# 12 Aged care services

The aged care system comprises all services specifically designed to meet the care and support needs of frail older Australians. This chapter focuses on government funded residential and community care for older people and services designed for the carers of older people. Some government expenditure on aged care is not reported, but continual improvements are being made to the coverage and quality of the data. The services covered include:

- residential services, which provide high care, low care and residential respite care (*Report on Government Services 2007* (2007 Report), box 12.1)
- community care services, which include Home and Community Care (HACC) program services, Community Aged Care Packages (CACPs), the Extended Aged Care at Home (EACH) program and Veterans' Home Care (VHC)<sup>1</sup>
- respite services, which include HACC respite and centre-based day care and the National Respite for Carers Program (NRCP)
- assessment services, which are largely provided by Aged Care Assessment Teams (ACATs).

#### Service overview

Services for older people are provided on the basis of the frailty or functional disability of the recipients rather than specific age criteria. Nevertheless, in the absence of more specific information, this Report uses people aged 70 years or over as a proxy for the likelihood of a person in the general population requiring these services. Certain groups (notably Indigenous people) may require various services at a younger age. For Indigenous people, those aged 50 years or over are used as a proxy for the likelihood of requiring aged care services. The Australian Government also uses these age proxies for planning the allocation of residential care, CACPs and EACH packages.

Government funded aged care services covered in this chapter relate to the three levels of government (Australian, State and Territory, and some local) involved in

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<sup>&</sup>lt;sup>1</sup> Unless otherwise stated, HACC expenditure excludes the Department of Veterans' Affairs expenditure on VHC.

service funding and delivery. The formal, publicly funded services covered represent only a small proportion of total assistance provided to frail older people. Extended family and partners are the largest source of emotional, practical and financial support for older people: more than 90 per cent of older people living in the community in 2003 who required help with self-care, mobility or communications received assistance from the informal care network of family, friends and neighbours (ABS 2004a). Many people receive assistance from both formal aged care services and informal sources. Older people also purchase support services in the private market, and these services are not covered in this chapter.

## Indigenous data in the aged care chapter

The aged care chapter in the 2007 Report contains the following information on Indigenous people:

- ACAT assessment rates per 1000 target population, 2004-05
- number of Indigenous-specific services, 30 June 2006
- age profile and target population differences between Indigenous and other Australians, June 2001
- variation in the rate of access of the special needs target population from their proportion in the population as a whole, June 2006
- aged care residents per 1000 target population, 30 June 2006
- CACP recipients per 1000 target population, 30 June 2006
- recipients of HACC services by age, 2005-06
- Commonwealth Carelink centres, contacts per 1000 people, 30 June 2006.

### Supporting tables

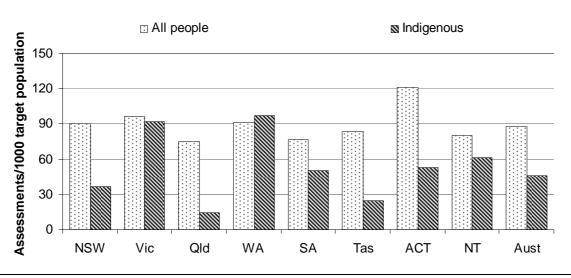
Supporting tables for data within the aged care services chapter of this compendium are contained in attachment 12A of the compendium. These tables are identified in references throughout this chapter by an 'A' suffix (for example, table 12A.3 is table 3 in the aged care services attachment). As the data are directly sourced from the 2007 Report, the compendium also notes where the original table, figure or text in the 2007 Report can be found. For example, where the compendium refers to '2007 Report, p. 12.15' this is page 15 of chapter 12 of the 2007 Report, and '2007 Report, table 12A.2' is attachment table 2 of attachment 12 of the 2007 Report.

#### Assessment services

The Australian Government established the Aged Care Assessment Program (ACAP) in 1984, based on the assessment processes used by State and Territory health services to determine (1) eligibility for admission into residential care and (2) the level of care required (and thus the subsidy paid to such services). The core objective of the ACAP is to assess the needs of frail older people and recommend appropriate services. Assessment and recommendation by ACATs are mandatory for admission to residential care or receipt of a CACP, EACH package, EACH Dementia package or Transition Care Program (TCP). People may also be referred by ACATs to other services, such as those funded by the HACC program. An ACAT referral is not mandatory for receipt of other services, such as HACC and VHC services.

The number of assessments per 1000 target population varied across jurisdictions in 2004-05. The national rate was 88.1 assessments per 1000 people aged 70 years or over and Indigenous people aged 50 years or over and 46.3 per 1000 Indigenous people aged 50 years or over (figure 12.1).





<sup>&</sup>lt;sup>a</sup> Includes ACAT assessments for all services. <sup>b</sup> 'All people' includes all assessments of people aged 70 years or over and Indigenous people aged 50 years or over per 1000 people aged 70 years or over and Indigenous people aged 50 years or over. <sup>c</sup> 'Indigenous' includes all assessments of Indigenous people aged 50 or over per 1000 Indigenous people aged 50 years or over. <sup>d</sup> The number of Indigenous assessments is based on self-identification of Indigenous status.

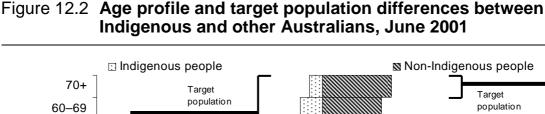
Source: Department of Health and Ageing (DoHA) (unpublished); table 12A.9; 2007 Report, figure 12.1, p. 12.5.

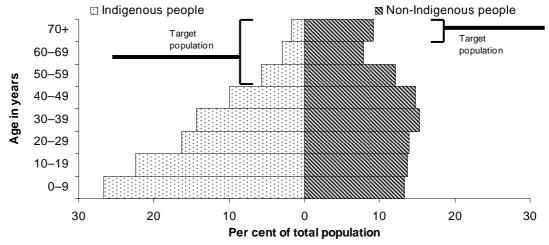
## Indigenous-specific services

Aboriginal and Torres Strait Islander people access mainstream services, as well as those managed by Aboriginal and Torres Strait Islander organisations. There are 29 services funded under the Aged Care Act that operate under the auspices of those organisations, providing 744 places at 30 June 2006. In addition, at 30 June 2006 there were 580 operational flexible aged care places, delivered under the National Aboriginal and Torres Strait Islander Aged Care Strategy. These flexible care places help ensure that Aboriginal and Torres Strait Islander people can access culturally appropriate care services as close as possible to their communities (DoHA unpublished). The Australian Government approved an additional 150 places to be allocated over three years.

## Characteristics of older Indigenous people

The Australian Bureau of Statistics (ABS) estimates that about 54 100 Indigenous people were aged 50 years or over in Australia at 30 June 2006 (table 12A.1). Although the Indigenous population is also ageing, there are marked differences in the age profile of Indigenous Australians compared with non-Indigenous Australians (figure 12.2). The ABS estimates that for both males and females, life expectancy at birth in the Indigenous population is around 17 years less than in the total Australian population (ABS 2004b). These figures indicate that Indigenous people are likely to need aged care services earlier in life, compared with the general population.





Source: ABS (2004c); 2007 Report, figure 12.9, p. 12.18.

# Framework of performance indicators

Data for Indigenous people are reported for a subset of the performance indicators for aged care services in the 2007 Report. It is important to interpret these data in the context of the broader performance indicator framework outlined in figure 12.3. The performance indicator framework shows which data are comparable in the 2007 Report. For data that are not considered directly comparable, the text includes relevant caveats and supporting commentary.

People born in a non-English speaking country Use by different Equity Access Indigenous people groups disadvantaged users Veterans Objectives Geographic area Waiting times for residential care Timeliness Access Waiting times for Social participation in the community community care PERFORMANCE Assessed longer term care Assessment/ arrangements streaming Maintenance of Targeting individual functioning Effectiveness Appropriateness Unmet need Long-term aged care in public Enabling people hospitals with care needs Care to live in the Intensity of care community Compliance with service standards for residential care Independent Complaints appraisal Quality Client with service perceptions standards for community care Client appraisal of service standards Cost per output unit Inputs per Efficiency output unit Expenditure per Other head of target population Outputs Outcomes Provided on a comparable basis for this Report subject to caveats in each chart or table Information not complete or not directly comparable Text Yet to be developed or not collected for this Report

Figure 12.3 Performance indicators for aged care services

Source: 2007 Report, figure 12.11, p. 12.24.

## Use by different groups

'Use by different groups' is an output indicator of equity (box 12.1).

# Box 12.1 Use by different groups

A key national objective of the aged care system is to provide equitable access to aged care services for all people who require these services. 'Use by different groups' is a proxy indicator of equitable access. Various groups are identified by the Aged Care Act and its principles (regulations) as having special needs, including people from Indigenous communities, people born in non-English speaking countries, people who live in rural or remote areas, people who are financially or socially disadvantaged, and veterans (including widows and widowers of veterans). The indicator is reported for each special needs group except veterans, using the following definitions:

- the number of people born in non-English speaking countries using residential services, CACPs, EACH and HACC services, divided by the number of people born in non-English speaking countries aged 70 years or over benchmarked against the rate at which the general population accesses the service
- the number of Indigenous people using residential services, CACP, EACH and HACC services, divided by the number of Indigenous people aged 50 years or over (because Indigenous people tend to require aged care services at a younger age than the general population) benchmarked against the rate at which the general population accesses the service
- the rate of contacts with Commonwealth Carelink Centres for Indigenous people compared with all people.

In general, usage rates for special needs groups similar to those for the broader aged care population are desirable, but interpretation of results differs for some special needs groups because:

 there is evidence that Indigenous people have higher disability prevalence rates than those of the general population, which suggests a greater level of need for services compared with those in the broader aged care population.

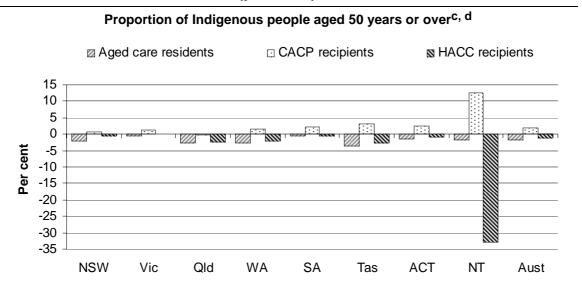
Several factors need to be considered in interpreting the results for this set of indicators:

- Cultural differences may influence the extent to which people born in non-English speaking countries use different types of services.
- Cultural differences and geographic location may influence the extent to which Indigenous people use different types of services.
- The availability of informal care and support may influence the use of aged care services in different population groups.

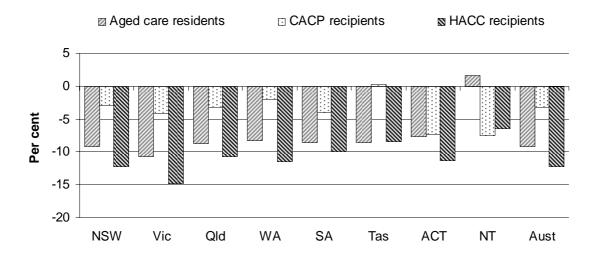
#### Access to residential services

The proportion of Indigenous aged care recipients and those born in a mainly non-English speaking country accessing aged care services at 30 June 2006, with the exception of the NT, was lower across the jurisdictions than their proportion of the population as a whole. Figure 12.4 reflects the variation in the rate of access of the special needs target population from their proportion in the population as a whole. If the special needs group accessed services at the same rate as the general population, all bars in the chart would be at zero. If they access services at a greater rate the bar would be positive, if they access services as a lower rate, the bar would be negative (figure 12.4). Care should be taken in interpreting this figure as the magnitude of variations are also influenced by the proportion of the special needs group in the population as a whole (table 12A.5).

Figure 12.4 Variation in the rate of access of the special needs target population from their proportion in the population as a whole, June 2006 (per cent)<sup>a, b</sup>



Proportion of residents born in a mainly non-English speaking country aged 70 years or over<sup>e</sup>



<sup>&</sup>lt;sup>a</sup> The proportion of a HACC agencies that submitted data for the year varied between jurisdictions and actual service levels were higher than stated. 
<sup>b</sup> Reports provisional HACC data that have not been validated and may be subject to revision. 
<sup>c</sup> Charts Indigenous aged care residents, CACP recipients and HACC clients as a proportion of all aged care residents, CACP recipients and HACC clients respectively. 
<sup>d</sup> The magnitude of the variation in the NT partly reflects the relatively large proportion of Indigenous people in the population.
<sup>e</sup> Charts aged care residents, CACP recipients and HACC clients from a non-English speaking country as a proportion of all aged care residents, CACP recipients and HACC clients respectively.

Source: DoHA (unpublished); table 12A.5; 2007 Report, figure 12.12, p. 12.27.

In all jurisdictions at 30 June 2006, on average, Indigenous people and people born in non-English speaking countries had lower rates of use of aged care residential

services (22.8 and 47.0 per thousand of the relevant target populations respectively), compared with the population as a whole (79.3 per thousand) (figure 12.5).

Figure 12.5 Residents per 1000 target population, 30 June 2006a, b, c



a All residents data are per 1000 people aged 70 years or over plus Indigenous people aged 50–69 years.
b Indigenous residents data are per 1000 Indigenous people aged 50 years or over.
c Data for residents from a non-English speaking country are per 1000 people from non-English speaking countries aged 70 years or over.

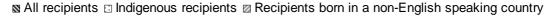
Source: DoHA (unpublished); tables 12A.2 and 12A.3; 2007 Report, table 12A.14; 2007 Report, figure 12.13, p. 12.28.

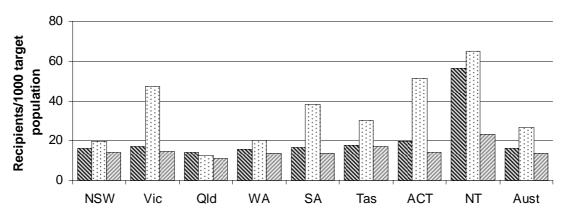
## Access to community aged care packages

The number of CACP recipients per 1000 people aged 70 years or over plus Indigenous people aged 50–69 years has grown in recent years, but is still small relative to the number of recipients of residential care. At June 2006, 16.3 per 1000 of the target population received CACP services compared with 79.3 recipients of residential care, although this varied across jurisdictions (table 12A.2).

The number of Indigenous CACP recipients per 1000 Indigenous people aged 50 years or over was 26.6 nationally and the numbers of CACP recipients from non-English speaking countries per 1000 of the relevant target population was 13.8 nationally (figure 12.6).

Figure 12.6 Community Aged Care Package recipients per 1000 target population, 30 June 2006<sup>a, b, c, d, e</sup>





<sup>a</sup> All recipients data are per 1000 people aged 70 years or over plus Indigenous people aged 50–69 years.
<sup>b</sup> Indigenous recipients data are per 1000 Indigenous people aged 50 years or over.
<sup>c</sup> Data for recipients from non-English speaking countries are per 1000 people from non-English speaking countries aged 70 years or over.
<sup>d</sup> The ACT has a very small Indigenous population aged 50 years or over (table 12A.1), and a small number of packages will result in a very high provision ratio.
<sup>e</sup> CACPs provide a more flexible model of care more suitable to remote Indigenous communities, so areas such as the NT have a higher rate of CACP recipients per 1000 people.

Source: DoHA (unpublished); tables 12A.2 and 12A.3; 2007 Report, table 12A.14; 2007 Report, figure 12.15, p. 12.30.

Age-sex specific usage rates for CACP and EACH, by jurisdiction, remoteness and Indigenous usage vary between jurisdictions and remoteness categories for CACP. For EACH, the differences are less marked. However, the EACH program is small but growing rapidly (table 12A.11 and 2007 Report, tables 12A.58–62 and 12A.64).

### Access to the Home and Community Care program

Home and Community Care services are provided in the client's home or community for people with a severe, profound or moderate disability and their carers. The focus of this chapter is people 70 years and over and Indigenous people aged over 50.

The proportion of HACC recipients aged 70 years or over during 2005-06 was 68.2 per cent (table 12A.6). The number of service hours per 1000 people aged 70 years or over plus Indigenous people aged 50–69 years was 12 194 nationally, and the number of meals provided per 1000 people aged 70 years or over plus Indigenous people aged 50–69 was 5380 nationally (table 12.1). HACC agencies that submitted the data as a proportion of all HACC agencies varies across jurisdictions so comparisons between jurisdictions should be made with care.

Table 12.1 HACC services received, 2005-06 (per 1000 people aged 70 years or over plus Indigenous people aged 50–69 years)<sup>a, b,</sup>

|  | Unit | NSW    | Vic    | Qld    | WA     | SAd    | Tas    | ACT    | NT     | Aust   |
|--|------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Percentage of agencies that reported MDS |      |        |        |        |        |        |        |        |        |        |
| data                                     | %    | 81     | 90     | 91     | 97     | 89     | 83     | 100    | 94     | 86     |
| Total hours <sup>e</sup>                 |      |        |        |        |        |        |        |        |        |        |
| Major cities                             | hrs. | 8 582  | 13 950 | 11 940 | 16 797 | 9 083  |        | 10 750 |        | 11 621 |
| Inner regional                           | hrs. | 9 190  | 19 462 | 10 597 | 16 458 | 6 953  | 10 179 |        |        | 12 420 |
| Outer regional                           | hrs. | 10 888 | 27 887 | 11 004 | 17 906 | 6 927  | 9 852  |        | 7 544  | 13 130 |
| Remote                                   | hrs. | 13 963 | 27 675 | 11 736 | 16 934 | 13 430 | 12 538 |        | 23 083 | 14 950 |
| Very remote                              | hrs. | 9 717  |        | 16 052 | 21 404 | 26 886 | 26 721 |        | 52 365 | 25 232 |
| All areas                                | hrs. | 8 522  | 16 114 | 11 533 | 16 976 | 8 840  | 10 216 | 10 770 | 20 625 | 12 194 |
| Total meals <sup>f</sup>                 |      |        |        |        |        |        |        |        |        |        |
| Major cities                             | no.  | 4 491  | 5 328  | 5 289  | 5 686  | 957    |        | 3 873  |        | 4 637  |
| Inner regional                           | no.  | 6 687  | 8 832  | 5 455  | 5 928  | 477    | 5 475  |        |        | 6 407  |
| Outer regional                           | no.  | 8 089  | 8 879  | 5 419  | 5 376  | 1 435  | 7 040  |        | 9 132  | 6 346  |
| Remote                                   | no.  | 7 605  | 5 028  | 5 493  | 7 405  | 1 875  | 5 826  |        | 18 994 | 6 739  |
| Very remote                              | no.  | 1 791  |        | 8 844  | 19 769 | 8 456  | 7 813  |        | 53 066 | 19 738 |
| All areas                                | no.  | 5 295  | 6 333  | 5 430  | 6 064  | 1 041  | 6 022  | 3 882  | 20 866 | 5 380  |

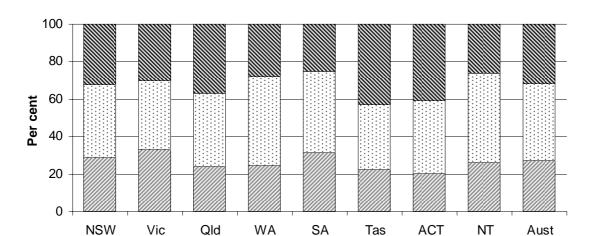
a Data represent HACC services received by people aged 70 years or over plus Indigenous people aged 50–69 years (2007 Report, tables 12A.20–12A.25) as distinct from HACC services received by HACC target population in all age groups (2007 Report, tables 12A.26–12A.31).
b The proportion of HACC agencies that submitted data for the year varied between jurisdictions and actual service levels were higher than stated.
C Reports provisional HACC data that have not been validated and may be subject to revision.
d The number of meals may be understated in SA due to slow implementation of the Minimum Data Set by Meals on Wheels.
e See 2007 Report, table 12A.20 for a full list of categories.
f Includes home meals and centre meals... Not applicable.

Source: DoHA (unpublished); 2007 Report, tables 12A.20-12A.25; 2007 Report, table 12.6, p. 12.31.

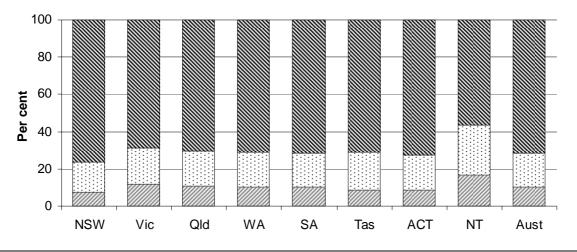
Reported use of HACC services showed a substantial difference between all users and Indigenous users across all age groups in 2005-06. This reflects the difference in morbidity and mortality trends between Indigenous people and the general population. The proportion of Indigenous HACC clients who are aged 70 years and over is 31.3 per cent and the proportion of non-Indigenous HACC clients who are aged 70 years and over is 71.5 per cent (figure 12.7). The high rate of missing data for Indigenous people will also inflate the figures presented.

Figure 12.7 Recipients of HACC services by age and Indigenous status, 2005-06<sup>a</sup>

Proportion of Indigenous HACC clients, by age cohort



Proportion of non-Indigenous HACC clients, by age cohort



<sup>&</sup>lt;sup>a</sup> Reports provisional HACC data that have not been validated and may be subject to revision.

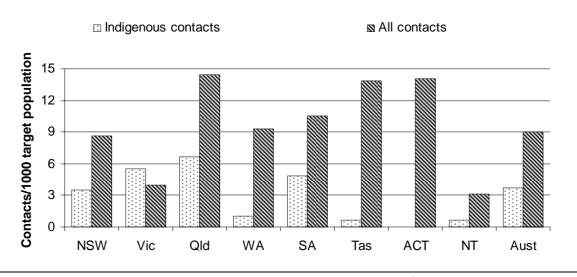
Source: DoHA (unpublished); table 12A.7; 2007 Report, figure 12.16, p. 12.32.

# Access by Indigenous people to Commonwealth Carelink Centres

Commonwealth Carelink Centres are information centres for older people, people with disabilities and those who provide care and services. Information is provided on community services and aged care, disability and other support services available locally or anywhere in Australia, the costs of services, assessment processes and eligibility criteria. The national rate at which Indigenous people

contacted Carelink Centres at 30 June 2006, was 3.7 people per 1000 Indigenous people in the target population. The rate for all Australians was 9.0 per 1000 people in the target population. These figures varied across jurisdictions (figure 12.8).

Figure 12.8 Commonwealth Carelink Centres, contacts per 1000 target population, by Indigenous status, 30 June 2006<sup>a, b, c</sup>



<sup>&</sup>lt;sup>a</sup> Contacts with Carelink include phone calls, visits, emails and facsimiles. <sup>b</sup> Indigenous contacts refer to contacts by Indigenous people per 1000 Indigenous people in the target population. <sup>c</sup> All contacts refers to contacts per 1000 target population.

Source: DoHA (unpublished); table 12A.10; 2007 Report, figure 12.17, p. 12.33.

## Supporting tables

Supporting tables for data within this chapter are contained in the attachment to the compendium. These tables are identified in references throughout this chapter by an 'A' suffix (for example, table 12A.3 is table 3 in the aged care services attachment). The tables included in the attachment are listed below.

| Table 12A.1  | Target population data, by location ('000)   |  |  |  |  |
|--------------|--|--|--|--|--|
| Table 12A.2  | Aged care recipients per 1000 people aged 70 years or over plus Indigenous people aged 50–69 years, 30 June 2006   |  |  |  |  |
| Table 12A.3  | Indigenous aged care recipients per 1000 Indigenous people aged 50 years or over and as a proportion of all recipients, $30  \text{June}  2006$                |  |  |  |  |
| Table 12A.4  | Indigenous aged care recipients per 1000 Indigenous people aged 50 years or over by locality, $30 \; \text{June} \; 2006$                                      |  |  |  |  |
| Table 12A.5  | Aged care recipients from special needs groups, June 2006 (per cent)   |  |  |  |  |
| Table 12A.6  | HACC client characteristics, 2005-06   |  |  |  |  |
| Table 12A.7  | Distribution of HACC clients, by age and Indigenous status, 2005-06 (per cent)   |  |  |  |  |
| Table 12A.8  | Comparative characteristics of Indigenous HACC clients, 2005-06  |  |  |  |  |
| Table 12A.9  | Aged care assessments  |  |  |  |  |
| Table 12A.10 | Access to Commonwealth Carelink Centres, 2005-06   |  |  |  |  |
| Table 12A.11 | Indigenous permanent residents classified as high or low care and Indigenous CACP at 30 June 2005: age-sex specific usage rates per 1000 persons by remoteness |  |  |  |  |

#### References

- ABS (Australian Bureau of Statistics) 2004a, Survey of Disability, Ageing and Carers, 2003, Cat no. 4430.0, Canberra.
- —— 2004b, National Aboriginal and Torres Strait Islander Social Survey 2002, Cat. no. 4714.0, Canberra.
- —— 2004c, Experimental Estimates and Projections, Aboriginal and Torres Strait Islander Australians, Cat no. 3238.0, Canberra.