AGEING IN THE BUSH
An ageing in place strategy for Regional Western Australia

REPORT HIGHLIGHTS

REGIONAL DEVELOPMENT COUNCIL
Map of Regional Western Australia
Foreward

Hon. Terry Redman MLA, Minister for Regional Development

The State Government recognises that many older West Australians want to stay in their own communities as long as possible and the Ageing in the Bush Report identifies ways that we can work together to allow people living across regional WA to better access the care they require.

The Report identifies a series of innovative aged care solutions based on four key principles that guide action and include;

• creating age friendly communities
• developing age appropriate housing
• fostering the delivery of home care; and
• support access to residential care within the region

By designing solutions in an integrated way, real value-add can be achieved in both the government and non-government sectors. Working together, the continuum of care needed to allow regional residents to age in place can be delivered.

The State Government understands the value of older residents to regional Western Australia. They have contributed greatly to our communities over many years and they love living where they live and we want to support them to remain in their community.

I congratulate the WA Regional Development Council on developing the Ageing in the Bush Report. It outlines realist solutions based on evidence and community need. The State Government looks forward to working with Local and Federal Government, the Aged Care industry and communities to ensure we create better outcomes for older residents across regional WA.

The Hon. Terry Redman
Minister for Regional Development

Acknowledgements

This Project was supported by:

[Logos of various organisations]
Why focus on Ageing in Regional WA?

The State Wide Ageing in the Bush project was an initiative of the Regional Development Council of Western Australia with the objective to “identify aged care models for regional WA that will enable residents to age in their community”.

Overall, WA non-metropolitan regions have an older population profile than the state as a whole and are consequently further advanced in encountering increasing needs for aged care. Common concerns in regional WA include:

• Sparse and geographically dispersed ageing populations;
• Aged services under pressure;
• Aged and home care workforce issues; and
• Significant sustained growth in demands for aged and home care services.

This means that too often, older people are leaving their homes and their communities to access the services they require. This is likely to have a long term detrimental effect on the individual and rural areas and place increasing pressure on metropolitan services.

Projected growth rates for the older population in regional WA are greater than for metropolitan areas. There is a pressing need to address current issues and prepare for future demands. It is imperative for the economic and social viability of regional WA that the number of older people who have to leave their homes to access the care they need, is reduced.

A number of models to address state wide issues have been developed. They draw on principles that guide quality provision of services, support sustainability and enable appropriate Aboriginal aged care programs. These include:

• geographic ‘footprint’ model for dispersed population;
• housing cluster model to facilitate care delivery;
• improvement of broad access to in-home services;
• accessible respite;
• contemporary model for MPS's; and
• Aboriginal older care models.

Addressing current and impending needs for aged care services presents real opportunities for economic and jobs growth across regional WA. If we can get it right, the social and economic dividends are considerable.

The State’s “WA Tommorrow 2015” approach is also based on ABS census data, it often results in differing population and age care demand projections (usually lower) to those derived from the Commonwealth projections. This ‘Highlights’ Reports uses WA Tomorrow projections.
Ageing Population Projections for Regional WA

Western Australia faces a rapidly ageing population, with the number of people aged 70 and over projected to double by 2026. This increase is set to be more prominent in the Regions where the number of 70+ will increase 100% by 2026, and 85+ will increase by over 124% (WA Tommorrow 2015).

Table 1: Aged 70+ years the WA Tommorrow 2015 population projections

<table>
<thead>
<tr>
<th>Region</th>
<th>2011</th>
<th>2016</th>
<th>2021</th>
<th>2026</th>
<th>Growth 2011-2026</th>
<th>Growth numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>37,950</td>
<td>47,360</td>
<td>61,420</td>
<td>75,980</td>
<td>100.20%</td>
<td>38,030</td>
</tr>
<tr>
<td>Metro WA</td>
<td>154,540</td>
<td>182,060</td>
<td>228,080</td>
<td>279,400</td>
<td>80.80%</td>
<td>19,640</td>
</tr>
<tr>
<td>Whole of State</td>
<td>192,490</td>
<td>229,420</td>
<td>289,500</td>
<td>355,380</td>
<td>84.60%</td>
<td>26,790</td>
</tr>
</tbody>
</table>

Sources: WA Tommorrow 2015 population projections

Examining the 85+ population is significant because current research indicates that the average rate of moderate to severe dementia among Australians aged 85+ is one in four. The incidence of dementia creates a range of special-care needs requiring more complex clinical care. The 85+ population is the single most significant indicator of aged care demand.

Table 2: Aged 85+ years the WA Tommorrow 2015 population projections

<table>
<thead>
<tr>
<th>Region</th>
<th>2011</th>
<th>2016</th>
<th>2021</th>
<th>2026</th>
<th>Growth 2011-2026</th>
<th>Growth numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>5,740</td>
<td>7,960</td>
<td>10,140</td>
<td>12,890</td>
<td>124.60%</td>
<td>7,150</td>
</tr>
<tr>
<td>Metro WA</td>
<td>154,540</td>
<td>182,060</td>
<td>228,080</td>
<td>279,400</td>
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</tr>
</tbody>
</table>

Sources: WA Tommorrow 2015 population projections

The Ageing in the Bush project also examined Aboriginal aged care solutions needed at a younger age due to experience of early age related health issues. For this reason 50+ Aboriginal population figures are used.

Table 4: 50+ Aboriginal population compared with overall 70+ population

<table>
<thead>
<tr>
<th>Region</th>
<th>Aboriginal 50+</th>
<th>Overall 70+ population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gascoyne</td>
<td>260</td>
<td>669</td>
</tr>
<tr>
<td>Goldfields-Esperance</td>
<td>732</td>
<td>2,763</td>
</tr>
<tr>
<td>Great Southern</td>
<td>281</td>
<td>6,413</td>
</tr>
<tr>
<td>Kimberley</td>
<td>1,978</td>
<td>908</td>
</tr>
<tr>
<td>Mid West</td>
<td>795</td>
<td>4,526</td>
</tr>
<tr>
<td>Peel</td>
<td>226</td>
<td>13,312</td>
</tr>
<tr>
<td>Pilbara</td>
<td>897</td>
<td>538</td>
</tr>
<tr>
<td>South West</td>
<td>408</td>
<td>14,273</td>
</tr>
<tr>
<td>Wheatbelt</td>
<td>611</td>
<td>7,537</td>
</tr>
<tr>
<td>Regional WA</td>
<td>6,188</td>
<td>50,939</td>
</tr>
</tbody>
</table>

Developing the Solutions

Policy reviews, demographic analysis and research into aged support innovations were all used to develop models to facilitate older people to age in their community. 21 regional consultation meetings were held with wide range of organisations and individuals across regional WA. This aimed to confirm the data and the applicability of identified models in a regional context.

This approach to information gathering and local validation has provided a clear understanding of practical realities faced by rural aged care providers, local governments, housing bodies and community groups. Regional Development Commission staff and WA Country Health Service (WACHS) managers also provided support and input to the Project.

The ‘Four Planks’ Framework

The Solutions have been guided by, and structured to reflect the ‘Four Planks’ necessary for holistic support and care for older people:

- The foundation plank of Age-Friendly Communities is a World Health Organisation initiative with defined areas of activity and infrastructure that assist older residents to remain active, well and socially engaged. 100% of older people benefit from this plank.

- The second plank of Housing plays a crucial role in decisions to remain living independently. Many older people decide to leave their homes because of worries about maintenance and garden upkeep. There is a risk that poor decisions are made for older people to leave familiar communities and prematurely enter Residential Aged Care through a lack of appropriate, accessible alternative housing in which home care supports can be provided. 20% of older people will require more appropriate housing as they age.

- A range of Community Aged Care programs constitute the third plank and provide a range of in home support and care. It is estimated that this plank supports up to 30% of all older people. The policy trend in these programs is towards income tested fees contributions.

- The fourth plank consists of Residential Aged Care relates to nursing and aged care services provided in conjunction with accommodation in a purpose built facility. In regional WA the proportion of older people in residential care is variable but averages around 5% to 6%.

Figure 1: ‘Four Planks’ or planning elements for positive ageing in the community

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2 AHURI – “ Downsizing amongst older Australians” - January 2014
3 CEPAR- ‘Aged Care in Australia’ Part 1 research brief 2014/01.
Ageing in Regional WA: A Collaborative Approach

The three tiers of government, non-profit and private agencies all play a significant role in providing support and services to help older people remain in regional communities.

The current pattern of lead responsibilities for support and care for older people can be depicted as:

- **Age friendly communities** – Local governments with a level of support from the State Government (Department of Local Government and Communities);
- **Older persons housing** – Community bodies, non-profit agencies, commercial providers, Department of Housing, Local Government;
- **Community aged care** – Funded by the Commonwealth Government and delivered by non-profit agencies, private aged care providers, State Government and Local Government; and
- **Residential aged care** – Funded by the Commonwealth Government and delivered by non-profit agencies, private providers (few in regions) and State Government.

The Commonwealth Government is mainly responsible for funding higher level aged care. Growth funds are made available every 12-18 months through Aged Care Approvals Rounds (ACARs). Providers bid for new funding through a rigorously managed competitive process. In recent years, funding applications for residential aged care beds in WA have fallen short of estimated needs due to provider reluctance. This is a state wide pattern that is particularly evident in rural areas, where economies of scale\(^4\) required for viable services using traditional business models are often not achievable. A new approach is required to deliver integrated sustainable services.

\(^4\) Australian Ageing Agenda – “State Focus WA – On the Fringe” – August 2014, p24
The Key Issues and Proposed Solutions for Regional WA

The following table provides an overview of some of the key issues impacting aged care in Regional WA and the potential solutions that could be implemented to address them. Further analysis and detail is provided in Volume 1 of the Ageing in the Bush Report including infrastructure, service and governance requirements for each of the proposed models and an overview of the cost and benefits.

### Age Friendly Communities

**ISSUE**

Inconsistent local development of strategies for age-friendly communities despite a clear State-level policy

Ongoing support is required to facilitate the development of Age-Friendly Community planning across Local Governments in Regional WA.

**SOLUTION**

Well planned age-friendly communities:

Continued support to local governments and other relevant stakeholders to ensure delivery of practical age-friendly plans in all regional areas.

### Age Appropriate Housing

**ISSUE**

Widespread unmet demand for older persons’ housing

An adequate supply of appropriate older persons’ housing can be instrumental in allowing residents to age in community.

Research and consultations during this project have revealed widespread unmet demand for older persons’ housing.

**SOLUTIONS**

**Facilitate larger partnerships and mixed tenancy**

Models of housing development that provide a range of mixed entry options including pension level rental, commercial rental, lease for life or outright purchase.

Such models would ideally involve strong partnerships between communities, housing bodies, care providers and government to create a single management model, potentially across communities to achieve a sustainable footprint.

**Alternative housing models to facilitate care delivery**

Universal and dementia design housing principles built in small clusters and located close to community services and amenities to facilitate efficient delivery of home care.

Developed at a scale which would provide economies of delivery and allow a resident care worker to be in attendance overnight.
ISSUE

Uneven availability of support and care in the home

There is a tendency for locations more distant from regional centres to lack services to support older people at home.

In a number of regions there appears ‘on paper’ to be a good supply of care at home, but further analysis shows that much of this is being absorbed in covering the significant shortage of residential care in areas nearer to major population centres.

SOLUTIONS

Increased access to flexible care model for remote service delivery

A model to address the difficulties associated with service delivery in more distant, low population areas could be based on the innovative flexible subsidy stream. It may require that the Commonwealth specifically designates a proportion of future places in regional areas to be available under this service type, or adopt a process where existing care packages could be converted to the flexible care stream. It would then require providers to respond with well considered proposals to deliver quality care in practicable and innovative ways.

Geographic ‘footprint’ model for dispersed population

To improve sustainable regional support and care services and (potentially) housing provision for older people a model which facilitates the ‘bundling’ of services in a geographic area is an attractive option. This would involve discussion and consensus among support services and housing providers to facilitate services and housing by a preferred provider in a defined geographic area in order to create viability of operational scale and diversity of income streams.

Improve broad access to in-home services

Providers can adopt a more effective model of in-home service delivery to provide more extensive regional services. Elements of this model may include:

- consortiums of providers working to ensure region wide coverage;
- staffing arrangements which seek out, recruit and train local carers;
- systems which allow better client monitoring and reporting by formal and informal carers; and
- increased local brokerage of services.
Respite Care

**ISSUE**

**In a number of regions the lack of carer respite is a critical issue**

The issue of carer support will become increasingly critical as demographic changes unfold. In every region the growth in the 55+ population (the approximate family carer cohort) was outstripped by the projected growth in both the 70+ and 85+ populations.

**SOLUTION**

**Accessible respite model**

Support is needed for aged care organisations that are willing to commit to the establishment of respite in rural areas. Under consumer directed care, purchase of respite is a valid service type and these revenues could contribute to viability.

Residential Care

**ISSUE**

**Shortages in residential aged care. Highlighted as a critical issue across regional WA**

According to the Commonwealth Government’s most recent available ‘stocktake’ of aged care places in all Australian aged care planning regions (30 June 2013), Western Australia has the lowest ratio of residential care beds of any state, with only 77 beds for every 1000 people aged 70+ compared with the national average of 84.5.

**SOLUTIONS**

**Encourage non-government providers in regions**

Where possible, a model to encourage the entry or expansion of non-government providers should be considered. A range of support mechanisms could be offered to interested non-government providers including:

- facilitation of site provision/development and in planning processes, support for application for recurrent bed funding;
- support for available capital grants and provision of grants matching the Commonwealth; and
- improving viability by aggregation of services through assignment or brokerage of current WACHS services such as HACC and home care.

**Revised and expanded model of MPS**

In some locations a combination of enhanced primary care, on-call emergency response and small scale aged housing precincts facilitating home care may be appropriate. This would be complemented by MPS facilities built and operated to meet future care needs for older people who need complex high care in a residential setting.
**ISSUE**

*Delivery of appropriate care for older Aboriginal people*

A number of common themes and issues emerged from regional consultations in relation to Aboriginal aged care, these include:

- a particular reluctance to enter residential care and corresponding preference for care in community;
- issues with safe, appropriate housing in which to deliver care at home;
- challenges in delivering care in small/remote communities;
- a need for community input and control of services;
- high prevalence of early dementia and cognitive impairment;
- a need for particular forms of residential care catering for greater family presence (both number and duration) and more outdoor amenities;
- a clear preference to age and die on country;
- culturally safe/appropriate care provision; and
- difficulties in recruiting/retaining local remote workforce.

**SOLUTIONS**

*Design model for Aboriginal residential care*

Differing cultural expectations between Aboriginal and non-Aboriginal communities mean that non-standard design features are called for in building facilities for Aboriginal older people. The first is in respect of design for residents where the preference is likely to be for open community style accommodation. The second feature, is that there is sufficient comfortable areas provided in the facility and grounds to allow large family groups to visit for more extended periods.

*Model for care in distant communities - Brokered care at home*

A desirable service model for more distant Aboriginal communities, which combines more efficient service delivery with community development opportunities, is one which would see greater emphasis on brokering care in the home to local communities. There is a significant advantage in such arrangements due to greater efficiency of delivery with local workers, community management of cultural issues, community input and influence, vocational training opportunities and employment creation.

*Site-managed Aboriginal older housing model*

Strong evidence was accumulated during this project of the need for a particular approach in providing housing for older Aboriginal people. The model would involve designated housing for older Aboriginal people (built to appropriate design) but which is site-managed with a live-in caretaker.

Adoption of the model, at least in a trial form, offers the potential to resolve an issue that is extremely pressing for the safe welfare and care of older Aboriginal people. It would require significant local Aboriginal community input and management to ensure consensus on the matter and that the person/s who assumed the caretaker role was supported in their role.

For further information contact: info@wheatbelt.wa.gov.au