



**Goulburn Valley**  
Primary Care Partnership

*Working together...Going forward*

# **Goulburn Valley and Lower Hume Primary Care Partnerships**

## **Aged Care Planning and Service Development Project**

**Final Report (West Hume):  
June 2015**



*Working together to improve the Health and  
Wellbeing outcomes of our community*

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## **ACKNOWLEDGMENTS**

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Primary Care Partnership members acknowledge and respect the Aboriginal and Torres Straits Islander peoples and their culture, and values the cultural, religious, racial and linguistic diversity of local communities.

Primary Care Partnerships are supported by the Victorian Government.



## **ACRONYMS**

<b>Full Name</b>	<b>Acronym</b>
Aged Care Collaborative	ACC
Aged Care Planning and Service Development	ACP&SD
Consumer Directed Care	CDC
Department of Health and Human Services	DHHS
Goulburn Valley Primary Care Partnership	GVPCP
Home and Community Care	HACC
Hume Integrated Aged Care Plan	HIACP
Human Services Directory	HSD
Lower Hume Primary Care Partnership	LHPCP
National Health Service Directory	NHSD
Primary Care Partnership	PCP
Service Coordination Tool Template	SCTT
Service Development Collaborative (LHPCP)	SDC

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## INTRODUCTION

### 1.1 Final Report

This fourth and final report provides an update to the progress of the Hume Region Aged Care Planning and Service Development Project in West Hume, and outlines the legacy of the project. The report is designed to be read subsequent to the Preliminary Gap Analysis and Situation Report, Feb 2012<sup>1</sup> and the Interim Reports, Sept 2012<sup>2</sup>, June 2013<sup>3</sup>, Dec 2014<sup>4</sup>.

### 1.2 Context

The Aged Care Planning and Service Development Project commenced in April 2011, as a 12 month project. Due to the active engagement demonstrated by service providers, the Department of Health and Human Services (DHHS), Hume Region, formerly Department of Health, have twice committed additional resources to extend the project. In West Hume, the project coordinator position was vacant for the majority of the financial year 2013/14 and the funding was carried over into 2014/15 financial year. Two part-time coordinators were appointed in November 2014; 1 coordinator within each Primary Care Partnership (PCP).

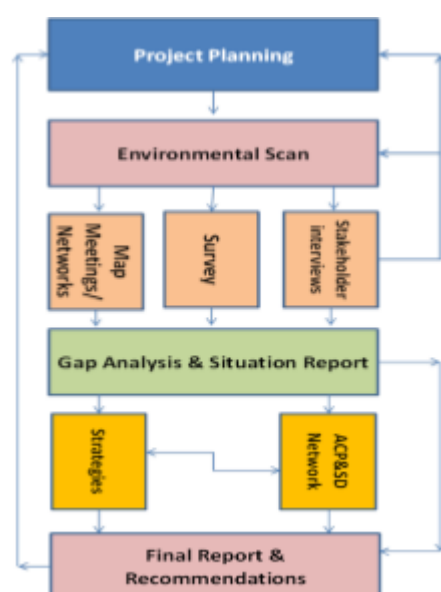
The **aim** of the project was to facilitate and manage the desired outcomes of Recommendations 1 and 2 of the Hume Integrated Aged Care Plan (HIACP), 2010-15<sup>5</sup>, through a partnership management approach.

The **objective** of the project was to establish a sustainable platform of communication and engagement with relevant stakeholders, at a sub-regional (Primary Care Partnership catchment) level, to achieve outcomes in line with Recommendations 1 and 2 of the HIACP<sup>6</sup>.

## METHODOLOGY

### 2.1 Project Methodology

The project was managed in line with the methodology developed in 2011 (Figure 1.)



**Figure 1: Project Methodology**

<sup>1</sup> Preliminary Gap Analysis and Situation Report, February 2012 - [REPORT 2012](#)

<sup>2</sup> Interim Report, Sept 2012 - [Int. Report 2012](#)

<sup>3</sup> Interim report, June 2013 – [Int. Report 2013](#)

<sup>4</sup> Interim Report, Dec 2014 – [Interim Report 2014](#)

<sup>5</sup> Hume Integrated Aged Care Plan (HIACP), 2010-15 - [HIACP](#)

<sup>6</sup> HIACP 5 Key Recommendations - [Recommendations](#)

## STRATEGIES

### 3.1 Strategies

Proposed strategies were developed in early 2012<sup>7</sup>, then reviewed and refined in Sept 2012<sup>8</sup>. A further strategic direction review was undertaken in Goulburn Valley PCP in February 2014.

The strategies incorporated the following key themes<sup>9</sup>;

- Aged care planning structures
- Provider access to information
- Consumer access to information
- Service coordination
- Workforce capacity

## PROGRESS TO DATE IN WEST HUME (Dec 2014 - June 2015)

### 4.1 Aged care planning structures

The development of collaborative planning structures at a sub-regional level, tailored to the needs of agencies within each PCP catchment area is a key deliverable of the project. The planning structures are the foundation to the achievement of all 5 key recommendations of the HIACP<sup>10</sup> and were established within both PCPs in 2012/13. The relationship of the West Hume planning structures to the overall Hume region structures is consistent with the intent of the HIACP.

#### 4.1.1 Goulburn Valley Aged Care Planning Structure

The Goulburn Valley Aged Care Planning Group was set up in October 2012, with the aim of providing a forum for all aged care agencies within the GVPCP catchment area, to facilitate collaborative planning and working.

In February 2014, the group undertook a strategic planning review and identified 4 strategic priority areas of work and potential projects for the group to consider<sup>11</sup>. These were;

- Information
- Viability
- Workforce
- Managing change

In May 2015, the group reviewed its' purpose and format. It was agreed that the Terms of Reference were still relevant and appropriate, but that the format would change to retain a smaller core group of members and that 2 meetings per year would be topic focussed for a wider group.

A schematic of the Goulburn Valley aged care planning structure is presented in Appendix 1, page 12.

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<sup>7</sup> Preliminary Gap Analysis and Situation Report, February 2012 - [REPORT 2012](#)

<sup>8</sup> Interim Report, Sept 2012 - [Int. Report 2012](#)

<sup>9</sup> Interim Report, Sept 2012: Pages 9,10 - [Int. Report 2012](#)

<sup>10</sup> Hume Integrated Aged Care Plan (HIACP), 2010-15 - [HIACP](#)

<sup>11</sup> Interim Report, Dec 2014 - [Interim Report 2014](#)

#### **4.1.2 Lower Hume Aged Care Planning Structure**

In Lower Hume, their unique situation of small rural agencies providing a wide range of health and community services, where agencies have limited personnel to attend numerous meetings, means that a single group (the Service Development Collaborative (SDC)), works to progress the key deliverables of the Lower Hume PCP Strategic Plan<sup>12</sup>, including deliverables related to the HIACP.

The collaborative meets monthly with membership remaining stable. Members include representatives of Health /Hospitals, Local Government, Not for Profit Aged Care Providers, Community Health and Public and Private residential providers. The group has moved towards joint planning on Diversity Plans, jointly preparing for the Service Coordination bi-annual Survey, developing protocols and agreements to improve the client journey and outcomes.

A focus has been on the sharing of joint planning has enable training opportunities to the local area. Larger organisations are offering opportunities for staff of smaller organisations to participate in their staff training.

A schematic of the Lower Hume aged care planning structure is presented in Appendix 2, page 13.

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<sup>12</sup> [LHPCP Strategic Plan 2013-17](#)

**Table 1: Progress to date in West Hume - key themes of final year**

Key Themes	Strategy	Progress to date
<b>4.2 Provider access to information</b>	Maintain communication links with agencies to keep them up to date with project progress, local initiatives and national reforms	<ul style="list-style-type: none"> <li>• GVPCP – issues related to aged care are communicated via GVPCP website (dedicated aged care page), members’ newsletter, Annual Report, GV Multi-Agency Network meetings and e-newsletter (4 per year) and GV Aged Care Planning Group</li> <li>• LHPCP – issues related to aged care are communicated via monthly Leadership Team and SDC meetings, Murrindindi Planning Group and education forums.</li> <li>• Agency feedback re discussion paper on Home Support Program – both PCPs supported agencies to provide feedback to Commonwealth via HACC Industry Consultant and a PCP response paper</li> </ul>
<b>4.3 Consumer access to information</b>	Consult with service providers to deliver a program of consumer information forums re changes to aged care	<ul style="list-style-type: none"> <li>• GVPCP - In July 2014, the GV Aged Care Planning Group identified consumer education (re: changes to aged care) as a key local project arising from identified strategic priorities, and requested project coordinator to collaborate with local services to deliver a number of consumer information forums across the catchment. To date 5 forums have been delivered in partnership with local agencies. <i>See Appendix 3, page 14.</i></li> <li>• LHPCP – Consumer and Community surveys have identified topics to include in consumer/community forums. Discussions with partner agencies and peak bodies are currently in progress on how best to provide consumer information forums in the catchment</li> </ul>
<b>4.4 Service coordination</b>	<ul style="list-style-type: none"> <li>• Promote the sharing of relevant client health and care information via secure message systems</li> <li>• Promote NHSD/HSD and support agencies to use and update as a primary information resource tool</li> </ul>	<ul style="list-style-type: none"> <li>• ACP&amp;SD Coordinators working in collaboration with Hume Integrated Aged Care Team and other PCP staff have supported agencies to implement and utilise secure messaging systems.</li> <li>• GVPCP – 2 bids submitted under the Commonwealth Department of Social Services Aged Care Service Improvements and Healthy Ageing Grants Program for a shared care plan project. The bid was not successful, but did demonstrate the willingness of member agencies to act as lead agency for local projects.</li> <li>• GVPCP - NHSD/HSD actively promoted to agencies and discussed at relevant meetings. GVPCP has developed a toolkit, in collaboration with Goulburn Valley Health, to guide member agencies in setting up their agency information on NHSD/HSD.</li> <li>• LHPCP - NHSD and Secure Messaging are regular agenda items on both the Service Development Collaborative and Leadership Team Meeting. Agencies have been provided with a resource to enable them to input information onto the NHSD including the use of generic terms that the general public would use, e.g. dietician and not dietetics. Agencies are also being encouraged to put their information on the ‘My Aged Care’ website.</li> </ul>

**Table 1 (cont.): Progress to date in West Hume - key themes of final year**

Key Themes	Strategy	Progress to date
<p><b>4.4</b> <b>Service coordination</b></p>	<ul style="list-style-type: none"> <li>• Promote the use of SCTT 2012</li>   <li>• Support agencies to implement HACC Interagency Protocols</li> </ul>	<ul style="list-style-type: none"> <li>• Online service coordination and SCTT learning modules promoted to agencies in both PCPs. LHPCP provides the DHHS reports to agencies on the number of their staff and individual personnel that have completed the online training.</li>   <li>• Service coordination, secure messaging, SCTT and HSD incorporated into both PCP strategic plans</li> <li>• ACP&amp;SD Coordinators have collaborated with HACC agencies to adapt &amp; adopt protocols, as requested</li> <li>• LHPCP have built on the work of Meg Henderson and facilitated the development of Interagency Protocols between Lower Hume HACC Assessment Services and HACC Allied Health and District Nursing Services. A framework/audit tool is currently being developed for the implementation and evaluation of the protocols.</li> </ul>
<p><b>4.5</b> <b>Workforce capacity</b></p>	<p>Each PCP to hold /participate in at least one sub regional aged care forum per annum</p>	<ul style="list-style-type: none"> <li>• GVPCP – Two ‘Aged Care Showcases’ were held in partnership with University of Melbourne.</li> <li>• LHPCP – Three ‘Aged Care Showcases’ were held in partnership with local service providers. The forums also build on an outcome of Meg Henderson’s workshops which identified that there was a need for aged care and allied health staff to get together and network. The forums have been invaluable for allowing this to happen.</li> </ul>



## PROJECT LEGACY (West Hume)

### 5.1 Influencing Factors

Whilst the project focused primarily on recommendations 1 and 2 of the HIACP, two key factors influence the on-going aged care priority in Hume;

- On-going implementation of the Federal Government’s aged care and HACC reforms
- Capacity of PCPs to maintain the aged care priority as part of the PCP program logic in West Hume after June 2015

### 5.2 Table 2: Outline of On-Going Strategies

Key Themes	Strategy	Rationale	Outcomes
<b>Aged care planning structures</b>	<ul style="list-style-type: none"> <li>• Maintain planning structures</li> </ul>	<ul style="list-style-type: none"> <li>• Support collaborative work in achieving agreed local action plans and addressing National, State, Regional and local priorities</li> </ul>	<ul style="list-style-type: none"> <li>• GVPCP – as guided by the GV Aged Care Planning Group, on-going groups/processes to support communication and collaboration between agencies will be maintained</li> <li>• LHPCP - the move towards more collaborative planning as in the development of a joint Diversity Plan and the development of joint processes, protocols and procedures should see a more aligned aged care sector especially as the not for profit sector and Residential Aged Care are also involved.</li> </ul>
<b>Provider access to information</b>	<ul style="list-style-type: none"> <li>• Maintain communication links with agencies to keep them up to date with project progress, local initiatives and national reforms</li> </ul>	<ul style="list-style-type: none"> <li>• Access to information enables meaningful communication and facilitates planning</li> </ul>	<ul style="list-style-type: none"> <li>• Both PCPs have on-going communication plans and mechanisms, which include agencies involved in the care of older people</li> </ul>

**5.2 Table 2 (cont.): Outline of On-Going Strategies**

Key Themes	Strategy	Rationale	Outcomes
<b>Consumer access to information</b>	<ul style="list-style-type: none"> <li>In partnership with service providers, deliver a program of consumer information forums re changes to aged care</li> </ul>	<ul style="list-style-type: none"> <li>Better informed consumers will have a greater awareness of their needs and services available to them</li> </ul>	<ul style="list-style-type: none"> <li>GVPCP – Whist there will not be a specific aged care project worker post July 2015, the PCP has committed to supporting consumer information forums and will seek out other funding to facilitate this.</li> <li>LHPCP – Whist there will no longer be a specific worker post July 2015 to organise such forums the PCP will collaborate with, and participate in member agency planned events.</li> </ul>
<b>Service coordination</b>	<ul style="list-style-type: none"> <li>Continue to promote and support best practice and key State/Regional/PCP deliverables</li> </ul>	<ul style="list-style-type: none"> <li>Supports an integrated approach to the roll out of current and new policies and guidelines</li> </ul>	<ul style="list-style-type: none"> <li>Each PCP has strategies and reporting mechanisms in place, in line with agreed strategic plans. One such example is the agreement to develop one HACC Diversity Plan in the Lower Hume Catchment.</li> </ul>
<b>Workforce capacity</b>	<ul style="list-style-type: none"> <li>Each PCP to hold/participate in at least one sub regional aged care forum per annum</li> </ul>	<ul style="list-style-type: none"> <li>Promote sharing of information and/or good practice.</li> </ul>	<ul style="list-style-type: none"> <li>Both PCPs will continue to promote more sharing of training opportunities between member agencies.</li> <li>GVPCP – a program logic has been developed (in draft) for the GV Aged Care Planning Group (<i>see Appendix 4, page 15</i>) and active efforts will be made to seek alternative funding to support industry forums.</li> <li>LHPCP - Planning for the diversity plans has identified topics for the future. High on the list is training on LGBTI issues and making services accessible to the Aboriginal community, including a session on Asking the Question.</li> <li>Other potential topics for the future, and sharing of information good practice centres on the transition of HACC to the Commonwealth, including what CDC really means.</li> </ul>

### **5.3 Aged Care Work Plan 2015-16**

The work plan for both PCPs is centred around;

- Promoting partnerships
- Supporting aged care agencies to work collaboratively with other parts of the health and community sectors
- Incorporating key themes and strategies for aged care services into the work plans for the other key PCP priority areas of Koolin Balit, chronic care and integrated health promotion
- Seeking alternative funding to support local aged care initiatives, including consumer empowerment

Both PCP teams will collaborate to ensure consistency of approach and strategies, whilst implementing actions responding to local agency direction and need.

### **5.4 Reports**

Project reports have been scheduled in line with each PCP communications plan as follows;

- PCP executive/leadership groups – monthly
- Hume Integrated Aged Care Collaborative – as requested
- Project Information Sheets (for service providers – GVPCP) – quarterly, now ceased
- Project updates to Service Development Collaborative (LHPCP) monthly
- All reports are available directly from LHPCP [website](#) and from GVPCP [website](#)

## **CONCLUSION**

The Aged Care Planning and Service Development Project has facilitated extensive communication and collaboration, amongst agencies and the PCPs, through a partnership management approach.

The objective of the project was to establish a sustainable platform of communication and engagement with relevant stakeholders, at a sub-regional (Primary Care Partnership catchment) level and sub-regional planning structures are embedded in each PCP (Appendices 1 and 2).

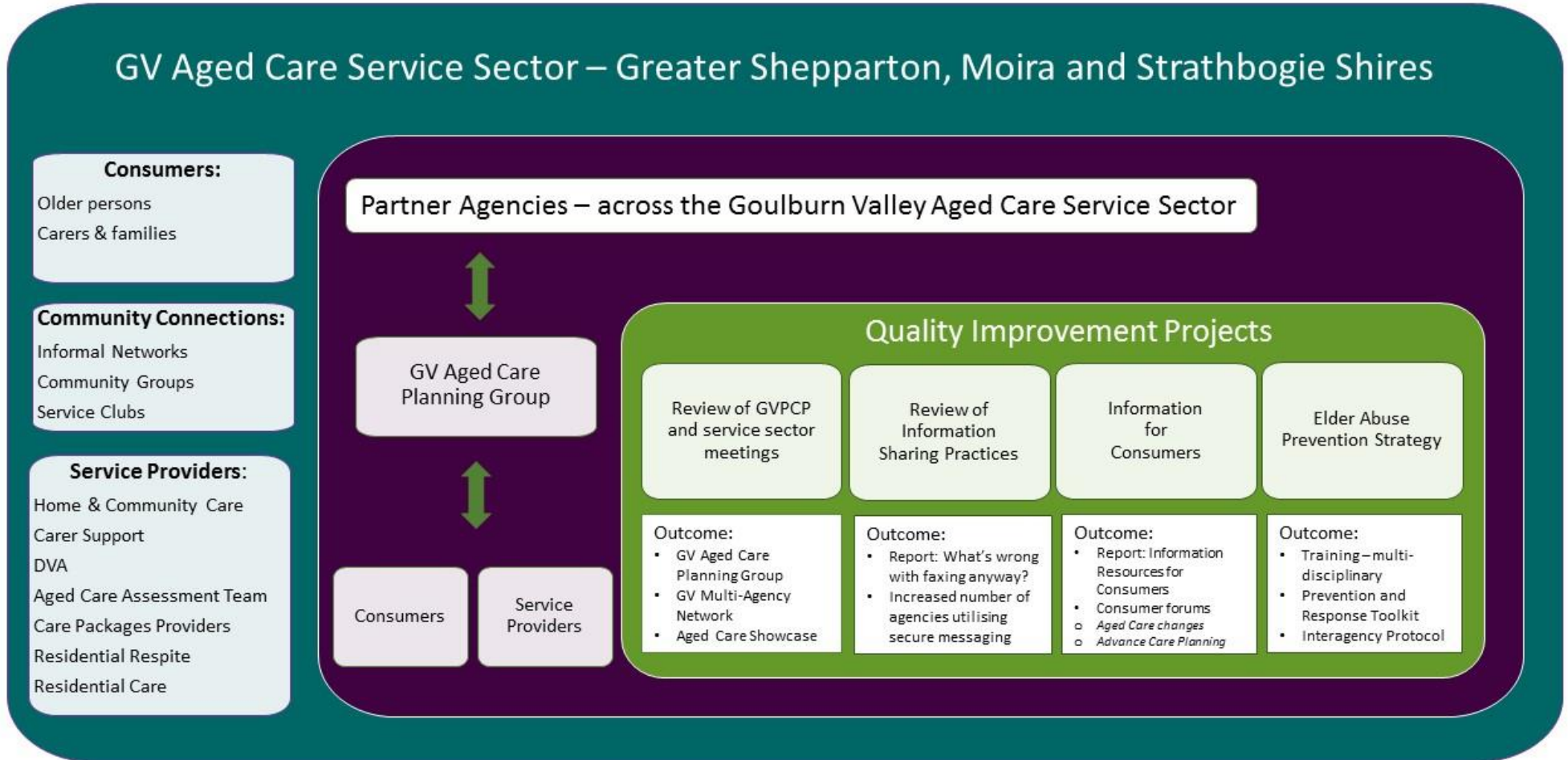
The strategies and actions implemented throughout the project lifespan are consistent with the PCP regional strategic priority area of aged care, and the domains of; Quality, Health Literacy, Workforce Capacity and Client Journey.

Whilst aged care remains a strategic priority within Hume Region, there are no plans to review and extend the HIACP and project funding has ceased. Each PCP has made arrangements to continue to promote and support partnerships with the aged care sector.

**APPENDIX 1: GVPCP Aged Care Planning Model**



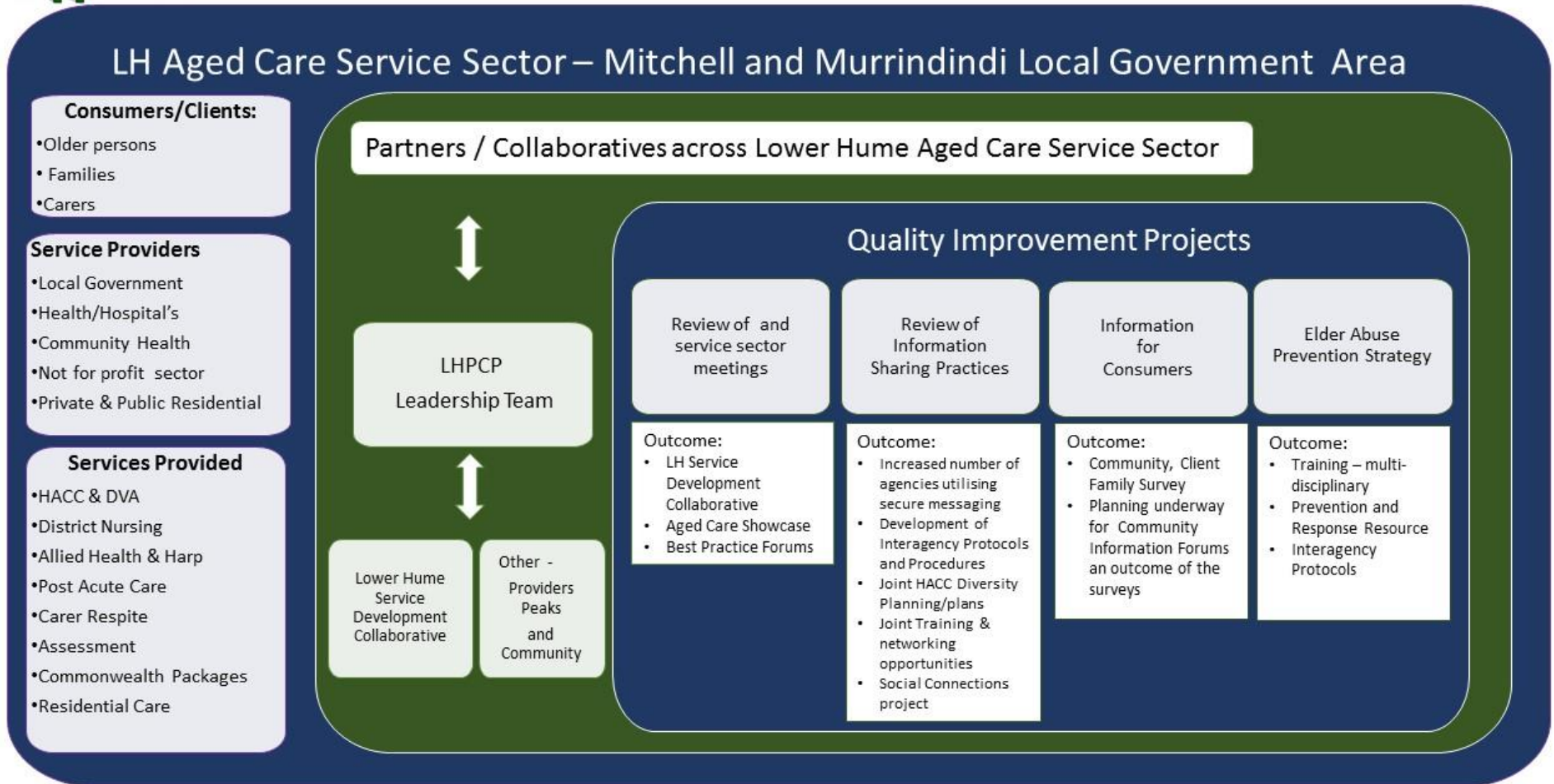
Goulburn Valley Primary Care Partnership Aged Care Planning Model



**APPENDIX 2: LHPCP Aged Care Collaborative Model**



Lower Hume Primary Care Partnership Aged Care Collaborative Model



### APPENDIX 3: GVPCP Consumer Information Forums – snapshot of results

#### CONSUMER ENGAGEMENT

CONSUMER FORUMS - A MAJOR INITIATIVE OF THE GV AGED CARE PLANNING GROUP

Lets talk about ..... Changes to care services for older people.

**12**  
partner agencies



**6**  
sites

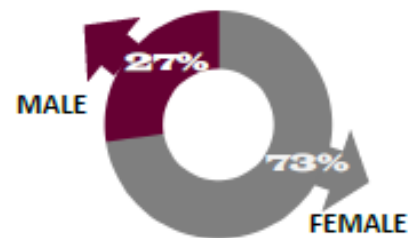


**3**  
LGAs



"We needed more time to ask questions"

**161**  
community members



**60%**  
of participants completed the feedback form!

"Very good, learnt a lot"

"Thanks for your time and information"

#### Relevance

20% of respondents felt the sessions were extremely relevant

48% felt they were VERY relevant

#### Interest

21% indicated the sessions were extremely interesting

64% indicated they were VERY interesting

#### Informative

27% of respondents felt the sessions were extremely informative

58% felt they were VERY informative

#### Confidence

25% of respondents indicated they were extremely confident to seek services after attending the sessions

54% felt very confident

Service Providers' feedback: all noted the challenges of presenting information about the changes in services simply. Suggested to split the sessions into community and residential care and present directly to existing groups, (Probus, U3A and CWA). Presenters felt the sessions were well organized, but promotion could be improved.

## APPENDIX 4: GVPCP Aged Care Planning Group Forums – Program Logic 2015-16

