



# DHBs, PHOs and Elder Care

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# Key role of DHBs

- improve, promote and protect the health of communities
- reduce health disparities by improving health outcomes for Maori and other population groups
- reduce health outcome disparities
- foster community participation in health improvement, in planning for & changes to the provision of health services

# Population Overview

- 6,528 population over 75 (out of 138,000)
- 2,188 (34%) receive demand driven support services
- Increasing 2% per year
- Will start to increase by 5% per year from 2011

# Ageing of the Ageing

- The older group itself is ageing
- There will be about six times as many old-old (85+) in 2051(294,000) as there were in 2001 (50,000).
- In 2051 they will make up 24% of population aged 65+, compared with 11% in 2001
- The 85+ group will also account for 6% of the population in 2051

# Demand Driven Expenditure

- Total \$29 million (out of \$280 mill)
- 19 aged residential care – 26M
  - 12 hospital level services
  - 4 dementia care
  - 16 rest home services
  - 1 psychogeriatric facility
- 3 home support contracts - 3M

# Non-demand contracts

- SRS \$4M (DHB Provider Arm)
- Restorative programme - \$120k
- Falls – \$80k
- High social needs - \$75k
- NASC - \$610k
- Accredited Assessment \$80k

# Current challenges

- multiple providers not coordinated
- limited resources, growing & unmet need
- workforce issues
- information not accessible & services poorly coordinated
- assessments not comprehensive enough to meet all needs eg social isolation
- contracts are rigid, promote dependence & deterioration
- fluctuating client need not catered for

# Our Aim

Continuum of client-centred services

Maintaining or restoring independence

Reduced readmission rates to acute services

Delayed entry to residential care

Single point of entry – incorporating screening and interdisciplinary assessments of referrals

- Information sharing among agencies
- Electronic referrals
- Privacy, ethical & professional issues managed
- Training & development
- Case management of complex clients



# DHB Projects

- Inter RAI pilot
- Packages of care pilot
- Restorative programmes – restorative, respite
- Central care coordination unit
- Accredited equipment project

# Packages of Care

- A goal based approach where the client is significantly involved in the goal setting process
- An holistic perspective which includes a broader focus than clinical and functional considerations
- A flexible & responsive approach – indiv. tailored services esp. for those with moderate & high complex needs
- A functional activity of daily living based exercise programme to restore strength and extend the range of activities so the person is independent.
- Delivery of support in a manner that reduces likelihood of increasing or creating dependency and may for some help build independence

# ASPIRE

- Assessment of Services Promoting Independence and Recovery in Elders
- 3 year study - \$1 mill – Auck Univ, MoH, Canterbury, HV & Waikato DHBs
- evaluating alternatives to residential care, & best practice for caring for older people
- randomised controlled trial, begun Oct 03

# Older Persons' Service Plan

- integrated services across community and health care settings for older people and their families.
- workforce development initiatives across the sector
- culturally appropriate services for Maori & Pacific peoples
- responsive community referred equipment assessment
- flexible packages of care & enhanced service coordination
- target specific interventions eg falls prevention, and specific vision, hearing & dental services

# PHOs

- Local provider organisations funded by a DHB to provide a specified set of essential primary health care services to an enrolled population
- 6 in our DHB
- 2 Access PHOs
- 2 based in group practices
- moves to shared management services

# PHOs

- links made with preventative/primary care initiatives such as falls programmes
- targeting people 75+ & screening
- Care Plus
- look to developing future linkages eg District Nursing