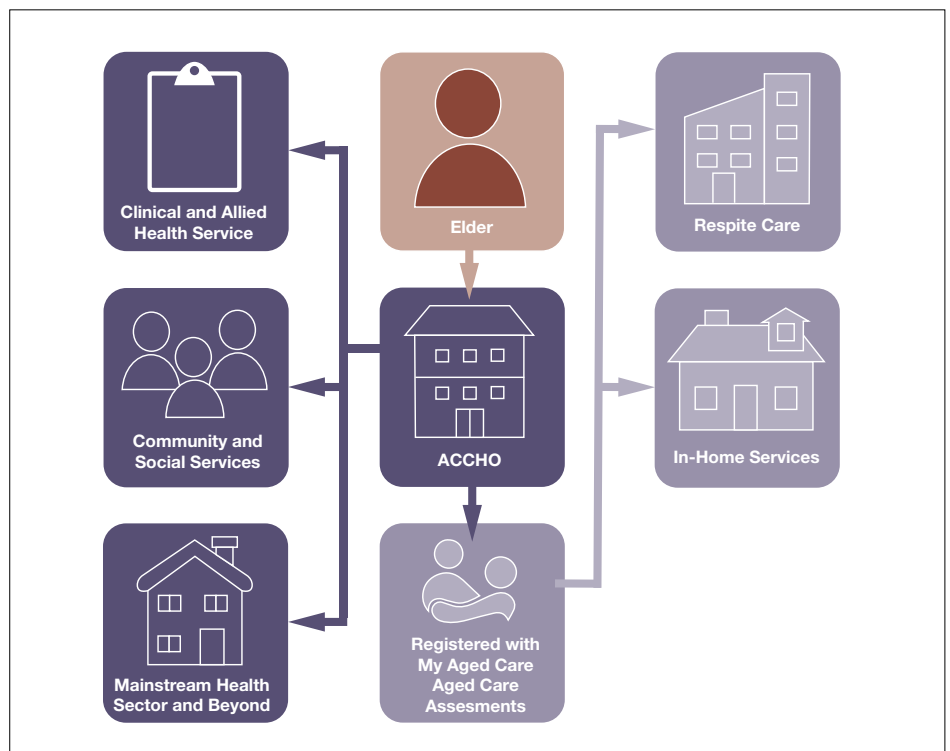


Summary

Aboriginal and Torres Strait Islander peoples are living longer and there are growing numbers of Elders requiring aged care services. Aboriginal community controlled health organisations (ACCHOs) are well positioned to provide aged care services since they understand the unique needs of Elders, are connected to community and can provide culturally-centred care. ACCHOs can integrate aged care services within their comprehensive primary health care model to provide seamless services to Elders. In providing aged care, ACCHOs meet with challenges in relation to aged care funding and the aged care system, change management processes and the availability of a qualified culturally safe aged care workforce.

ACCHOs as a One-Stop-Shop for Elders: Integrated holistic health and aged care services

Key principles include culturally safe care, respect for self-determination, a focus on holistic wellbeing, tailored services, credibility, willingness to go the extra mile, connection with Elders and communities.



Outcomes

ACCHOs can tailor aged care services to the needs of their Elders and build a local culturally safe aged care workforce. Elders benefit from accessing their local ACCHO to receive both aged care services and holistic primary health care services. The integration of services enables efficient referrals and effective discharge planning and reduces pressure on family carers.

Enablers

Effective aged care service delivery in ACCHOs is enabled by a local culturally safe aged care workforce, effective workforce recruitment and training processes, strong ACCHO governance, effective organisational structures and operating systems, continuous quality improvement processes, effective internal communication and referral pathways, and effective relationships with external organisations.

CONTACT



wardliparingga@sahmri.com



(08) 8128 4000



create.sahmri.org



SAHMRI
South Australian Health & Medical Research Institute



Aged Care in ACCHOs: challenges and policy implications

The ACCHO sector faces several challenges in relation to aged care service provision and funding. The table below describes some of these challenges and poses potential policy level responses to strengthen the work of the ACCHO sector.

	Challenge	Potential policy level response
Aged care funding	ACCHOs must coordinate multiple sources of funding in providing integrated services for their Elders (e.g. MBS, Integrated Team Care, Home Care Packages, Commonwealth Home Support Program).	Funders to acknowledge ACCHOs as the preferred provider of aged care services due to the well-established connection between ACCHOs and Aboriginal and Torres Strait Islander Elders, and adequately resource ACCHOs to undertake complex financial management.
	Mainstream aged care providers receive funding for Aboriginal and Torres Strait Islander clients.	Mainstream aged care services to establish formal partnerships with ACCHOs, broker their funding allocation to ACCHOs, and/or recruit Aboriginal and Torres Strait Islander staff.
Change management processes	ACCHOs must manage a change process and rapidly develop knowledge of aged care systems, funding, terminology and accreditation requirements and develop effective referral pathways and financial management systems.	ACCHOs would benefit from greater resourcing when taking on aged care service provision to support change management processes.
	ACCHOs often go in to financial deficit during the process of integrating aged care services.	
Aged care workforce	There is a shortage of Aboriginal and Torres Strait Islander aged care workers and culturally safe non-Indigenous aged care workers including within Aged Care Assessment Teams and Regional Assessment Services.	Funding for workforce initiatives is needed to attract, recruit and develop an Aboriginal and Torres Strait Islander Aged Care workforce. Implementation of the <i>National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016–2023</i> must consider the aged care workforce. All workforce, including within the Regional Assessment Service and Aged Care Assessment Teams, must receive ongoing and mandatory cultural safety training to provide Elders with culturally safe assessments and care.
Aged care system	Data captured through <i>My Aged Care</i> does not enable evaluation of package allocations for Aboriginal and Torres Strait Islander older peoples.	<i>My Aged Care</i> portal needs to better capture data related to Aboriginal and Torres Strait Islander Elders to enable evaluation of service providers and funding allocations.
	Elders can receive multilayered, unclear letters from Centrelink which they find difficult to navigate and that put them at risk of having packages ceased. ACCHO aged care staff invest considerable time supporting Elders to interpret and navigate Centrelink correspondence.	Centrelink to evaluate and revise their communication strategies so that Elders consistently receive accurate and non-threatening correspondence to ensure they can access the services they are entitled to.

The content within this policy brief was drawn from Aboriginal and Torres Strait Islander led research undertaken by the Centre of Research Excellence in Aboriginal Chronic Disease Knowledge Translation and Exchange (CREATE), Wardliparingga Aboriginal Health Equity, South Australian Health and Medical Research Institute.

The Centre of Research Excellence in Aboriginal Chronic Disease Knowledge Translation and Exchange (CREATE). (2020). Aboriginal Community Controlled Health Organisations in practice: Sharing ways of working from the ACCHO sector. Wardliparingga Aboriginal Health Equity Theme, South Australian Health and Medical Research Institute, Adelaide.

