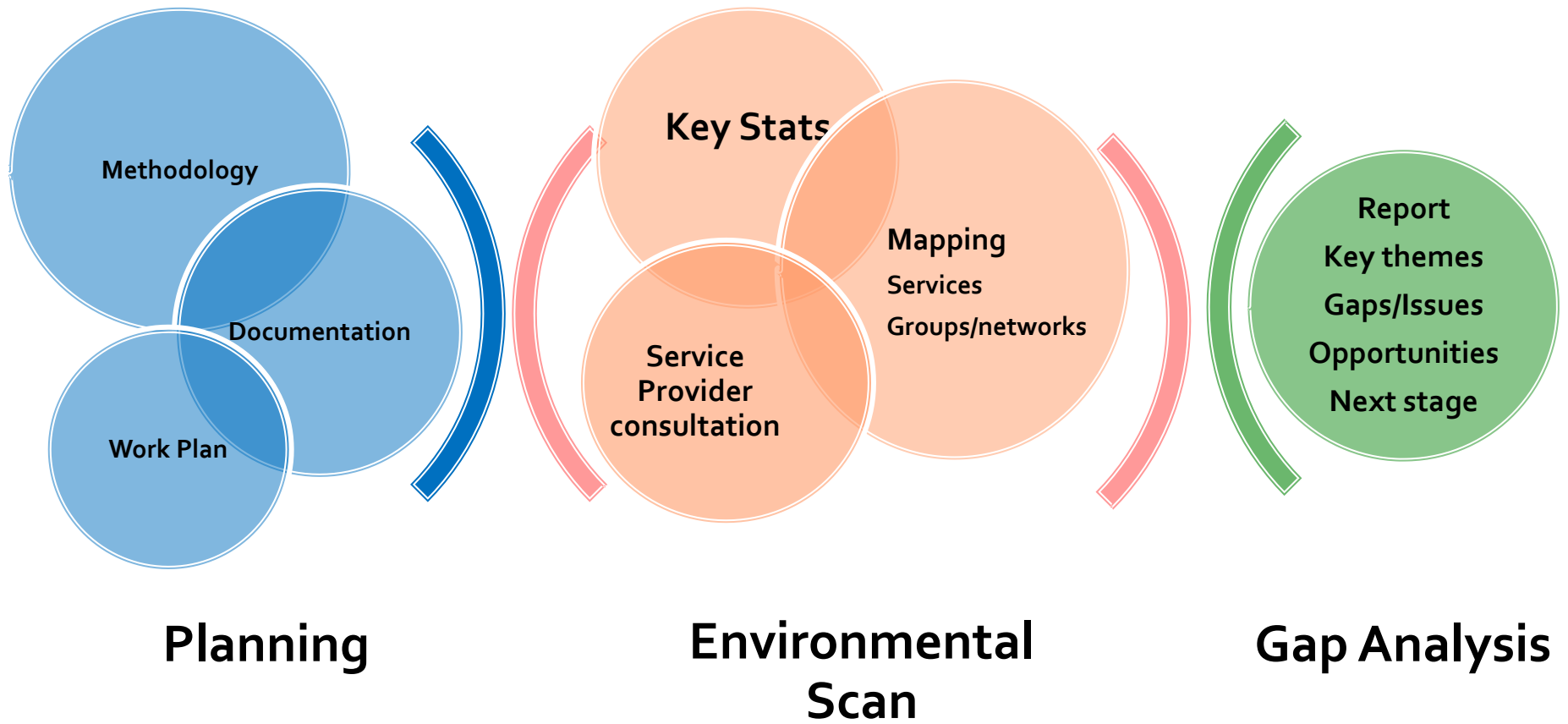
# Project objective

- To establish a sustainable platform of communication and engagement with all relevant stakeholders in aged care sector, to promote and support;
  - Collaborative planning
  - Service development
- Mechanism – proposed aged care planning and service development groups

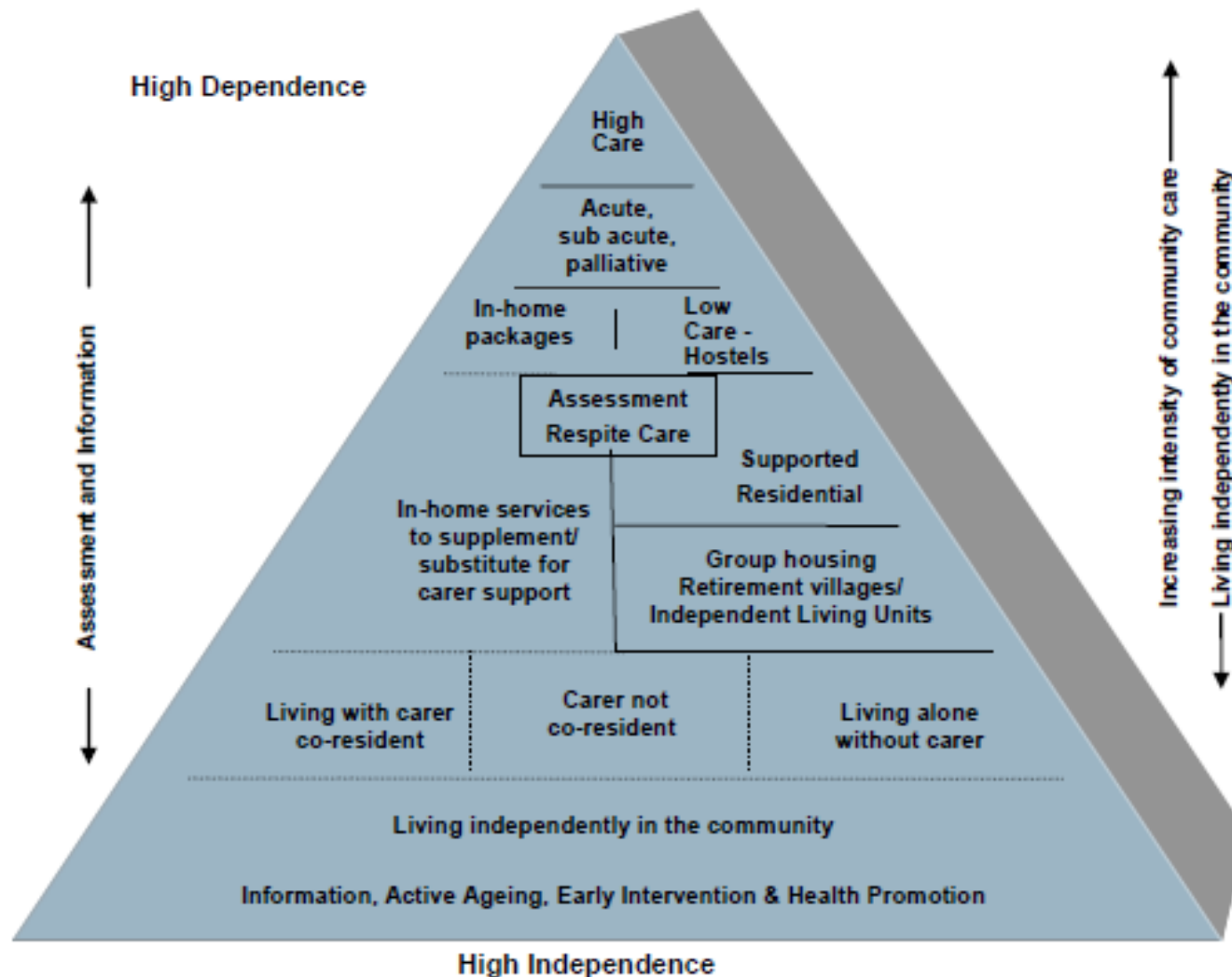
# Methodology



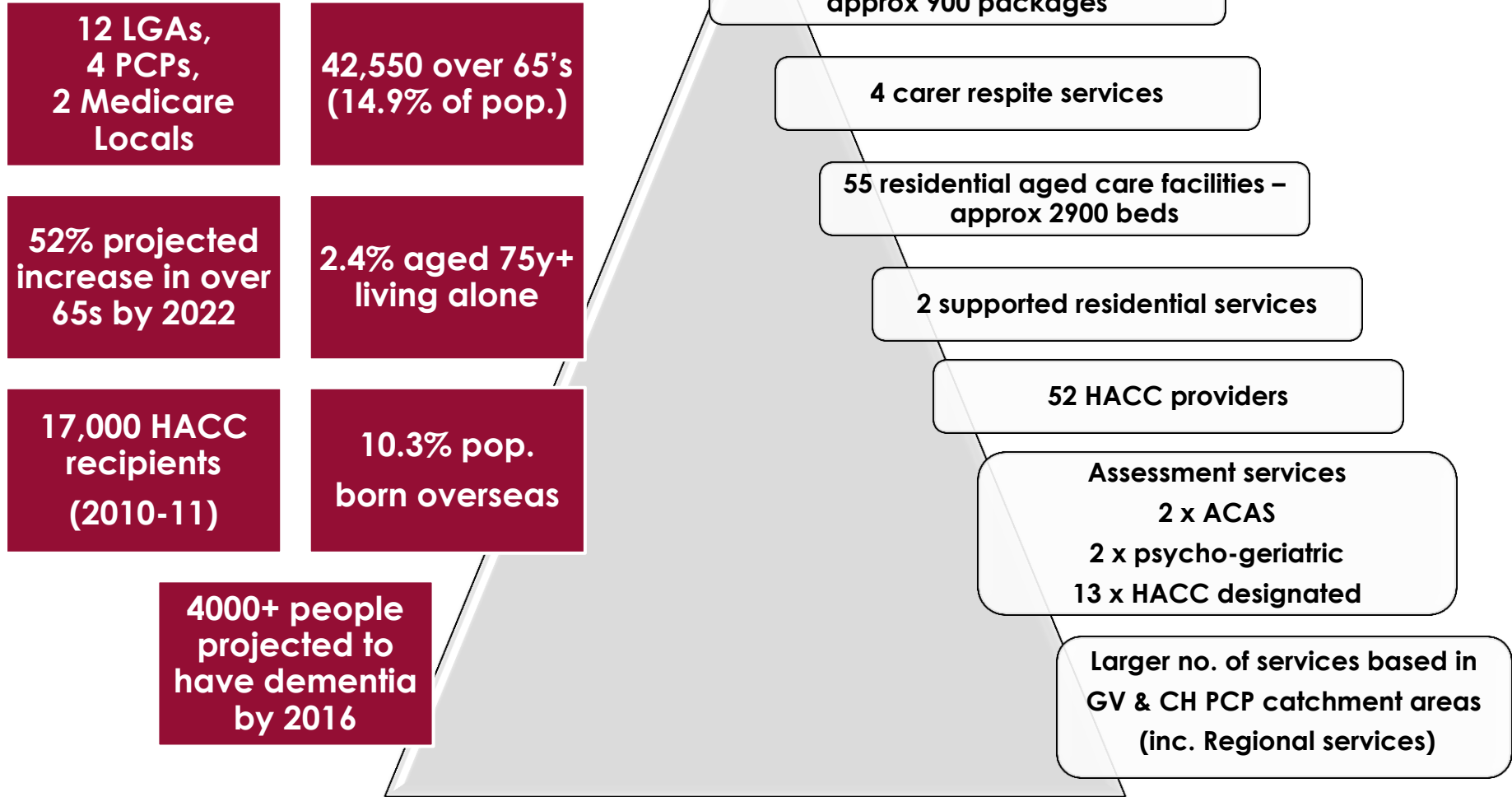
# Progress to date



# Aged care system overview



# Hume Region Snapshot



(ABS 2006, HIACP 2010)







170+ face to face  
interviews  
Comprehensive,  
but incomplete



On line survey  
132 respondents  
58 organisations  
Variety of sectors  
Varity of roles  
All LGAs



Meetings  
Regional  
Sub-regional  
LGA based  
Organisational

## Service Provider Consultations

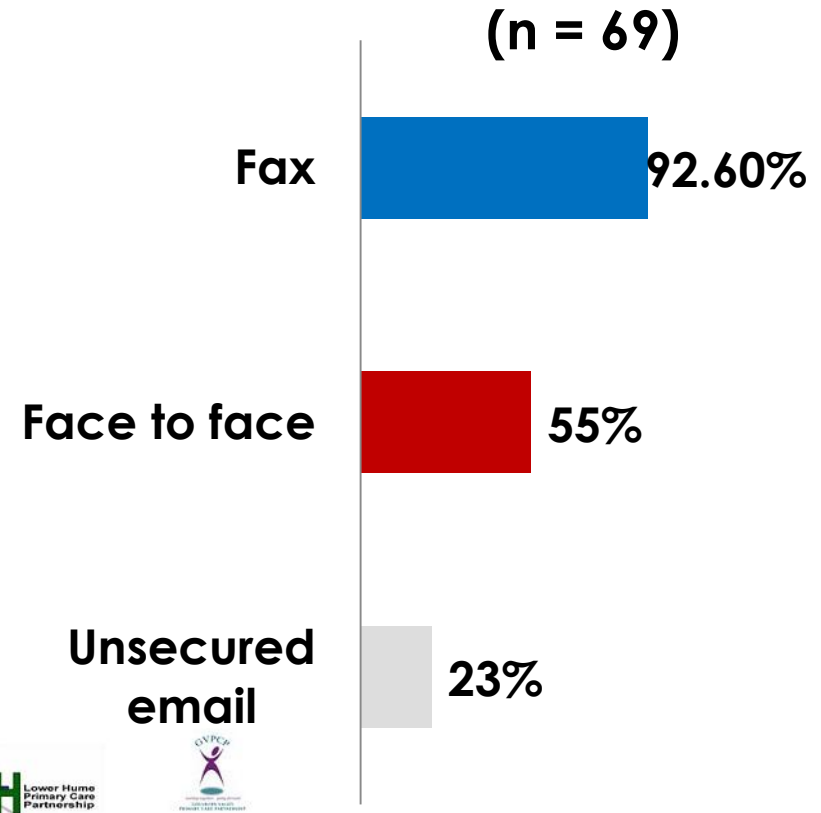
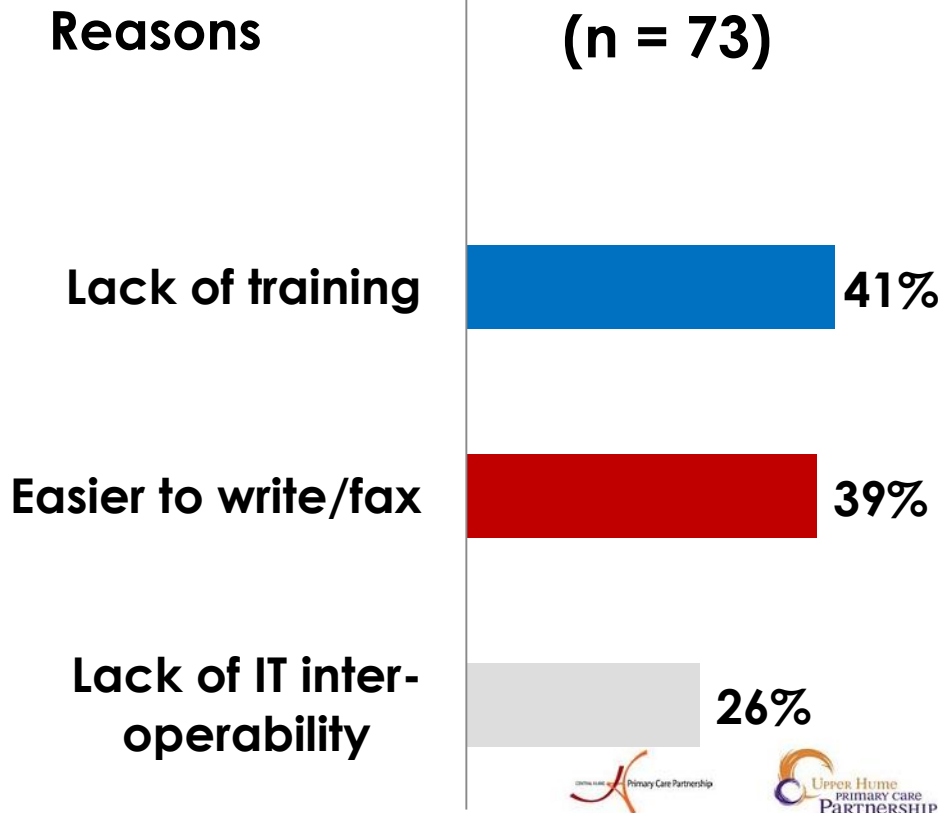
# Focus of consultation

- Service co-ordination and collaboration
- Client information sharing between providers (secure messaging and e-referral)
- Information about aged care services for the public

# Information sharing (e-referral & secure messaging)

50% did not use an electronic referral system

Other referral systems;



# Information sharing (Service Coordination Tool Template)

56.2% = primary referral tool (n=89)

## Reasons why not used as primary tool;



# Information sharing - gaps and issues

- ICT – issues with inter-operability
- User competence
- User confidence (in ICT system)
- Support to set up systems and processes e.g. PKI
- SCTT not widely embraced
- Single assessment processes – varying needs
- Common client records – security concerns
- HSD not kept up to date
- Reliance on individual staff knowledge
- Best practice – not widely shared
- Single point of access to information

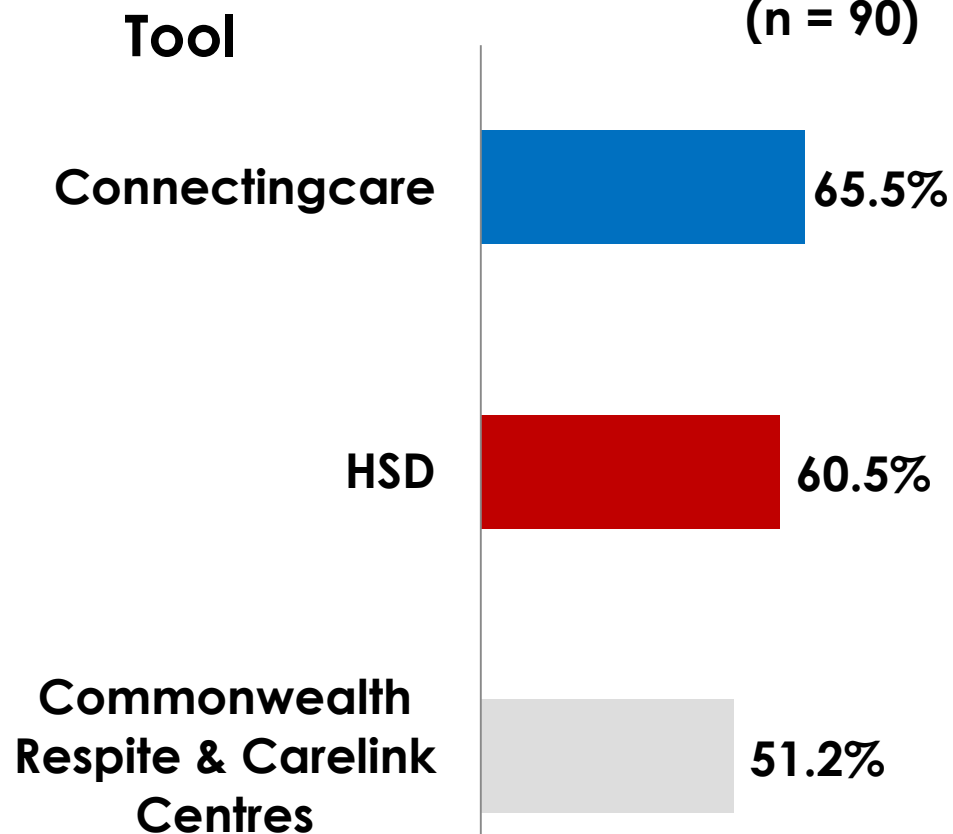
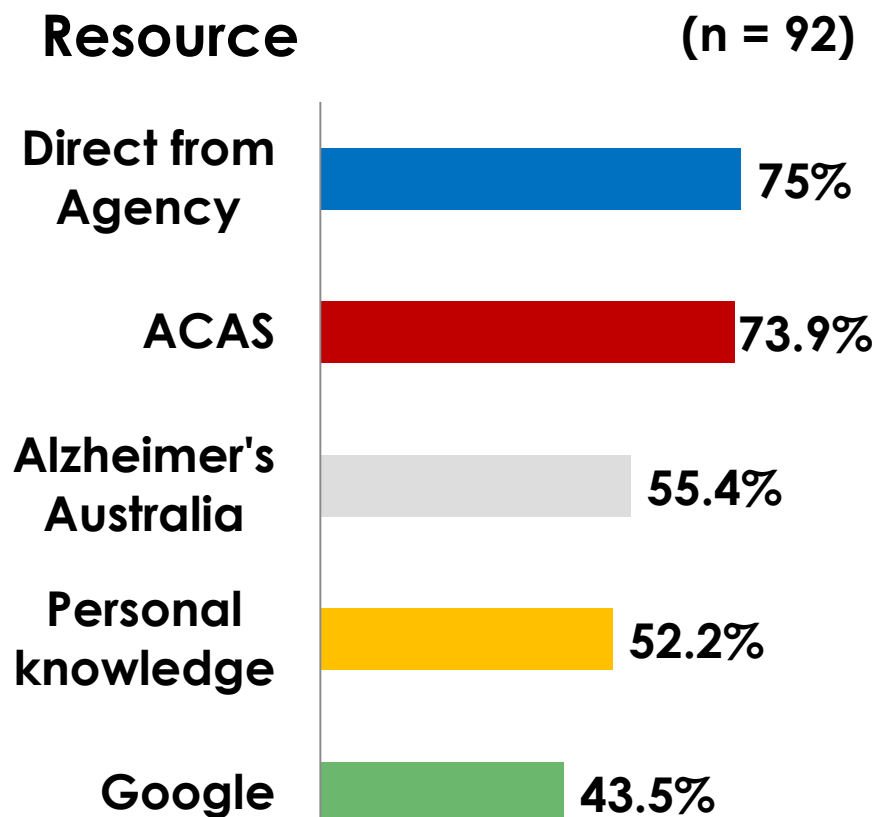
# Information for the public

- In general, *somewhat* to *very effective* in provision of information
- Identified room for improvement;
  - CALD groups
  - Aboriginal and Torres Straights Islander communities
- Barriers; (n=91)
  - Too much information – 42.9%
  - Difficult to keep staff up to date – 51%
  - Conflicting information – 57%

# Information sources

Trusted and used

Not trusted / not used



# Public info – gaps and issues

- Numerous resources - which are appropriate?
- Who gives out what information?
- “Official” tools not widely used
- Older people, and/or their carers, access information in a time of crisis
- Older persons awareness of what services are available is limited
- Access – information not widely available in multiple formats and in places where older people go

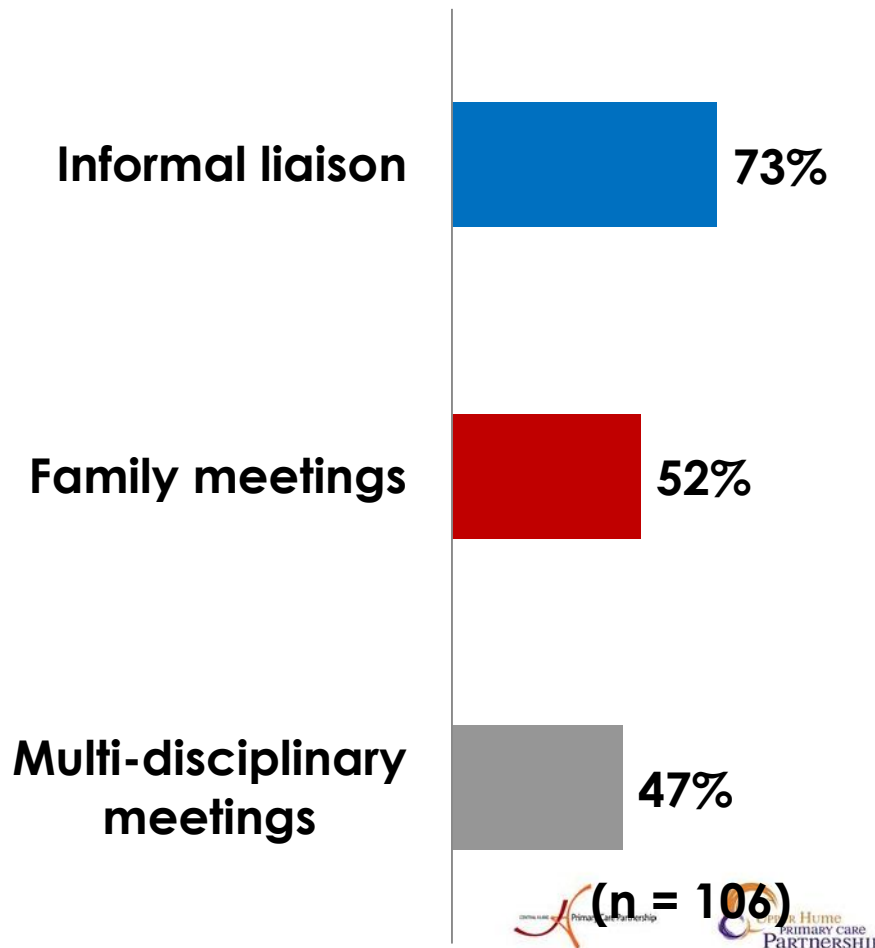


# Service coordination and collaboration

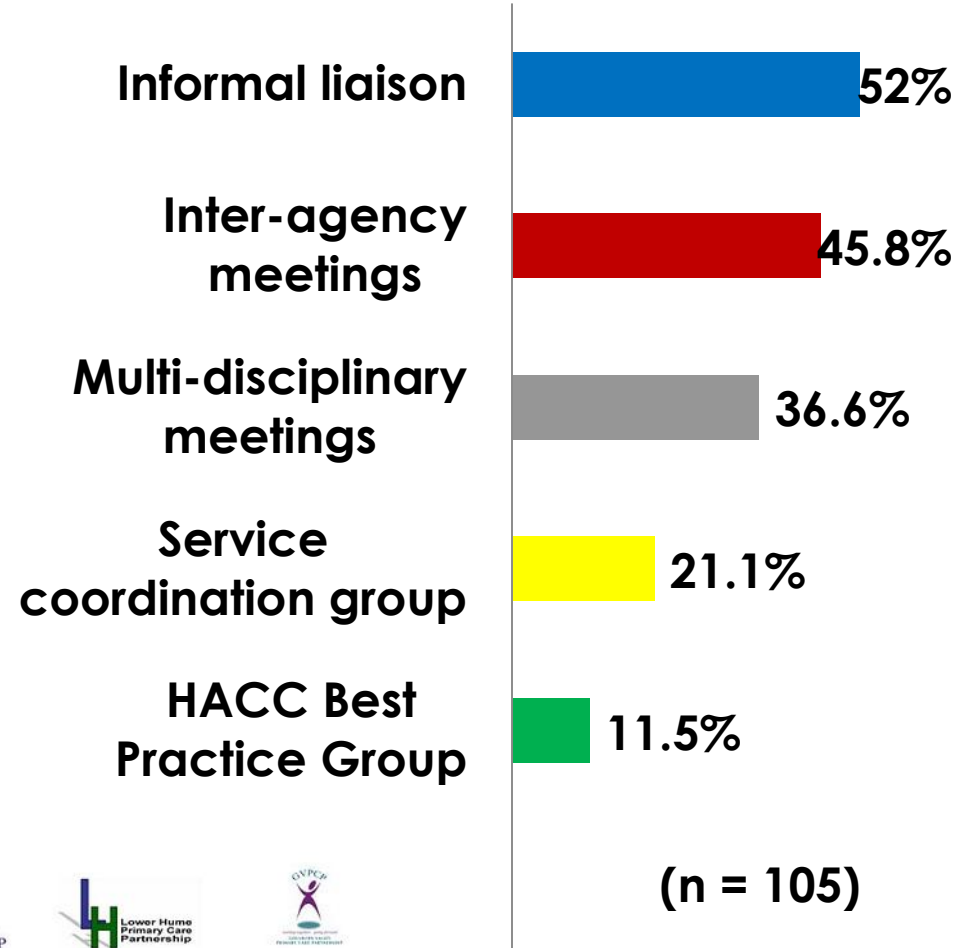
Individual client care

Working with other providers

## Mechanism



## Mechanism

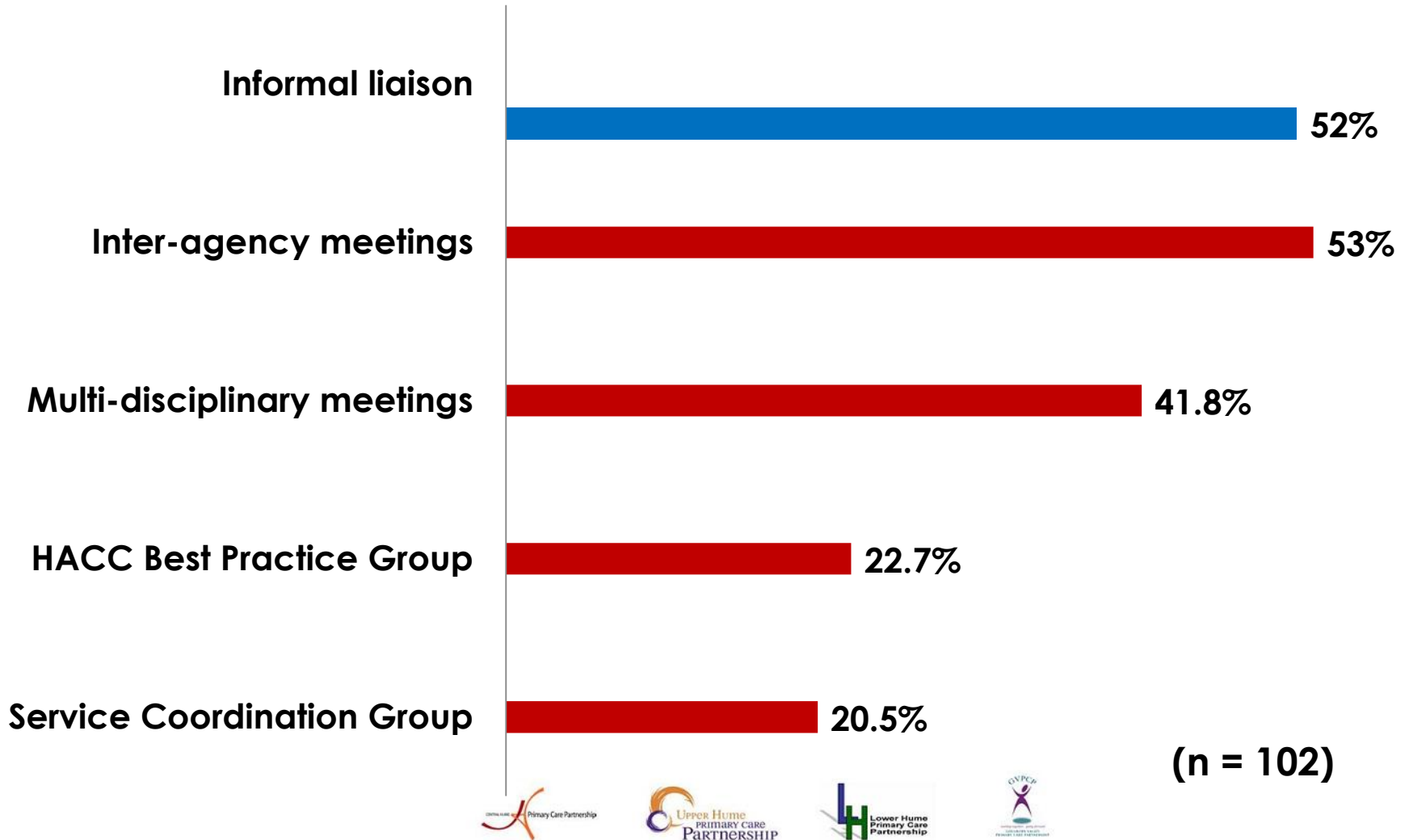


# Effectiveness of current collaboration

## Mechanisms

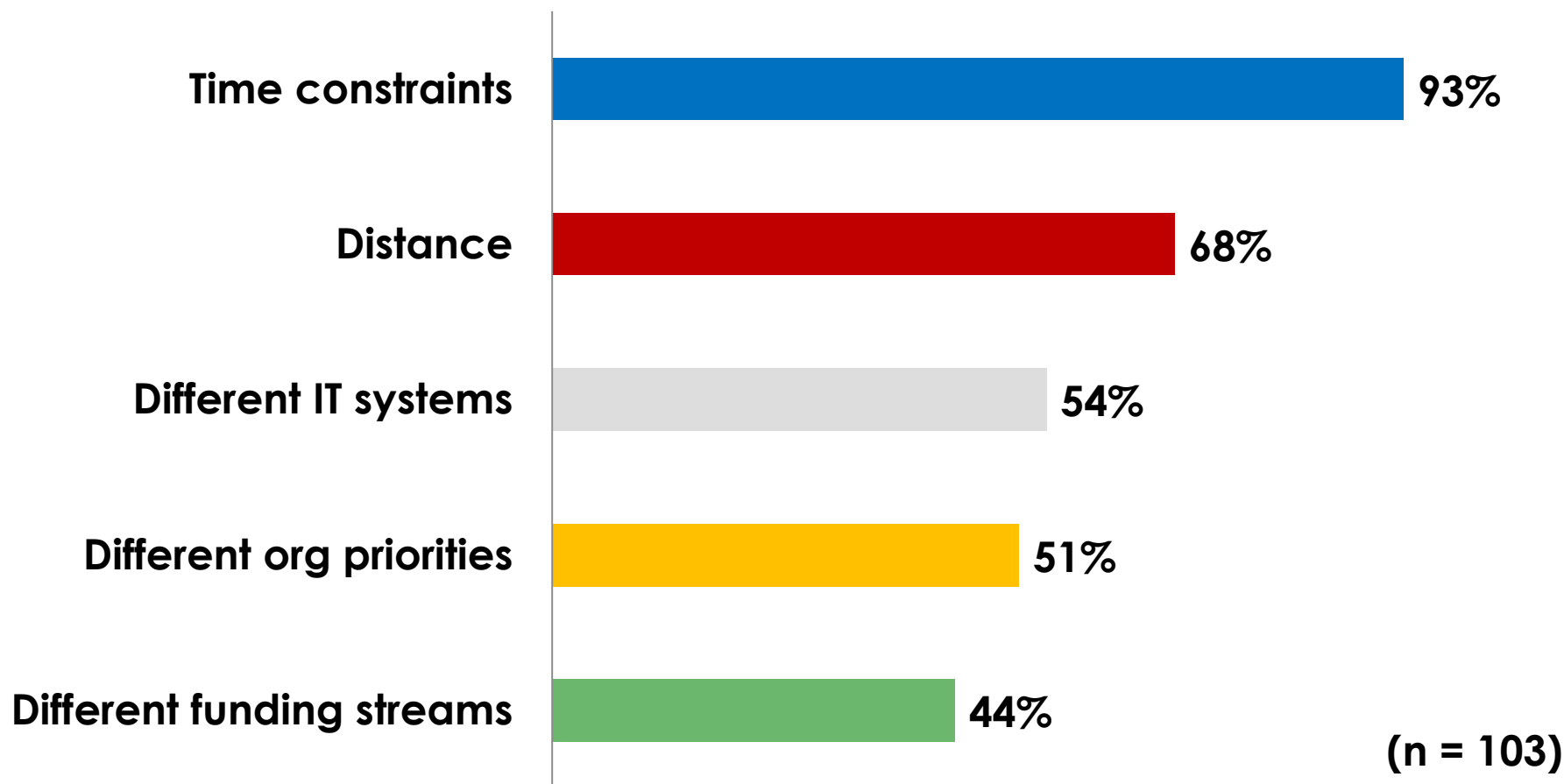
■ Somewhat

■ Very



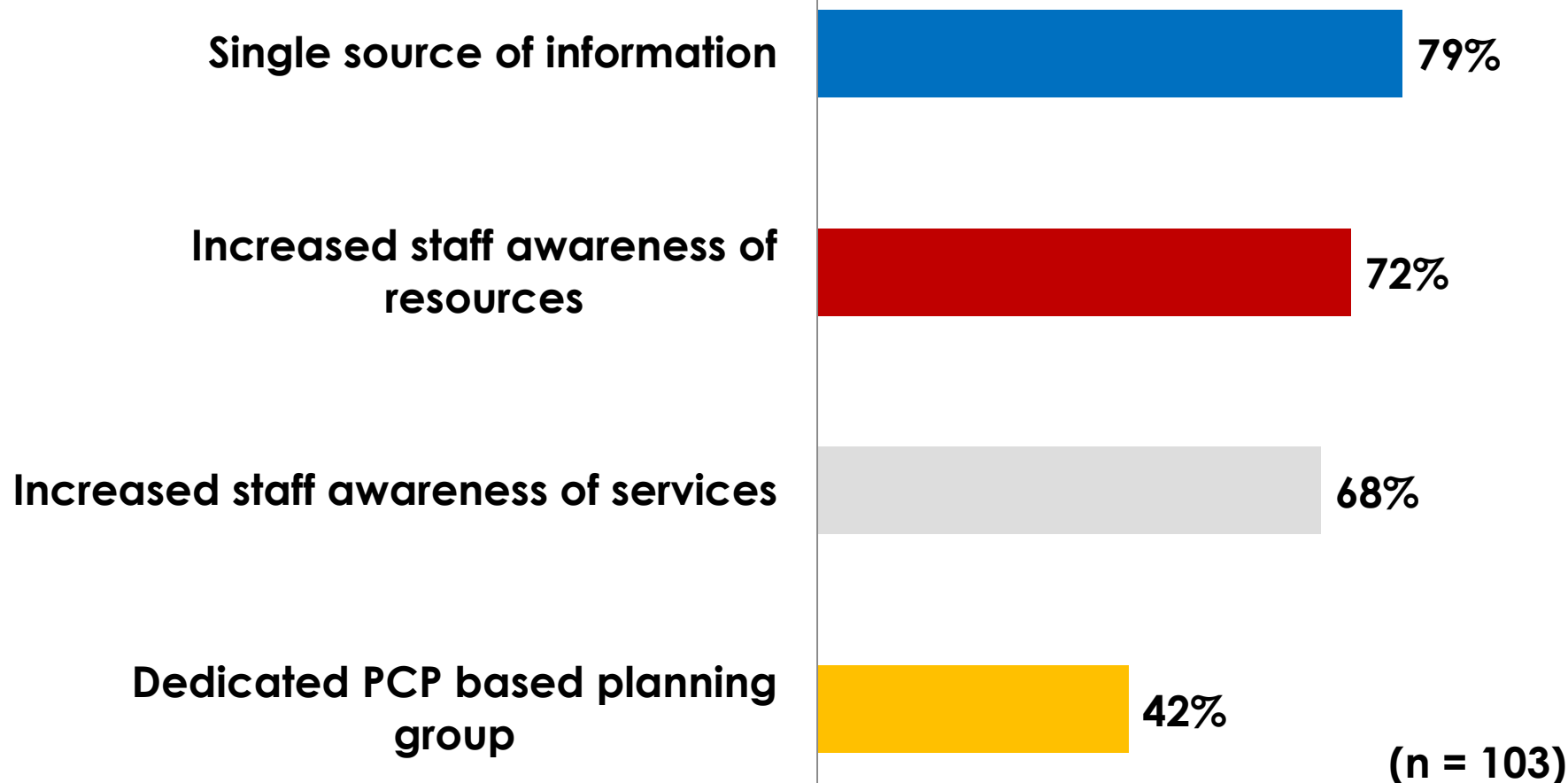
# Barriers to collaborative working

## Barriers



# Improving the client journey

## Strategies with high impact



# Collaborative working – gaps and issues

- Time and distance
- Numerous meetings /networks
- No single forum for all aged care sectors
- Minimal use of video conferencing
- Different priorities / competing demands within different sectors
- Multiple providers /stakeholders – how to include everyone?
- Competitive environment – trust issues
- Program / funding stream driven
- Lots of initiatives in aged care, but can occur in isolation



# Interpretation – What are aged care providers looking for?



## Leadership and Support

- Direction
  - National Aged Care Reforms
  - Priorities in Hume Region
- Guidance and resources
  - To support/facilitate collaboration
  - Support to organise and sustain meetings and groups

## Consistency and clarity

- Federal and State govts. giving consistent messages
- Dept. of Health giving consistent messages and initiatives to be system rather than funding stream/program driven
- Medicare Locals – unclear impacts on aged care
- Primary Care Partnerships (PCP) – aged care focus area – need consistent roll out across region

## Resources

- Funding
  - Care packages
  - Future of residential care (impact of national reforms)
  - ICT (infrastructure)
- Training
  - Joint training opportunities
  - Subsidised
  - Back fill costs
- Workforce
  - Ageing workforce
  - GPs
  - Limited specialists

## Information

- Who is doing what and where? (enabling referral and co-ordination of care)
- Single point of access to information for consumers and service providers
- Multiple information strategies
- Keeping up with changes in aged care – local, sub-regional, regional, state-wide, federal

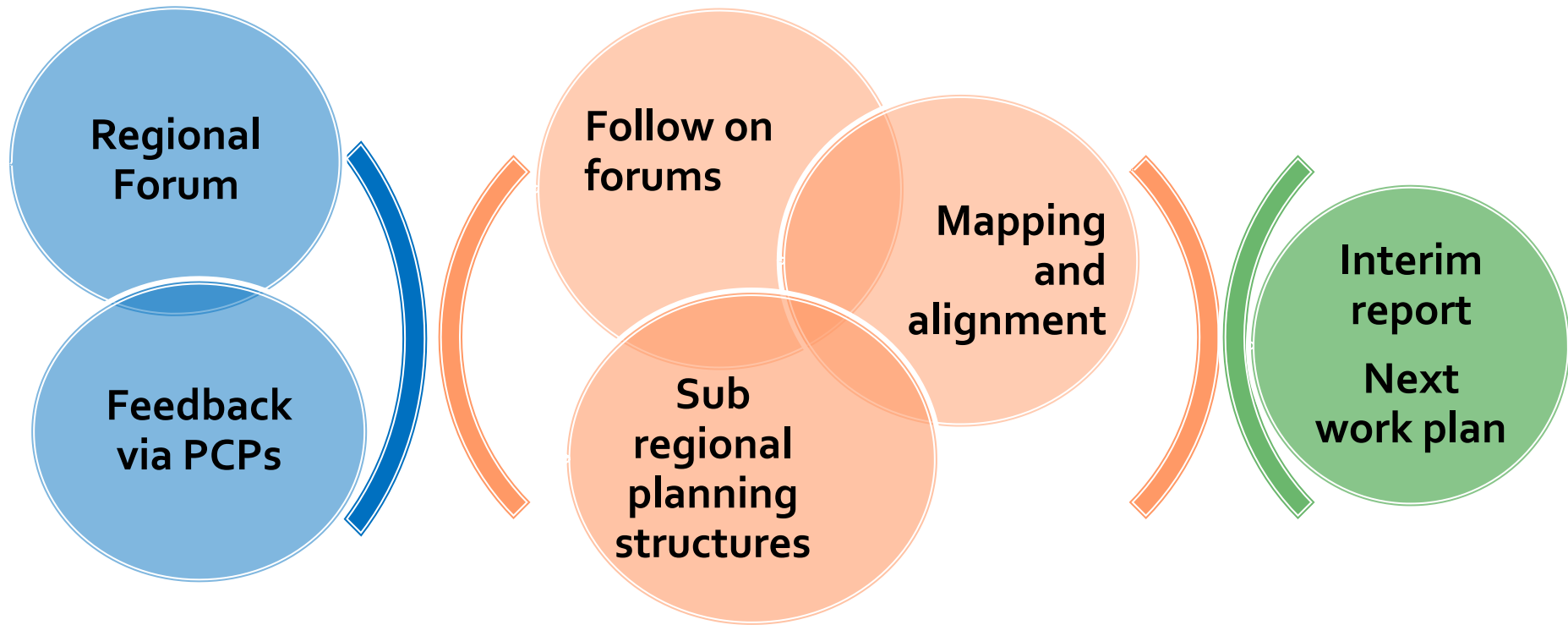


# Outcomes -

## What have we done with this feedback?

- Preliminary Gap Analysis and Situation Report – PCPs (next week)
- Summary Report - today
- Feedback to HIACC and Dept. of Health (Hume)
- Review original proposal for PCP based groups - today
- Influence future of project

# Next stage of project.....



**Implementation = planning & strategies**

**Review**

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