

Access and Support service – it’s all about the gaps and client outcomes

THE ACCESS AND SUPPORT (A&S) PROGRAM IN VICTORIA IS A UNIQUE SECTORAL SUPPORT SERVICE AIMED AT ASSISTING INDIVIDUALS¹ WHO EXPERIENCE BARRIERS TO ACCESSING THE SERVICE SYSTEM, AS A RESULT OF THEIR DIVERSITY. THE ACCESS AND SUPPORT ROLE PROVIDES SHORT TERM PERSON CENTRED SERVICE TO ELIGIBLE INDIVIDUALS AND THEIR CARERS FROM NINE SPECIAL NEEDS GROUPS, INCLUDING CULTURALLY AND LINGUISTICALLY DIVERSE, ABORIGINAL AND TORRES STRAIT ISLANDER POPULATIONS, LGBTI, CARE LEAVERS, FORGOTTEN AUSTRALIANS, STOLEN GENERATIONS, VETERANS, PEOPLE IN REGIONAL AND RURAL AREAS, SOCIALLY AND FINANCIALLY DISADVANTAGED INDIVIDUALS, HOMELESS OR PEOPLE AT RISK OF HOMELESSNESS AND PEOPLE LIVING WITH DEMENTIA.

Ethnic Communities’ Council of Victoria (ECCV) is the peak policy advocacy body for culturally and linguistically diverse communities and their organisations in Victoria. ECCV is receiving Commonwealth Department of Health Sector Support and Development funding to convene bi-monthly state-wide A&S meetings.

The network has a significant representation of A&S services from all of the special needs groups across the State. The meetings provide a platform for peer support, the sharing of best practice, guest speakers who provide updates on the aged care sector, and is used by both the State and Commonwealth governments to provide information and receive feedback.

ECCV convenes the Aged Care Policy Committee to address a range of aged care related matters, including the sustainability of the A&S program. Additionally, ECCV works closely with other peak bodies, such as Victorian Aboriginal Community Controlled Health Organisation, Housing for the Aged Action Group and Municipal Association of Victoria.

A&S workers act as vital system navigators by promoting and linking individuals to the service system. As a sector support and development role, the A&S service is impartial and is not limited to the clients and catchment area of their auspice organisation; this allows workers to assist a great number of individuals and their carers who, due to their diversity, otherwise have difficulty accessing appropriate services. This includes by:

- Identifying individuals in need and explaining the aged care service system through assertive outreach;
- Working with the service system, including with assessors and aged care services, when required;
- Supporting clients through My Aged Care pathway: access to My Aged Care and screening, Regional Assessment Services (RAS) or Aged Care Assessment Team (ACAT) assessments and linking with appropriate services.²

This position paper summarises the key findings of ECCV’s consultations with various stakeholders in the aged care sector across Victoria over a two-year period, including, but not limited to, hospitals, community and health services, government departments, community organisations and peak bodies. This position paper provides recommendations and outlines a way forward given that the funding for the program is at this stage scheduled to cease post June 2020.

¹ Older consumers: 65 years and over (50 and over for Aboriginal and Torres Strait Islander people), funded by Commonwealth Department of Health; and younger: under 65 years old (under 50 for Aboriginal and Torres Strait Islander people), funded by Victorian Department of Health Human Services.

² CHSP Access and Support Services. Victorian Access and Support services protocol for working with the My Aged Care Contact Centre and assessment services – 1 July 2016 to 30 June 2020.

Key findings

- Seniors and younger people with disabilities from a range of backgrounds as well as their carers are challenged by the complexity of the Australian Commonwealth Home Support Program (CHSP), Victorian Home and Community Care Program for Younger People (HACC PYP) and Carer service systems.
- Seniors' isolation in Australia is increasing, with greater likelihood of isolation in rural areas, and among those with traumatic past experiences, a history of discrimination and/or from a non-English speaking background.³
- A&S workers assist individuals by helping to remove the barriers they face when trying to understand and access aged care and other services. This includes addressing an individual's concern over safety, trust or cultural⁴ and language barriers.
- A significant proportion of culturally diverse seniors speak a language other than English at home and may revert to their mother tongue as they age. If not supported appropriately this can present barriers to accessing services.
- People who are Indigenous, Lesbian, Gay, Bi-sexual, Transgender and Intersex (LGBTI), or who have a lived experience of homelessness or trauma, might not be aware of eligible services or trust providers to understand or respect their needs.
- A&S workers have a holistic knowledge of the aged care system, and local supports and services, including non-aged care specific services that are vital providers in regional and rural settings.
- A&S workers up skill service providers on inclusive practices to respond to the needs of diverse clients.
- A&S workers are often bicultural and bilingual workers.
- According to evidence gathered through state-wide and regional A&S meetings, the majority of A&S clients are first-time entrants into aged care and health services in general.
- A&S workers have a role to assist the assessment process and ensure the client receives the best outcome.
- A&S was externally evaluated in 2015 and the findings indicate that "A&S Workers are demonstrating success in engaging with, and linking vulnerable people to services."⁵

Key ECCV Policy Positions and Recommendations

Based on numerous conversations with A&S workers and other stakeholders across Victoria, ECCV emphasises that the A&S program has improved access to services and made the aged care and health system more equitable since its introduction. The service supports individuals by promoting health and wellbeing and assisting people to navigate the service system, reducing early admissions to hospitals and nursing homes.

The case studies attached to this document showcase examples of Access and Support services and the client outcomes.

1. ECCV recognises the valuable role of A&S and its contribution to enabling older and younger people with disabilities access services and supports to improve their independence and quality of life.
2. ECCV encourages the Commonwealth Department of Health (DoH) to consider the Victorian support model and the outcomes of its successful A&S program to inform the program design of new Government initiatives and trials, such as the Aged Care Navigator trial. The Victorian aged care

³ Commissioner for Senior Victorians, *Ageing is everyone's business*, 2016.

⁴ Words *Cultural background* and *culture* used in this paper refer to diverse backgrounds of people from any of the 9 special needs groups.

⁵ HDG Consulting Group, *Home and Community Care, Diversity Planning and practice implementation review project*, 2015, p. iii.

sector support structure is well placed to provide direct examples and advice on successful models for supporting the most vulnerable and to ensure that they have access to information and therefore adequate support.

3. ECCV strongly advocates for the continued funding of the A&S program and that it is extended for a minimum of three years after the full transition of the CHSP in Victoria in June 2020. This is to ensure continuity of care and service availability for our older population.
4. ECCV emphasises that A&S is an established program with no equivalent across Australia. It is an existing program in Victoria and an effective example of Recommendation 23 in the Legislated Review of Aged Care 2017: “the government should introduce aged care system navigator and outreach services to assist consumers who have difficulty engaging through the existing channels to effectively engage with My Aged Care.”⁶
5. A&S workers have excellent knowledge of local services and invaluable expertise, which prevents individuals from falling through the system gaps and thus premature admissions to high care.
6. ECCV encourages both Victorian Department of Health and Human Services (DHHS) and DoH to consider the importance of the A&S service in regional and rural settings, where consumers may be particularly vulnerable to social isolation and needing support to access their community and the service system. Often in rural areas A&S client referral pathways extend to non-aged care services for best client outcomes.
7. A&S workers are strategically positioned to understand and support the client’s unique needs and life circumstances, as well as navigate the intersections of diverse experiences that may impact their service accessibility.
8. ECCV emphasises that uncertainty about the future of aged care, including the A&S program, creates significant staff turnover.
9. ECCV commits to ongoing advocacy on behalf of the A&S service and invites cross-sector conversations to advance the role’s sustainability.
10. ECCV encourages State and Commonwealth governments to collate existing qualitative and quantitative data to identify the positive impact that A&S has had on the older Victorians in need.
11. ECCV strongly encourages DoH and DHHS to initiate and fund an A&S program review for “ongoing evaluation, review and enhancement of information and support products.”⁷

The Way Forward

The Australian government’s commitment to embedding Wellness and Reablement within aged care and health services is reflected by improved access to appropriate and inclusive services, as the right of every Australian.

Enabling seniors and individuals with disabilities from diverse backgrounds to make informed decisions will encourage assisted independent living, and therefore prevent people from untimely and costly admissions to high care.

The A&S program is a significant component of Wellness and Reablement and Diversity planning initiatives in Victoria that were actively exercised for more than ten years. There is a need for recognition of current Victorian practices that are leading the way to “ensuring diversity is catered for in the new [aged care] system.”⁸

⁶ Australian Government Department of Health, *Legislated review of aged care*, 2017, p. 15.

⁷ Aged Care Sector Committee, *Aged Care Roadmap*, 2016, p.4.

⁸ Australian Government Department of Health, *Aged Care Diversity Framework*, 2017, p.1.

The Australian and Victorian governments are encouraged to initiate the evaluation of the A&S program before the decision on changes to funding of the program takes place. ECCV looks forward to working with the Australian and Victorian governments and peak bodies to ensure the sustainability of the Access and Support service model in Victoria and its implementation across Australia.

For more information please contact Gabriele Rukas, ECCV Sector Development Officer – Aged Care and Disability, on grukas@eccv.org.au or 03 9354 9555.