

Public sector residential aged care Service planning and development framework

The Victorian Government's role in residential aged care: planning supplement



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Companion documents:

Template: Public sector residential aged care service planning and development or Strategic business case for development proposals

PSRAC Service planning and development framework:
Resource documents

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Overview

Purpose

The Victorian Government's role in residential aged care – Victorian Government residential aged care policy 2009 confirms the Victorian Government's ongoing commitment to residential aged care. This commitment is being fulfilled through the participation of Victorian public health services as residential aged care service providers, and the support provided by the state government through the Department of Health to these providers and the sector more broadly. The department supports the public sector through funding and a range of programs and service system improvement initiatives focusing on service quality and service access.

The purpose of this service planning and development framework is to guide Victorian health services which provide public sector residential aged care services (PSRACS) to plan and develop aged care services that will best meet the future needs of their local communities in a manner which is consistent with the public sector policy directions.

The framework is designed for planning at either service or area level, to ensure that the roles, effort and resources of public sector providers are directly linked and well matched to the changing needs of senior Victorians and the communities they live in. The framework aims to encourage flexible, responsive, innovative thinking and approaches to service system development. In this context, planning analyses of area care needs and service system composition will likely lead to variations in service development priorities for PSRACS in different locations.

The framework has been developed as a supplementary document to the *Victorian Government residential aged care policy 2009*, which outlines the Victorian and Commonwealth Government's roles in residential aged care. A range of companion documents have also been developed to support the framework's use, and are referenced throughout.

A dynamic aged care context

Health and aged care services are part of a complex and dynamic service system which has seen substantial changes over the past few decades. The capability of this integrated service system has been greatly enhanced through expansion, and initiation of a range of service models designed to meet the diverse support needs and service preferences of older people.

Residential aged care services operate within this increasing spectrum of services, with strong relationships to health (primary, acute and sub-acute care) and community aged care services. Victorian PSRACS locally operate alongside other providers, including local aged care service providers, local government, community health services, private (for-profit) and community-owned (not-for-profit) organisations as well as statewide agencies with a specific population focus (including ethno-specific organisations). Each agency contributes skills and resources for the benefit of the area service system as a whole, leading to optimal outcomes and service delivery for older people.

In order to continue to meet aged care needs in this dynamic environment, residential aged care services will need to evolve in response to changing factors in their local community, and the broader system. These factors include the following.

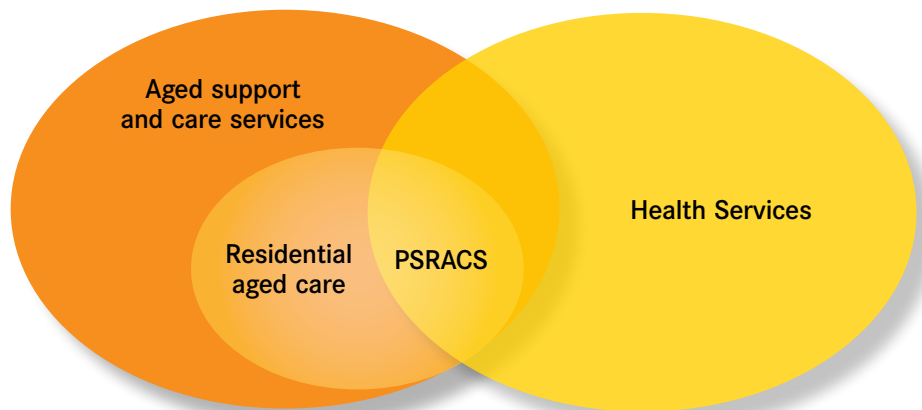


1. Increasing aged population

Population demographics show that the Victorian aged population (those aged over 70) is increasing and that this increase is disproportionate to the general population growth.

2. An evolving service environment

Figure 1: Public sector residential aged care service system environment



2.1 Changing care preferences of older people

Many people will continue to lead active and healthy lives as they age. However, for those who become frail and require assistance to support their lifestyles, there will be increasing demands for support and care from health, community and residential care services throughout Victoria. Older people consistently express a preference to live in their own homes for as long as possible even when their care needs are high or complex. Of people aged 85 years and over, three-quarters continue to reside in their own homes.¹

In response to changing community expectations, community service expansion has occurred through a number of state and Commonwealth funded programs including Home and Community Care (HACC), community care packages and the Support for Carers Program. One of the most recently developed service types, Extended Aged Care at Home (EACH), now provides an option for people with high care needs preferring to live at home.

2.2 A changing accommodation sector

Concurrent with the growth in the range of community service options, there continue to be changes in the aged care sector which impact on the demand for residential services. Current trends impacting on residential aged care include:

- changes in the balance of resident needs, with an increasing number of residents with high care needs requiring more diverse and specialised care for managing dementia, chronic disease and conditions resulting in declining function
- increasing service quality expectations from residents, families and carers
- substantial growth in residential models targeting older people with lower care needs, such as retirement villages

¹ Source: Australian Institute of Health and Welfare 2007, *Older Australia at a glance (4th edition)*, Australian Government, Canberra, p. 11

- under-utilisation in some areas of residential aged care, particularly low care
- increasing private sector provision, which has increased from 30 per cent of Victoria's residential aged care places in 1997 to 47 per cent in 2008²
- substantial restructuring within the residential industry which impacts on market composition, with not-for-profit and private providers establishing alternative accommodation options in some communities
- development of partnerships between government and not-for-profit providers with the aim of increasing service access in under-serviced areas or for specific needs groups
- changes to the funding and regulatory scheme that underpins service provision. Over the past decade the Commonwealth Government has implemented a range of reforms to the residential aged care program to significantly reshape the service system.

2.3 Increasing emphasis on health promotion for older people

The health system is placing greater emphasis on promoting the health and wellbeing of older people in order to maximise their ongoing independence. This approach is facilitated through government policy directions and funding, resulting in growth of health and wellbeing services (such as the Well for Life initiative) that are an integral part of a comprehensive aged care service system. *Improving care for older people: a policy for Health Services* is one policy initiative which outlines a range of strategies for health services that are focused on inpatient care, post-acute community support and transition processes for people moving from the acute setting to an ongoing care arrangement.

These integrated service approaches across the health and aged care system provide effective person-centred and comprehensive services for older people through:

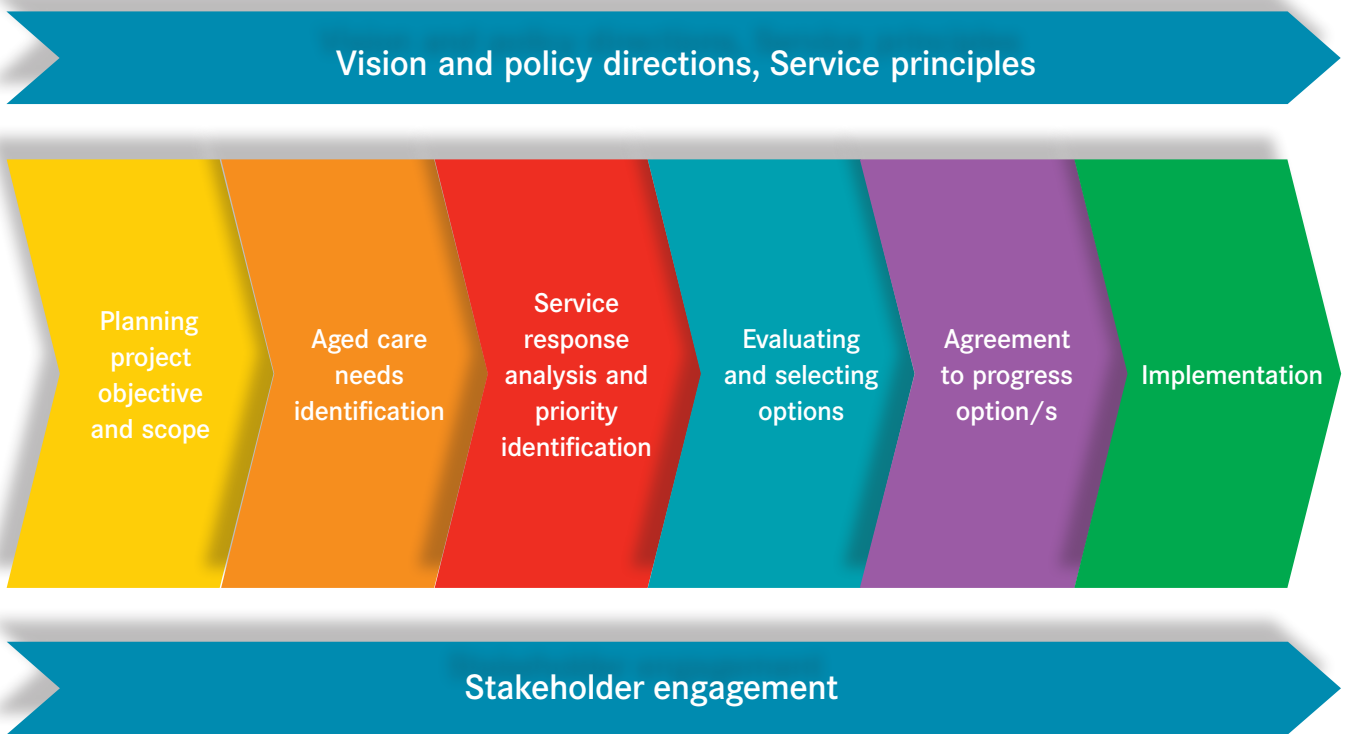
- physical and emotional health promotion
- rehabilitation
- assistance with management of functional decline
- effective treatments for chronic conditions
- support and assistance with complex care needs
- greater emphasis on integrated, multidisciplinary service approaches across the health and aged care system, including increasing emphasis on early intervention, and providing care where it will be most effective.

In this dynamic context it is essential that Victorian public sector services continue to review their roles and services to remain responsive to the changing needs of their communities and align to changing policy and broader service system developments. The public sector will continue to play an essential role in facilitating access to aged care services; however, in some instances alternative service configurations or approaches may be required to better meet the emerging needs of communities, better respond to the service preferences of older people, enhance service access and promote continued improvements to service quality and sustainability.

² Source: Productivity Commission 2009, *Report on government services 2009*, Australian Government, Canberra, Table 13A.4

Public sector residential aged care Service planning and development framework

Figure 2: PSRAC Service planning and development framework



Ongoing service planning is an essential part of good governance and management. Victorian public health services are regularly engaged in planning to ensure the services they provide are effectively meeting the needs of their community and catchment area and adapting to emerging demands and service system changes.

Health services work within a broader health and aged care service system. This system is most effective when there is collaboration and planning between service providers to improve service system delivery. The framework aims to assist public sector residential aged care providers to achieve these goals and contribute to a responsive, quality local health and aged care service system through planning in partnership with area aged care providers.

Planning environment

1. Victorian Government vision and policy directions

Victorian Government vision

*Growing Victoria Together*³ sets out the Victorian Government's broad vision to 2010 and beyond, and provides a context in which all public services operate. The goals of the *Growing Victoria Together* vision most relevant to aged care service delivery are:

- high quality, accessible health and community services
- building friendly, confident and safe communities
- a fairer society that reduces disadvantage and respects diversity
- more quality jobs and thriving innovative industries across Victoria
- growing and linking all of Victoria
- sound financial management
- greater public participation and more accountable government.

The Department of Health strategic directions to implement the broader government vision in health and aged care service delivery include:

- Improve health service performance
- Reform our response to mental health and drug and alcohol service to meet client needs
- Strengthen prevention and health promotion
- Develop our health service system and organisation
- Respond to an ageing population
- Reduce health inequalities.

In order to progress the strategic direction 'Respond to an ageing population' the specific outcomes sought include:

- Older people play active and valued roles in society, age with dignity and have their rights respected and upheld

³ <http://www.dpc.vic.gov.au/CA256D8000265E1A/page/Growing+Victoria+Together!OpenDocument&1=30-Growing+Victoria+Together~&2=~&3=~>



- Our health and aged care systems and long-term planning reflect the current and future needs and challenges of an increased ageing population
- A range of models of care are in place to meet individual needs so as to increase independence, and maintain people at home for as long as possible
- Workforces are appropriately skilled, qualified and flexible
- Older Victorians and their families actively participate in their communities, to foster health and wellbeing.

Aged care policy directions

Critical to public sector residential aged care planning is the *Victorian Government's role in residential aged care*⁴ – *public sector policy directions*. Released in 2009, the policy provides the contextual rationale for public sector involvement in residential aged care in Victoria and identifies priorities for public sector services. As such, it provides the fundamental policy underpinning service planning for this sector.

The priority public sector policy directions are to:

- facilitate access to residential aged care services in rural and regional areas
- improve care and access for client groups with specialised care needs
- ensure service and workforce configurations are responsive to changing care preferences
- promote innovation in service provision
- support ongoing development of the sector through initiatives that enhance residents' quality of life and improved organisational performance.

Other key policies most relevant to providing health and aged care services include:

- *The Victorian Charter of Human Rights and Responsibilities*
- *Ageing in Victoria: A plan for an age-friendly society* (to be released in 2010)
- *Positive Ageing – A strategy for current and future Senior Victorians*
- Home and Community Care Program policies
- *Pathways to the Future, 2006 and Beyond – Dementia Framework for Victoria*
- *Recognising and supporting care relationships for older Victorians*
- *Improving care for older people: a policy for Health Services*
- *Community Health Services – creating a healthier Victoria*
- *Care in your community*
- *Rural directions—for a stronger healthier Victoria*
- *Directions for your health system: Metropolitan Health Strategy*
- *Because mental health matters.*

Refer: Resource document 2—Key Victorian Government policies relevant to aged care planning

⁴ http://www.health.vic.gov.au/agedcare/downloads/aged_care_policy09.pdf

Aged care service planning has a major role in implementing these policy directions through focusing on:

- improving service access for older people who may have difficulty accessing appropriate care services, including those living in remote areas or with specialised care needs
- identifying where changes in the aged care service system will lead to improved capacity to meet people's care needs and preferences
- exploring opportunities for innovative approaches to service delivery that have strong person-centred approaches, provide new opportunities for staff, integrate service provision and encourage sector partnerships.

At the health service level, the agency's mission and vision of aged care service delivery in its community will guide the work of a planning project and final service direction decisions. Service planning can provide an opportunity to review whether the current service delivery model is consistent with the health service vision, and also be the stimulus to develop more responsive services and initiatives for the local community.

2. Service principles

The goals of *Growing Victoria Together* and the Department of Health's objectives encapsulate the following commonly accepted service principles for quality services:

- person-centred
- accessible
- socially inclusive
- high quality
- efficient and effective.

These principles should guide planning decisions about service delivery for older Victorians, and whether to maintain the status quo or reconfigure a service to better meet the aged care needs of the local community into the future.

3. Stakeholder engagement

Involving the wide range of individuals and organisations that have interest, knowledge and experience in provision of aged care services within the community will generate a range of mutual benefits including:

- increased understanding of community needs and consumer preferences
- a plan that supports a range of service models which best match consumer care needs and service preferences
- decision making which is supported and embraced by the local community into the future.





Stakeholders (anyone who has a relationship to the planning project outcomes) may include local community members; potential service consumers; health and aged care service providers operating in the area; government aged care policy and planning representatives; and other aged care industry specialists/experts where appropriate.

As stakeholder engagement is integral to the planning process, an engagement plan should be developed in the initial stage of the planning project, identifying:

- objectives of stakeholder engagement
- stages at which stakeholders will be engaged, and the purpose of each of these
- specific roles and contributions of the range of stakeholders (these may include: consulting on issues and proposals; providing advice to inform option development; or involvement in decision making)
- stakeholder engagement processes which will cater for a diverse group of individuals and organisations
- range of methods required to involve individuals, groups and the broad community.

The engagement plan will often depend on the size and focus of the planning project as well as local community/area characteristics. Resources such as time and funds to assist stakeholder engagement will sometimes determine the particular engagement approaches.

The department should be engaged early in the planning process to enable joint perspectives on future service delivery and analysis of service options, as well as providing expectations of any required service planning documentation.

Refer: Resource document 3—Stakeholder engagement and communication strategies

Planning analysis

4. Planning project objective and scope

The primary objective of the service planning project needs to be clearly established in the initial stage, and include the scope and specific aged care service provision issues to be addressed.

The objectives of an aged care planning project may focus on outcomes for a specific (residential) aged care service or outcomes for the aged care service system in the area (for example, improving the overall community and residential service balance to better meet aged care needs and match service demand).

Objectives of the project should consider strengthening service provision through improving service access, quality and viability.

Objectives should be precise and measurable as they will be used to monitor progress throughout the planning project, and as the measure of success on completion. The objectives will be used in project documentation including briefings, summary documents, and communication with stakeholders and media.

5. Aged care needs identification

Catering for the needs of an ageing population presents opportunities and challenges for the health and aged care service system.

Population trends, demographics and information on the range and complexity of aged care needs of the local community require analysis to enable health services to gain a contemporary understanding of older people, their care needs and preferences.

Key information to consider in determining future aged support and care needs of an area includes:

- current and forecast demographics of senior Victorians, including population size, pertinent socio-economic and diversity factors and trends within the local community/planning area
- current and predicted trends of support and care needs of older people and their carers (such as trends in need for assistance with activities of daily living; trends in need for assistance with local community access and pursuing social interests), including those specifically related to the needs of older people with specialised or complex care needs
- current and forecast health status trends which will impact on older people's need for assistance to support their lifestyle (for example, vision impairment).

Various data and information sources may be utilised for this purpose. Consultation with older people, or their carers and advocates, should be a prime source of data for the needs study. In many cases substantial care needs data for an area could be sourced from existing local aged care providers and aged care assessment services.⁵

Refer: Resource document 4—Service planning data and sources: care needs identification



⁵ This data should be sourced in a collated and non-identifiable manner.



6. Service response analysis and priority identification

The qualitative and quantitative information gathered through the care needs identification phase will provide a basis on which to analyse the adequacy of the existing service system, as well as the forecast demand and supply of aged care services within the community/planning area.

Consumer care preferences will indicate where existing service models are considered to be the best approach to meeting care needs, and the quantum adequacy of these. Consultation information will also indicate where more responsive service models are required within the area service system, and consequently alert providers to consider changes to their current service model provision.

Specifically the planning analysis should identify whether the residential aged care needs of the community are being met by the existing service system (including PSRACS), or indicate a potential misalignment between residential care needs and the aged care services currently provided.

In determining future service responses to meet the identified care needs, key information to consider includes:

- current and future demand and supply trends for the range of home, community and residential services required by older people within the planning area (the spectrum will range from services providing minimal support for people through to services providing intense and complex care)
- demand for services catering for people with diverse needs (for example, demand from a small but significant ethnic group in the community)
- emerging community and residential service models designed to meet the support and care needs of an older population
- specific service system factors impacting on service access within the area (for example, geographic distances, or service types which are more efficiently provided on a subregional rather than local basis).

Key factors to consider in identifying priorities for service expansion and development in an area include:

- the magnitude of a service gap, and the impact this has on the health and wellbeing of individuals unable to access an appropriate service
- service options which achieve the same outcomes for individuals through focusing on supporting individual independence rather than facility-based care
- the balance of community and residential aged care services in the area, whether this is optimal or whether there could be improved matching of service types to care preferences
- issues specific to the PSRAC service likely to impact on future service delivery (for example, building issues, workforce availability, other operational issues)

- service system capability including the contributions and planned directions of the range of aged care service providers within it and significant recent changes which have potential implications for the PSRACS (for example, the number of non-government residential aged care providers in the area with plans for expansion, entry of new providers, closure of existing services)
- identified or predicted changes in other parts of the broader service system that are likely to impact on this service and its provision of aged care services (for example, changes in the range of services offered by local hospitals, availability of GPs or other medical practitioners).

Data useful in identifying service responses and development of priorities include:

- data on utilisation of health, aged care and community care services by older people
- data demonstrating unmet service demand (for example, community or residential care waiting lists)
- projected new service allocations (such as Department of Health and Ageing (DoHA) indicative place allocations)
- information identifying different service models catering for people with the same care need level.

In addition to joint planning with area aged care services, this phase may also involve sourcing service planning work already undertaken by services in the local system (such as the work of Primary Care Partnerships) or services that interface with aged care, including specialist health services and general medical services.

Refer: Resource document 4—Service planning data and sources: analysis of service responses required to meet care needs

7. Evaluating and selecting options

7.1 Service options for consideration

Possible options for achieving an improved service system may involve the following strategies or combination of strategies, but are not exhaustive.

- Maintaining the status quo, if service planning indicates that the optimal outcome would be achieved through continuation of existing public sector residential aged care service provision.
- Continuing to provide residential aged care, with some change in the:
 - quantum of service, either expansion or reduction, to reflect community needs and demand, and/or
 - service focus (for example, an increased emphasis on providing specialised care for a group with specific needs that are not currently being fully met).
- Changing the service model to better meet care preferences. A change in the balance of residential and community care might be considered in instances where demand for residential care is declining but there is unmet demand for community care. Conversion could occur within the existing organisation or through transferring places to another experienced service provider.





- Changing the provider focus. In some cases the best local service system arrangement will be achieved through planning and developing residential aged care services in partnership with other aged care providers. In a limited number of situations the most appropriate outcome may be achieved through transferring a small number of places to another public sector or non-government provider.

7.2 Evaluating service options

It is essential that the proposed future service configuration maintain and strengthen service provision through improving access, service quality and viability.

In evaluating the various options that might be considered, there are a range of factors that require consideration. The following criteria have been developed to assist such decision making, although it is recognised that often a range of key factors related to specific local needs and service system circumstances will also require consideration.

The final proposed service arrangement should be consistent with departmental policy directions, address the project objectives and meet the following criteria:

- is person-centred and provides quality care
- maintains and/or enhances access to aged care services in a manner consistent with stated service preferences of the local community, and in line with service demand trends
- provides continuity of care within the local aged care service system, with strong interfaces between aged care and other parts of the broader health and aged care service system
- promotes service and service system efficiency and sustainability (including service capacity/capability)
- is feasible to establish, supported by risk analysis and a management plan for acquisition of required funding, staffing and resources, stakeholder support and transitional issues.

Refer: Resource document 5—Evaluating service options: factors to consider when assessing options against criteria



8. Agreement to progress option/s

8.1 Recommended option

Analysing each potential service option against the criteria will lead to identifying recommended option/s for optimal future aged care service delivery by the health service. The recommendation/s should be based on an assessment of benefits, costs and potential risks, including the factors pertinent to aged care service provision and local community circumstances.

The planning project report should clearly describe the recommended option and the reasons why it is considered to be the optimal approach to meeting the planning objective and aged care needs in the area. It is valuable to document the process through which this position was reached, including information regarding the planning process and underpinning evidence.

8.2 Proposal endorsement

Consistent with the *Health Services Act 1988*, the department approval is required for changes to service provision arrangements. This is to ensure agreement to the proposal, that the future role of a public sector provider is well matched to the needs of the relevant community, and that the proposal is consistent with state government policy.

If the recommended option is a continuation or minor change to the existing service delivery approach without additional capital funding, departmental agreement is best sought through discussions and involving the department throughout the service planning phase.

Where the recommended option represents a significant change to current arrangements, a strategic business case will need to be developed in conjunction with the department. The strategic business case will then need to be endorsed by the department and, in some instances, the relevant minister.

The purpose of the strategic business case is to provide:

- sufficiently detailed information on which the department can determine that the recommended proposal fits with the state government's goals and policy directions, as well as suitability for further development
- a preliminary justification for the recommended proposal based on a strategic assessment of service (business) needs, and an assessment of the proposal's costs, risks and potential for success.

Much of the information required for the strategic business case will have been produced through the work of the planning stage.

Refer: Template version—Strategic business case for development proposals



9. Implementation

Once agreement on the service proposal has been reached, an implementation plan should be developed to effectively manage the change process. This is to ensure necessary resources (such as funding, personnel/expertise, property, infrastructure and market provider) are successfully acquired or modified, and that all required transition tasks or processes are effectively completed.

Depending on the nature of any proposed change, there may be a range of processes to be completed, some of which may involve negotiations with the department, DoHA and local service providers.

Whether the change to the service is minor or major, the plan should address the following practical issues, as relevant or identified as critical to the success of the change process:

- ***Project readiness and timelines***

Gantt charts and critical path analyses are useful tools when developing implementation plans and monitoring implementation timelines. The implementation plan should include sequencing and completion of key actions, competing priorities and required implementation resources, including additional funds and personnel skills and experience. Where service changes will take a number of years to complete, arrangements will need to be made to ensure service provision continues until project completion.

- ***Provider governance issues***

Where a project will mean changes to the governance of an existing service arrangement, the implementation plan will need to include appropriate timeframes and sequencing to allow for what may be very detailed organisation and governance processes. Discussions with relevant government departments to clarify required administrative processes are essential in the initial stage of the project implementation.

- ***Ensuring the service model meets identified care needs in a quality manner*** (refer to work undertaken in the aged care needs identification phase)

The service planning research will have identified an appropriate service approach to meet the care needs of the area. The implementation phase will include detailed planning for the operation of the agreed service option, to ensure that the established service meets identified care needs and that quality service processes are developed.

- ***Stakeholder engagement and communication strategy***

The stakeholder engagement strategy should include how stakeholders are to be involved and contribute to the implementation of the proposal, as well as plans to address specific or potentially contentious issues. Stakeholders at this stage may include people not fully informed of the project or those who consider that they will be disadvantaged by it. These people may therefore not support, or may actively resist the project. In these situations it might be necessary to address particular issues through a formal communication strategy, including public communication.

Resource document 3: Stakeholder engagement and communication strategies

- ***Ensuring ongoing quality care for existing residents***

Where a project involves changes to a residential service, the impacts on existing residents and their ongoing care need to be addressed. Residents and their families/advocates will need to be kept informed through the change process, including provided with information about the benefits, and any possible inconveniences, to assist residents positively anticipate improvements while minimising anxiety about the changes. If the change is significant, plans may need to be developed to ensure the quality of care is maintained throughout the change stages.

- ***Impacts on staff/workforce issues*** (refer to work undertaken in evaluating and selecting options phase)

Impact on staff and any related workforce or industrial issues of the project will need to be addressed. Workforce changes may involve change to the service staffing structure, professional disciplines and skill base, or working arrangements for individuals. Industrial issues arising may require resolution during the implementation stage. Smooth integration of workforce changes will be required to ensure minimal disruption for older people receiving care.

Resource: Public Sector Industrial Relations Policy Manual 2010, Workforce Victoria, Department of Innovation, Industry and Regional Development, State Government of Victoria, Melbourne

- ***Financial impacts/budget analysis and funding strategy*** (refer to work of evaluating and selecting options)

The financial impacts of both the cost of the transition process and the longer term recurrent funding requirements, need to be well analysed and budgeted for, including the financial impact of any changes on the health service's overall operating budget. Funding strategies should include Commonwealth and state funding sources, and ensure that residential aged care financial requirements are met (for example, prudential arrangements relating to accommodation bonds). Funding submissions may need to be made where the proposal is dependant on funding beyond the resources of the health service (for example, a business case will be required where a capital development funding submission is to be made to the department).

- **Property issues** (refer to work of evaluating and selecting options)

The project may have minimal or significant impact on the existing facility. The project's impact on ongoing maintenance and the future configuration of the facility may need to be addressed. Any property issues or changes will need to comply with state government legislation policies and guidelines.

Resource: Department of Human Services 2007, *Capital Development Guidelines*, State Government of Victoria, Melbourne

- **Impact on infrastructure** (refer to work of evaluating and selecting options)

A reorientation of service provision might lead to an impact on service infrastructure. The successful operation of a new approach may be contingent on well planned changes to operating, administrative and information technology systems, and equipment.

- **Risk management** (refer to work of evaluating and selecting options)

A risk management plan should identify and evaluate any potential risks in the project and ensure that plans, including contingency plans, are in place to address the major risks identified. The significant risk factors of the project will most likely have been identified through the work of previous stages and the critical analysis of the options. Risk factors to consider include local community support, cost, funding sources (capital and recurrent), resource availability (including staff expertise, infrastructure, equipment, property) and implementation timing.



