
13 Aged care services

CONTENTS

Indigenous data in the Aged care chapter	230
Indigenous-specific services	232
Characteristics of older Indigenous people	233
Framework of performance indicators	235
Use by different groups	238
Attachment tables	245
References	245

Attachment tables

Attachment tables are identified in references throughout this Indigenous Compendium by an 'A' suffix (for example, in this chapter, table 13A.3). As the data are directly sourced from the 2010 Report, the Compendium also notes where the original table, figure or text in the 2010 Report can be found. For example, where the Compendium refers to '2010 Report, p. 13.15' this is page 15 of chapter 13 of the 2010 Report, and '2010 Report, table 13A.2' is attachment table 2 of attachment 13A of the 2010 Report. A full list of attachment tables is provided at the end of this chapter, and the attachment tables are available from the Review website at (www.pc.gov.au/gsp).

The aged care system comprises all services specifically designed to meet the care and support needs of frail older people living in Australia. 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

-
- community care services and flexible services, which include Home and Community Care (HACC) program services, Community Aged Care Packages (CACP), the Extended Aged Care at Home (EACH) program, the EACH Dementia (EACH-D) program, the Transition Care Program (TCP), and the Department of Veterans' Affairs (DVA) Veterans' Home Care (VHC)¹ Community Nursing programs and Multi-purpose Service Program (MPS)
 - respite services, which include HACC respite and centre-based day care and the National Respite for Carers Program (NRCP)
 - assessment and information services, which are largely provided by the Aged Care Assessment Program (ACAP).

Services for older people are provided on the basis of the frailty or functional disability of the recipients, as distinct from 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. Particular groups (notably Indigenous people) can 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 aged care places under the Act.

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 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 2004). 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 2010 Report contains the following information on Indigenous people:

- Aged Care Assessment Team (ACAT) assessment rates, 2007-08

¹ Unless otherwise stated, HACC expenditure excludes the DVA expenditure on VHC.

-
- age profile and target population differences between Indigenous and other Australians, June 2006
 - Indigenous permanent residents classified as high or low care and Indigenous CACP, EACH and EACH-D at 30 June 2009: age specific usage rates per 1000 people by remoteness
 - variation in the proportions of special needs target populations accessing aged care services from their proportion in the target population as a whole, June 2009
 - residents per 1000 target population, 30 June 2009
 - CACP recipients per 1000 target population, 30 June 2009
 - recipients of HACC services by age and Indigenous status, 2008-09
 - Commonwealth Carelink Centres, contacts per 1000 target population, by Indigenous status, 30 June 2009.

The aged care attachment contains additional data relating to Indigenous people including:

- target population data, by location
- Indigenous aged care recipients per 1000 Indigenous people aged 50 years or over and as a proportion of all recipients and by locality, 30 June
- HACC client characteristics, 2008-09
- comparative characteristics of Indigenous HACC clients, 2008-09
- government expenditure on Indigenous specific programs, 2008-09.

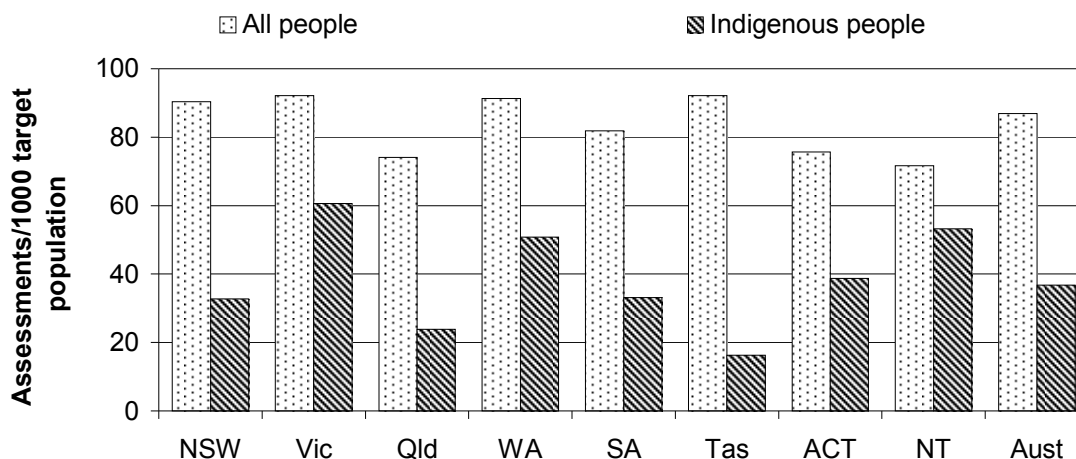
Aged Care Assessment Program

The Australian Government established the 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. The core objective of the ACAP is to assess the needs of frail older people and assist them to gain access to the most appropriate type of care. Assessment and approval by an ACAT is mandatory for admission to Australian Government subsidised residential care or to receive a CACP, EACH package, EACH-D package or TCP. People can also be referred by the ACAT to other services, such as those funded by the HACC program (although an ACAT referral is not mandatory for receipt of these other services).

The number of assessments of people aged 70 years or over and Indigenous people aged 50-69 years per 1000 target population varied across jurisdictions in 2007-08.

The national rate was 86.9 assessments per 1000 people aged 70 years or over and Indigenous people aged 50-69 years. The rate for Indigenous people aged 50 years and over was 36.8 per 1000 Indigenous people aged 50 years or over (figure 13.1).

Figure 13.1 Aged Care Assessment Team assessment rates, 2007-08^{a, b, c, d, e}



^a Includes ACAT assessments for all services. ^b '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. ^c 'Indigenous' includes all assessments of Indigenous people aged 50 years or over per 1000 Indigenous people aged 50 years or over. ^d The number of Indigenous assessments is based on self-identification of Indigenous status. ^e See table 13A.8 for further explanation of these data.

Source: Aged Care Assessment Program National Data Repository (unpublished); table 13A.8; 2010 Report, figure 13.1, p. 13.6.

Indigenous-specific services

Aboriginal and Torres Strait Islander people access mainstream services under the Aged Care Act, including those managed by Aboriginal and Torres Strait Islander organisations, and services funded outside the Act, including those funded under the National Aboriginal and Torres Strait Islander Flexible Aged Care Program (the Flexible Program).

The National Aboriginal and Torres Strait Islander Flexible Aged Care Program aims to provide quality, flexible, culturally appropriate aged care to older Aboriginal and Torres Strait Islander people close to their home and community. Flexible Aged Care services deliver a mix of residential and community aged care services to meet the needs of the community. At 30 June 2009, there were 29 aged care services funded to deliver over 650 flexible aged care places. These services

are funded and operate outside the regulatory framework of the Aged Care Act 1997.

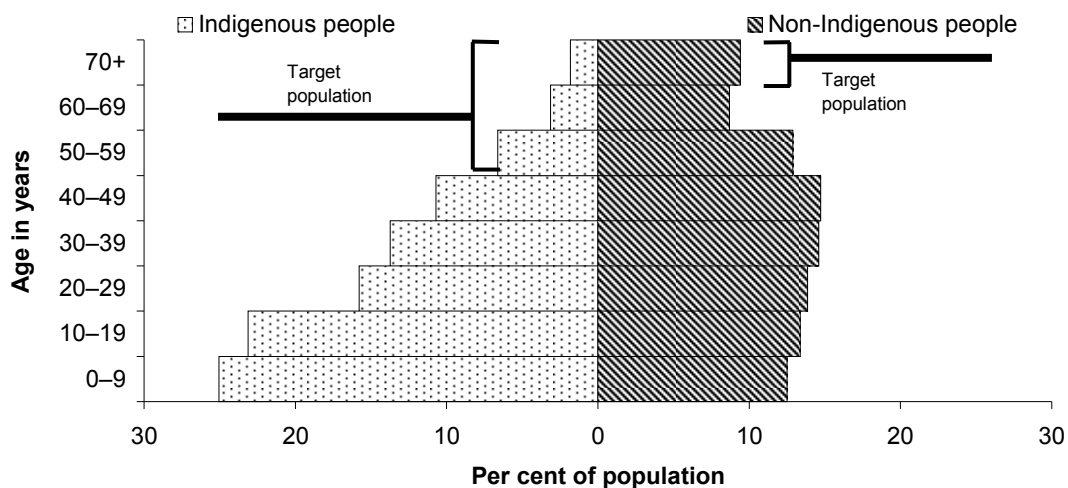
Some services managed by non-Indigenous approved providers also have significant numbers of Aboriginal and Torres Strait Islander clients. All aged care services that are funded under the Aged Care Act are required to provide culturally appropriate care. Whether they are located in a community or residential setting, services may be subject to specific conditions of allocation in relation to the proportion of care to be provided to particular groups of people, including Aboriginal and Torres Strait Islander people.

The Australian Government also funds Indigenous specific services. In 2008-09, \$23.0 million was spent on this program (table 13A.10).

Characteristics of older Indigenous people

The Department of Health and Ageing (DoHA) estimates that about 65 300 Indigenous people were aged 50 years or over in Australia at 30 June 2009 (table 13A.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 13.2). Estimates show life expectancy at birth in the Indigenous population is around 11.5 years less for males and 9.7 years less for females when compared to the total Australian population (ABS 2009). These figures indicate that Indigenous people are likely to need aged care services earlier in life, compared with the general population.

Figure 13.2 Age profile and target population differences between Indigenous and other Australians, June 2006

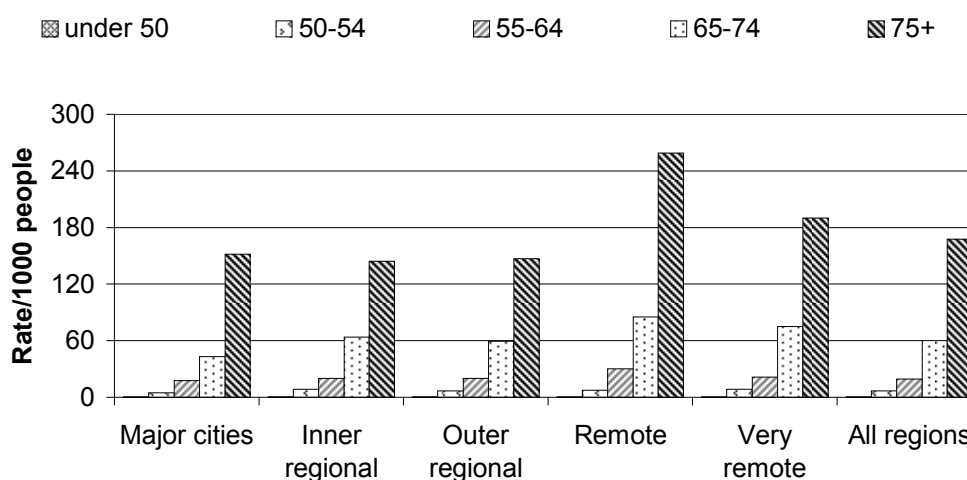


Source: ABS Experimental Estimates of Aboriginal and Torres Strait Islander Australians, June 2006, Cat. no. 3238.0.55.001, Canberra; 2010 Report, figure 13.6, p. 13.21.

Combined residential and community care services rates

The national age specific usage rates per 1000 Indigenous people for high and low residential care, CACP, EACH and EACH-D in combination at 30 June 2009 is 0.2 for people aged under 50 years and 167.7 for people aged over 75 years. The data show that Indigenous people tend to access these services at a younger age than the population as a whole. These rates vary by remoteness category (figure 13.3).

Figure 13.3 Indigenous permanent residents classified as high or low care and Indigenous CACP, EACH and EACH-D at 30 June 2009: age specific usage rates per 1000 people by remoteness^{a, b, c, d}



^a Geographical data are based on the ABS Australian Standard Geographical Classification of Remoteness Areas. Data are classified according to an index of remoteness which rates each ABS census district based on the number and size of towns, the distance to major towns and urban centres. See table 13A.1 for more detail. ^b Historical rates in this figure may differ from those in previous Reports, as historical population data have been revised using Final Rebased Estimated Resident Population (ERP) data following the 2006 Census of Population and Housing (for 31 December 2002 to 2006). Similarly, new ABS Indigenous population estimates and projections have been used. ^c Includes residential places categorised as high care or low care ^d These figures exclude places and packages funded by Multi-purpose services and those provided by flexible funding under the Aboriginal and Torres Strait Islander Flexible Aged Care Program.

Source: DoHA (unpublished); table 13A.12; 2010 Report, figure 13.12, p. 13.31.

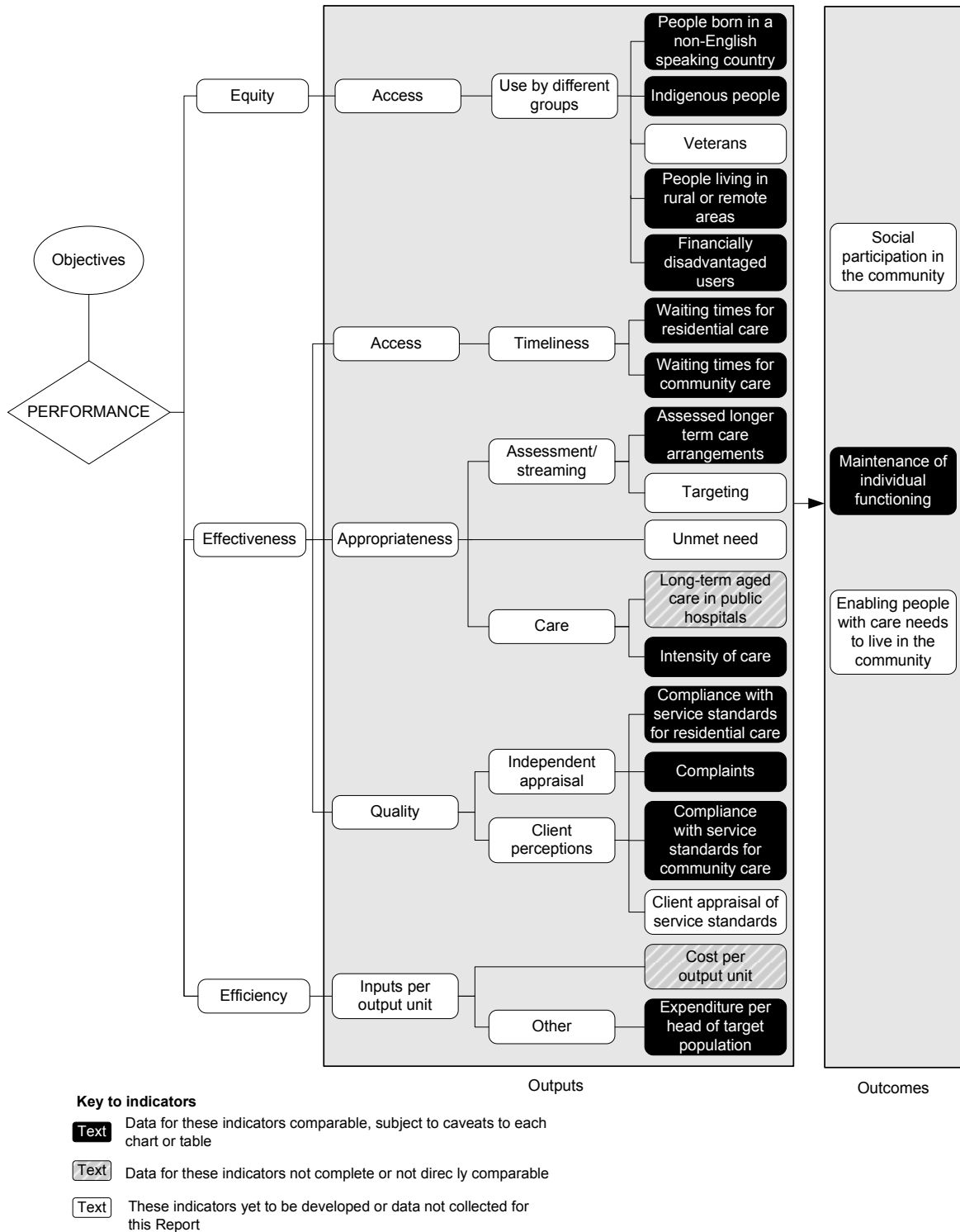
Framework of performance indicators

Data for Indigenous people are reported for a subset of the performance indicators for aged care services in the 2010 Report. It is important to interpret these data in the context of the broader performance indicator framework outlined in figure 13.4. The performance indicator framework shows which data are comparable in the 2010 Report. For data that are not considered directly comparable, the text includes relevant caveats and supporting commentary.

The Report's statistical appendix contains data that may assist in interpreting the performance indicators presented in this chapter. These data cover a range of demographic and geographic characteristics, including age profile, geographic distribution of the population, income levels, education levels, tenure of dwellings and cultural heritage (including Indigenous and ethnic status) (appendix A).

The Council of Australian Governments (COAG) has agreed six National Agreements to enhance accountability to the public for the outcomes achieved or outputs delivered by a range of government services (see 2010 Report, chapter 1 for more detail on reforms to federal financial relations). The National Healthcare Agreement (NHA) covers the area of aged care services, while the National Indigenous Reform Agreement (NIRA) establishes specific outcomes for reducing the level of disadvantage experienced by Indigenous Australians. The agreements include sets of performance indicators for which the Steering Committee collates annual performance information for analysis by the COAG Reform Council (CRC).

Figure 13.4 Performance indicators for aged care services



Source: 2010 Report, figure 13.13, p. 13.33.

Use by different groups

‘Use by different groups’ is an indicator of governments’ objective for the aged care system to provide equitable access to aged care services for all people who require these services (box 13.1).

Box 13.1 Use by different groups

‘Use by different groups’ is defined as:

- the number of people born in non-English speaking countries using residential services, CACPs, EACH, EACH-D 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 (number of people aged 70 years or over plus Indigenous people aged 50–69 years) accesses the service
- the number of Indigenous people using residential services, CACP, EACH, EACH-D 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 (number of people aged 70 years or over plus Indigenous people aged 50–69 years) accesses the service
- the rate of contacts with Commonwealth Carelink Centres for Indigenous people benchmarked against the rate for all people
- the number of veterans aged 70 years and over in residential care divided by the total number of eligible veterans aged 70 years and over, where a veteran is defined as a DVA Gold or White card holder
- access to HACC services for people living in rural or remote areas — the number of hours of HACC service received (and, separately, meals provided) divided by the number of people aged 70 years or over plus Indigenous people aged 50–69 years for major cities, inner regional areas, outer regional areas, remote areas and very remote areas
- the number of new residents classified as concessional or assisted or supported, divided by the number of new residents.

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 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

(Continued on next page)

Box 13.1 (Continued)

- for financially disadvantaged users, Australian Government planning guidelines require that services allocate a minimum proportion of residential places for concessional, assisted or supported residents. These targets range from 16 per cent to 40 per cent of places, depending on the service's region. Usage rates equal to, or higher than, the minimum rates are desirable.

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).

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.

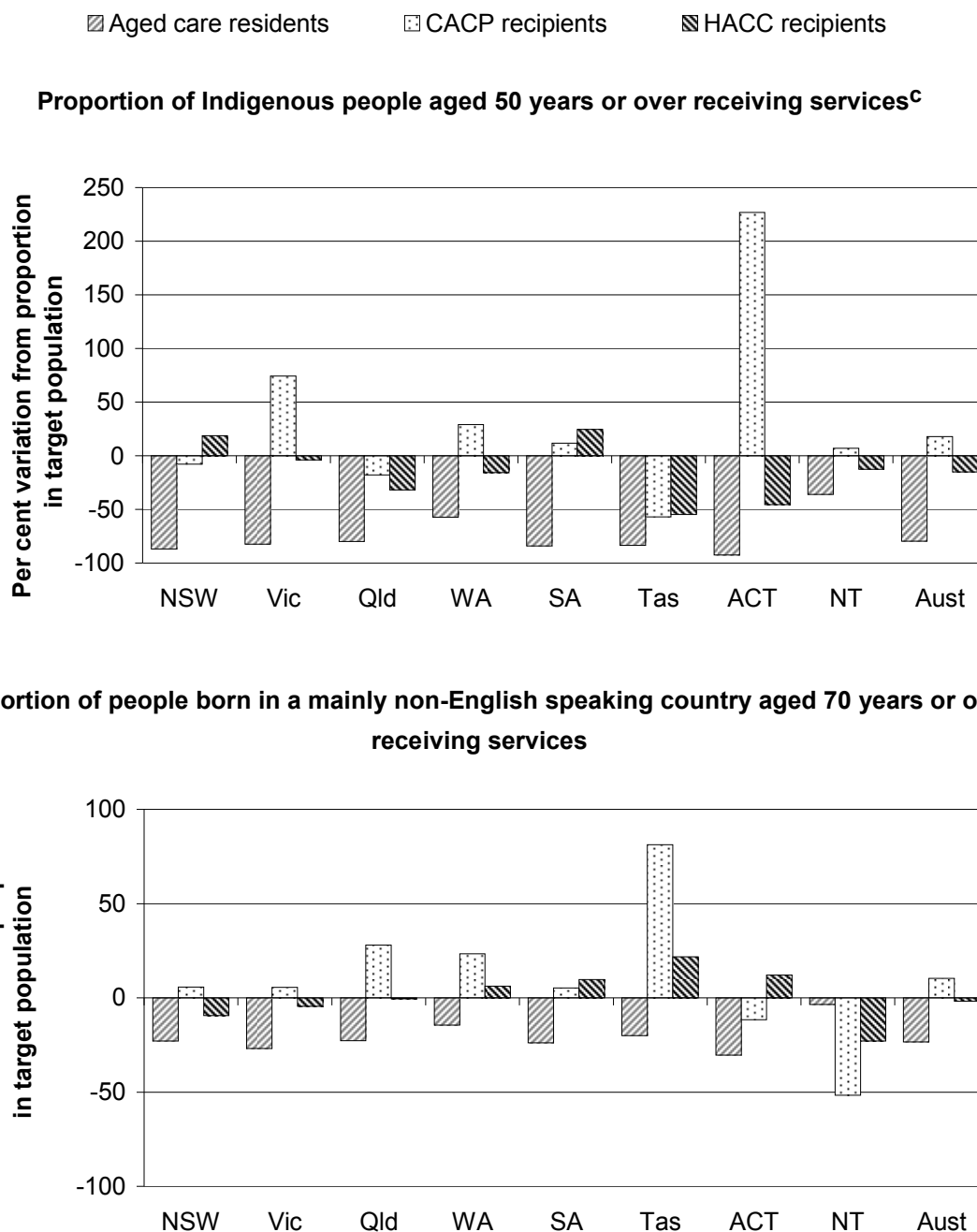
Data reported for this indicator are comparable.

Data presented for this indicator are organised by the type of service provided, with sub-sections for the relevant special needs groups reported against that service.

Access to residential care services, CACP and HACC services by Indigenous people

In general, Indigenous people are under-represented in some aspects of access to residential care, CACP and HACC services in comparison to their proportion of the target population as a whole. However, in relation to the CACP program in the majority of jurisdictions and nationally, Indigenous people are over-represented, compared to the proportion of this group in the target population. Figure 13.5 demonstrates this over- and under-representation by reflecting the variation in the rate of access of the special needs target population from their proportion in the target population as a whole. If Indigenous people accessed services in proportion to their general representation in the target population, no percentage variation would be observed. If they access services at a greater rate, a positive percentage from the benchmark rate will be observed, or, if services are accessed at a lower rate, the bar will be negative (figure 13.5).

Figure 13.5 Variation in the proportions of special needs target populations accessing aged care services from their proportion in the target population as a whole, June 2009^{a, b}



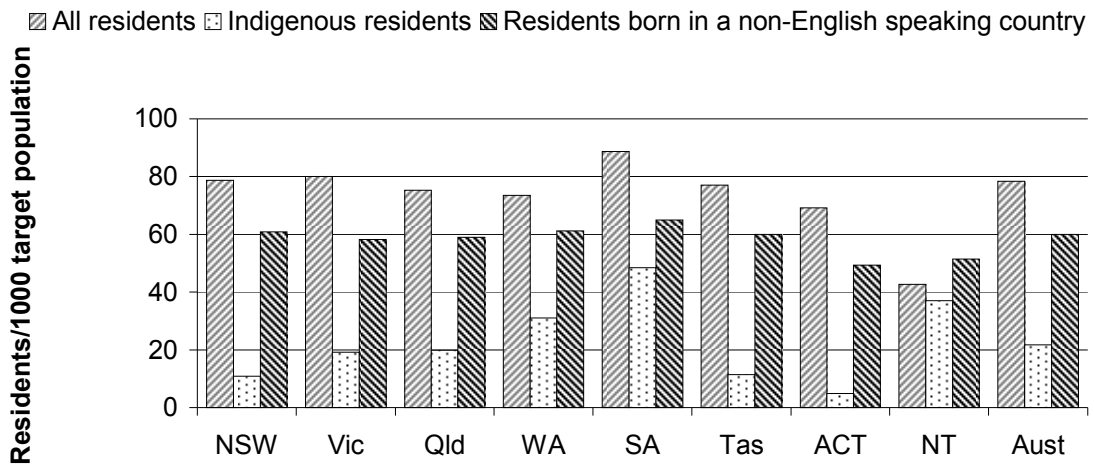
^a The proportion of HACC funded agencies that submitted Minimum Data Set data for 2008-09 differed across jurisdictions and ranged from 89 per cent to 100 per cent. Consequently, actual service levels were higher than stated. ^b Reports provisional HACC data that have not been validated and may be subject to revision. ^c The ACT has a very small Indigenous population aged 50 years or over (table 13A.1) and a small number of packages result in a very high provision ratio.

Source: DoHA (unpublished); table 13A.4; 2010 Report, figure 13.14, p. 13.37.

Access to residential aged care services by Indigenous people

In all jurisdictions at 30 June 2009, on average, Indigenous people had lower rates of use of aged care residential services (21.7 and 60.0 per 1000 of the relevant target populations respectively), compared with the population as a whole (78.4 per 1000) (figure 13.6).

Figure 13.6 Residents per 1000 target population, 30 June 2009^{a, 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.

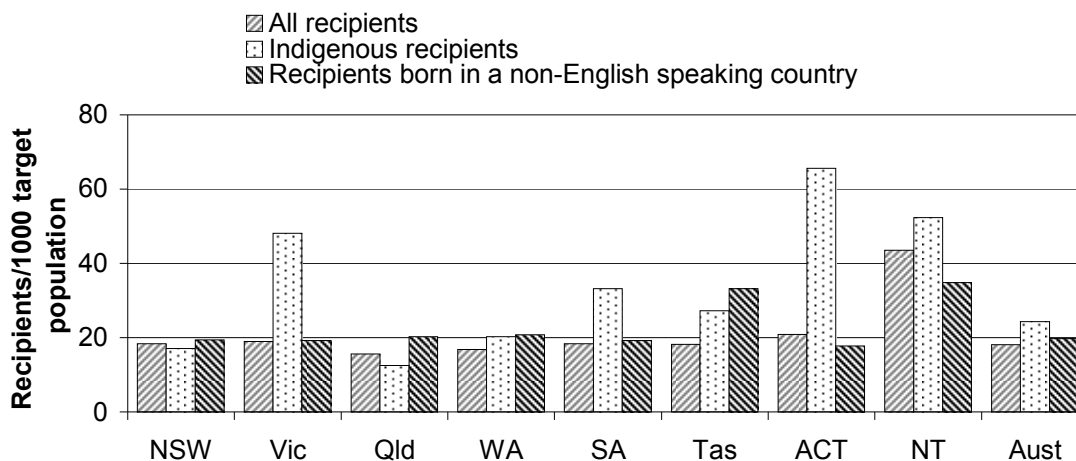
Source: DoHA (unpublished); table 13A.2 and 2010 Report, tables 13A.13 and 13A.15; 2010 Report, figure 13.15, p. 13.38.

Age specific usage rates for these services, by jurisdiction and remoteness are included in the Report. These data suggest there is significant variation in usage rates by remoteness area. In general, differences amongst jurisdictions are less marked than differences between remoteness areas (tables 13A.3 and 13A.12).

Access to aged care community programs by Indigenous people

The number of Indigenous CACP recipients per 1000 Indigenous people aged 50 years or over was 24.3 nationally and the numbers of CACP recipients from non-English speaking countries per 1000 of the relevant target population was 19.7 nationally. These figures compare to a total of 18.1 per 1000 of the target population (people aged 70 years or over plus Indigenous people aged 50–69 years) (figure 13.7).

Figure 13.7 Community Aged Care Package recipients per 1000 target population, 30 June 2009^{a, b, c, d, e}



^a 'All recipients' data are per 1000 people aged 70 years or over plus Indigenous people aged 50–69 years. ^b 'Indigenous recipients' data are per 1000 Indigenous people aged 50 years or over. ^c Data for recipients from non-English speaking countries are per 1000 people from non-English speaking countries aged 70 years or over. ^d The ACT has a very small Indigenous population aged 50 years or over (table 13A.1), and a small number of packages result in a very high provision ratio. ^e 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); table 13A.2 and 2010 Report, tables 13A.13 and 13A.15; 2010 Report, figure 13.16, p. 13.39.

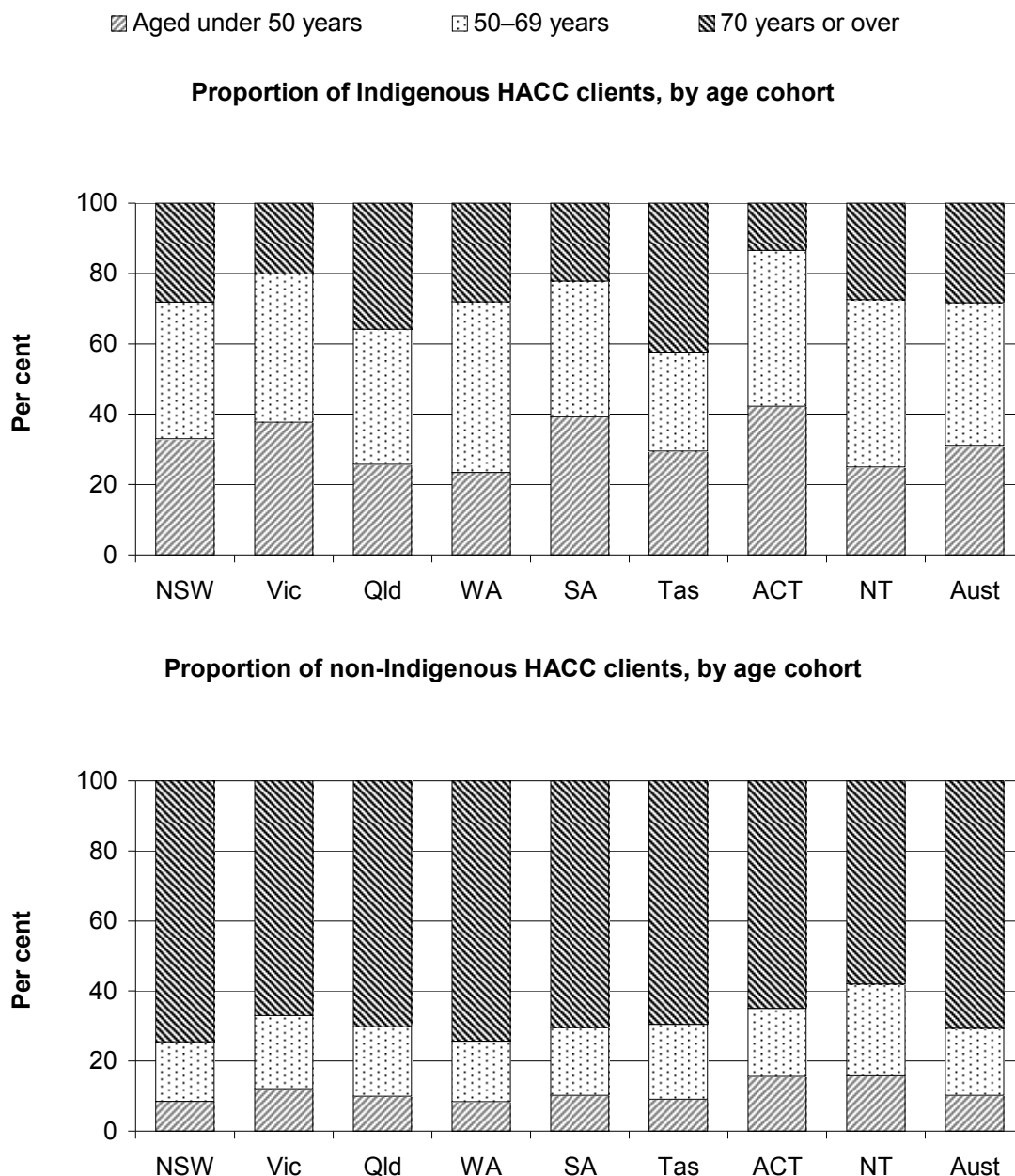
Age–sex specific usage rates by jurisdiction, remoteness and Indigenous usage vary between jurisdictions and remoteness categories for CACP. For EACH and EACH-D, the differences are less marked. However, the EACH and EACH-D programs are small and growing rapidly.

Access to the HACC program

HACC services are provided in the client's home or community for people with a moderate, severe or profound disability and their carers. The focus of this chapter is all people 70 years or over and Indigenous people aged 50–69 years. The proportion of HACC recipients aged 70 years or over during 2008-09 was 69.1 per cent (table 13A.5).

Reported use of HACC services showed a substantial difference between all users and Indigenous users across all age groups in 2008-09. 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 or over is 28.3 per cent and the proportion of non-Indigenous HACC clients who are aged 70 years or over is 70.6 per cent (figure 13.8).

Figure 13.8 Recipients of HACC services by age and Indigenous status, 2008-09^{a, b}



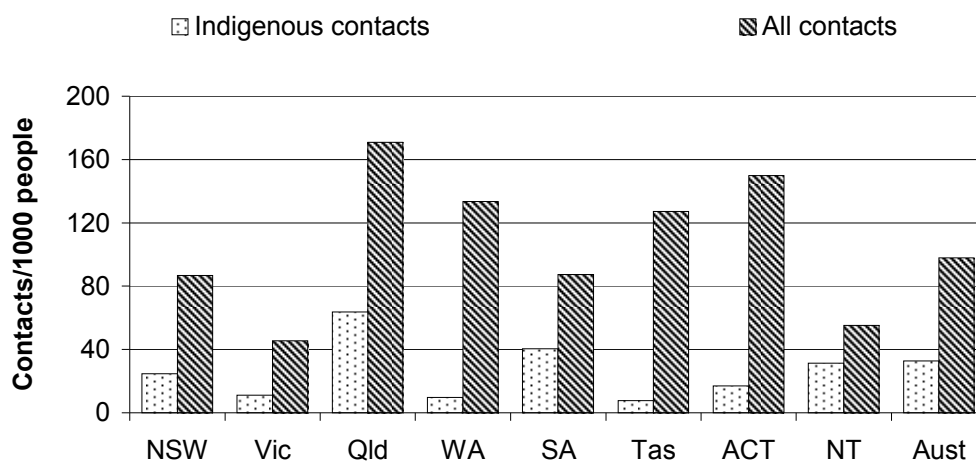
^a Reports provisional HACC data that have not been validated and may be subject to revision. ^b The proportion of HACC clients with 'nil' and 'not stated' Indigenous status differed across jurisdictions and ranged from 6.3 per cent to 14.8 per cent. Nationally, the proportion of HACC clients with 'nil' and 'not stated' Indigenous status was 9.7 per cent

Source: DoHA (unpublished); table 13A.6; 2010 Report, figure 13.18, p. 13.42.

Access by Indigenous people to Commonwealth Carelink Centres

Commonwealth Carelink Centres are information centres for older people, people with disabilities, carers and service providers. 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 2009, was 32.8 people per 1000 Indigenous people in the Indigenous target population (Indigenous people aged 50 years and over). The rate for all Australians was 97.9 per 1000 people in the target population (people aged 70 years or over plus Indigenous people aged 50–69). These figures varied across jurisdictions (figure 13.9).

Figure 13.9 **Commonwealth Carelink Centres, contacts per 1000 target population, by Indigenous status, 30 June 2009^{a, b, c, d}**



^a Contacts with Carelink include phone calls, visits, emails and facsimiles. ^b 'Indigenous contacts' refer to contacts by Indigenous people per 1000 Indigenous people in the target population. ^c 'All contacts' refers to contacts per 1000 target population. ^d People making contact self identify as Indigenous. Therefore, there is likely to be substantial under-reporting of Indigenous status.

Source: DoHA (unpublished); table 13A.11; 2010 Report, figure 13.19, p. 13.43.

Attachment tables

Attachment 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 13A.3 is table 3 in the aged care services attachment). Attachment tables are on the Review website (www.pc.gov.au/gsp). Users without access to the website can contact the Secretariat to obtain the attachment tables (see contact details on the inside front cover of the Compendium). The tables included in the attachment are listed below.

- Table 13A.1** Target population data, by location ('000)
- Table 13A.2** Indigenous aged care recipients per 1000 Indigenous people aged 50 years or over and as a proportion of all recipients, 30 June
- Table 13A.3** Indigenous aged care recipients per 1000 Indigenous people aged 50 years or over by locality, 30 June
- Table 13A.4** Aged care recipients from special needs groups, June 2009 (per cent)
- Table 13A.5** HACC client characteristics, 2008-09
- Table 13A.6** Distribution of HACC clients, by age and Indigenous status, 2008-09 (per cent)
- Table 13A.7** Comparative characteristics of Indigenous HACC clients, 2008-09
- Table 13A.8** Aged care assessments
- Table 13A.9** Government expenditure on aged care services (2008-09 \$ million)
- Table 13A.10** Australian Government (DOHA) expenditure on services provided in mixed delivery settings, 2008-09 (\$ million)
- Table 13A.11** Access to Commonwealth Carelink Centres, 2008-09
- Table 13A.12** Indigenous permanent residents classified as high or low care and Indigenous CACP, EACH and EACH Dementia at 30 June 2009: age-sex specific usage rates per 1000 people by remoteness

References

- ABS (Australian Bureau of Statistics) 2004, *Survey of Disability, Ageing and Carers*, 2003, Cat no. 4430.0, Canberra.
- 2009, *Experimental Life Tables for Aboriginal and Torres Strait Islander Australians, Australia, 2005-2007*, Cat no. 3302.0.55.003, Canberra.