



Challenges and opportunities of Sub-acute health service access and provision for older Australians

International Federation of Ageing Conference

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Hyderabad June 2014

SALLY Project - Background

- ✦ In Australia, people aged over 65 are eligible for government funded aged care services.
- ✦ These can be provided in the persons home, or in a residential aged care facility setting.



SALLY Project - Background

- ✦ Aged Care recipients comprise a large proportion of health care costs, however most of this cost occurs in the acute setting.
- ✦ Subacute care occurs in the space between aged care and hospital care. It includes a range of health care services
- ✦ Optimal subacute care can reduce hospital admission times, improve health outcomes and prevent premature residential aged care admission.

AIM

- ✦ This project was developed to link older people to subacute health care services better, to enable older people to stay in the community setting.

SALLY Project - Background

Funding: Federal Department of Health and Ageing (now Department of Social Services) Grant Application 29 June 2013. Project has a 21 month duration (June 2013-March 2015).

Project Activities: To develop a series of small interventions to implement change at local level (Benetas & health care providers) to improve access to healthcare for Benetas clients and increased efficiency for Benetas staff

Project Opportunity: Translational research project with significant long term opportunity providing evidence to inform and support future advocacy, operational and policy decision making as part of the aged care reform agenda. Separation of rhetoric and reality.

SALLY Project - Mapping Services

✦ Participants:

- Benetas is a large not-for-profit aged care service provider in Victoria Australia. Benetas has 4000 clients, 1400 staff and 400 volunteers. One quarter of Benetas clients reside within Benetas 13 facilities.
- The region provides health care to 80,000 people.

✦ Methods:

- Client record review [4000 clients, in depth one year review of 164 clients; Staff interviews/focus groups [n=56]; client and family feedback
- Health service mapping; Service Provider consultation

SALLY Project - 6 Key Work Areas

★ RESULTS

- Identified 48 system level opportunities to improve subacute healthcare linkage, selected 6 working-groups comprised of health and aged care staff to address challenges.

- 1. Primary health care linkages**
- 2. Physical health care access - Non Emergency Patient Transport (NEPT)**
- 3. Aged Care Health Advisory Council (ACHAC)**
- 4. Health information management and access**
- 5. Transition Care Program evaluation**
- 6. Workforce capacity optimisation**

Aged Care Health Advisory Council

✦ Opportunity

- Aged and health care system fragmentation
- Lack of focus on community based aged care health service integration
- Limited knowledge and poor coordination of services and referral pathways

✦ Solution

- LGA based Council brings together major stakeholders and provides a strategy for improvement at a local level.

✦ Action

- Research Group to provide strategic regional aged care health care communication and capacity building plan

✦ Outcome

- Identify best practice models of service delivery and address fragmentation
- Improved service access/referral pathways and client focus
- Improved visibility of community based aged care service provision
- Advocacy, Policy Analysis and Recommendations

Primary Health Care: GP access and continuity of care

✦ Challenges

- General Practitioner Doctors (GP's) perform a gatekeeper function for health care
- Wide variation in GP/RACF relationship management and expectations (200 GPs' across 854 clients). Wide variation in models of review of aged care clients by GPs - some clients reviewed bi-annually, some reviewed as needed, some reviewed monthly
- Some access issues to preferred GP's (after hours, within timeframes etc)
- Limitations of available health management data impacting continuity of care

✦ Solution

- Checklist agreement between GP and RACF/Community Case manager upon admission to aged care in both residential and community setting

✦ Action

- Review current GP/RACF relationships. Current national guidelines are complex and therefore not used
- Bring together GP and Aged Care to create a GP checklist upon admission

✦ Outcome

- Single page checklist that the GP and aged care providers can select options. The checklist covers client information, access and expectations of care.

Health Information Management

✦ Opportunity

- Wide variation in quality of client records impacting communication with health care providers & continuity of care
- Limitations of electronic data availability for business analysis and reporting

✦ Solution

- Improve quality of client records to improve communication & continuity of care

✦ Action

- “Minimum” dataset developed
- Staff training to improve information quality and electronic data availability

✦ Outcome

- Improved quality of client records, Improved communication, continuity of care, and client outcomes

Summary

- ✦ **Project Overview:** To analyse existing pathways to health care for clients and identify opportunities for increased efficiency and improved access for the benefit of clients, aged care service providers, and optimal health resource allocation
- ✦ Ageing in place at home - service provision has to involve both health and ageing sectors
- ✦ But both sectors have different expectations, information management systems and data needs
- ✦ Care provision must build multidisciplinary relationships and include opportunities for cross sectoral communication
- ✦ Systems must be focussed on the client, not government regulation requirements or system limitations



- ✦ Thankyou 😊
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