

# Continuing Care update

March 2011

## A focus on ... Closing the Gap on Aboriginal disadvantage

In 2008, the Victorian Government signed a statement of intent to close the life expectancy gap between Aboriginal and non-Aboriginal people by 2030.

This pledge was in response to the *National Indigenous Reform Agreement*, a COAG initiative which committed to a concerted campaign by all levels of government in Australia, in partnership with Aboriginal people, to close the gap on Aboriginal disadvantage.

Under this initiative, the Department of Health, through the Aboriginal Health Branch, supports Victoria in reaching two health targets, which are:

- to close the gap in life expectancy within a generation
- to halve the gap in mortality rates for Indigenous children under five within a decade.

The work focuses on five priority areas, including:

- tackling smoking
- primary health care services that can deliver
- fixing the gaps and improving the patient journey
- healthy transition to adulthood
- making Indigenous health everyone's business.

### Victoria's approach

Responsibility for the work belongs to local communities and health services. Each of the eight Department of Health regions have established a Closing the Health Gap Advisory Committee.

The committees are comprised of representatives from Aboriginal and mainstream health and community service organisations. In partnership with all relevant stakeholders, they have developed local regional health plans to meet the needs of their Aboriginal communities at a grassroots level.

The Aboriginal Health Branch is also working towards service system change across the health trajectory, from hospitals to primary health care services, to make Aboriginal health everyone's responsibility and to promote understanding, respect and quality health care for Aboriginal people.

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## Introducing ... Zoe Austin-Crowe

Zoe returned to the Continuing Care team in September following the birth of her two boys and four busy years of maternity leave. She is currently working on the Advance Care Planning and Residential In-Reach portfolios.

Zoe joined the department in 2005 and worked on the mainstreaming of HARP in which 97 projects were merged into 14 programs.

Zoe has a Bachelor of Occupational Therapy and has worked as an occupational therapist at Southern Health, the NHS in the UK and in a number of rehabilitation hospitals. She also has a Master of Project Management and has had management roles in the Australian and State Government jointly sponsored Coordinated Care Trials.

Zoe's key motivating factors are preserving quality of life and improving the experience for people using health services.



## Closing the Gap in continuing care

The Closing the Gap initiative will be a key item for discussion at the Health Independence Program forum meeting on 25 February 2011. Health services will be asked to provide an update on their progress in implementing the priorities identified for Closing the Gap on Aboriginal disadvantage as part of their Health Independence Programs guidelines progress report for 2010–11.

Maggie Burrows has commenced work in the Continuing Care Unit, undertaking a project focused on how we can work together to improve access to subacute services for Aboriginal people.

Services are invited to submit information about work they are undertaking that will contribute to the Closing the Gap initiative. Please send information to Maggie Burrows at <maggie.burrows@health.vic.gov.au>, or phone (03) 9096 8047.

## Victorian Aboriginal Palliative Care Program

Since 2007, the department has funded the Aboriginal Palliative Care

Program, which aims to create a sustainable and culturally safe palliative care service system, so that Aboriginal people from all over Victoria can access palliative care services in the setting of their preference. The Victorian Aboriginal Community Controlled Health Organisation is implementing this program. An evaluation report on the first three years can be found at <www.health.vic.gov.au/palliativecare/vapc>.

*For more information, contact Ellen Sheridan at <Ellen.Sheridan@health.vic.gov.au> or Cherie Waight at <CherieW@vaccho.com.au>.*

## Aboriginal and Torres Strait Islander Patient Quality Improvement Toolkit for Hospital Staff

The toolkit, which was recently developed as part of the Improving the Culture of Hospitals project, has been made into a web-based resource and is available at <http://www.svhm.org.au/aboutus/community/ICHPToolkit/Pages/toolkit.aspx>.

Thank you to the health services and Aboriginal organisations that

assisted in the development and trial of the kit. We hope it helps hospitals to take a systematic approach to improving their performance in the area of Aboriginal and Torres Strait Islander health. The toolkit will also assist health services to address the new Australian Council of Healthcare Standards (ACHS) Aboriginal-specific criterion, which has recently been released and will be implemented in July 2011.

*View copies of the newsletters and the project's final report at <http://www.lowitja.org.au/crcah/improving-culture-hospitals>.*

*For more information, contact John Willis at <John.Willis@svhm.org.au>.*

## Indigenous accommodation in metropolitan Melbourne

The Kevin Coombs Hostel in North Melbourne provides accommodation and support for Indigenous patients and their families who need to leave their communities to access medical treatment.

*For more information, phone (03) 9329 7374 or contact Kevin Coombes at <kevincoombs@ahl.gov.au>.*

## Health Independence Programs guidelines progress report 2010–11

The Department of Health will shortly be requesting an update from all health services on their progress in implementing the Health Independence Programs (HIP) guidelines.

We will be seeking feedback on progress with implementation of the four guidelines identified as priorities in 2009, being access, initial needs identification, appropriate setting and corporate governance.

We will also be asking for an implementation plan for four additional guidelines, being:

- assessment
- transition and exit
- an interdisciplinary approach
- care coordination.

Feedback is being sought on the HIP guidelines in general, with a view to identifying any gaps or areas that need to be reviewed or updated. Health services will also be asked to provide an update on their progress in implementing the priorities identified for *Closing the Gap* on Aboriginal disadvantage.

Requests for a HIP guidelines

implementation progress report were sent out to the chief executive officers of health services in December 2010. The first group of reports will be due in early March 2011, the second group due in late March 2011 and the last group due in mid April 2011.

The department is aiming to provide feedback to agencies on their progress reports by the end of the 2010–11 financial year.

*For more information, email <hipguidelines@health.vic.gov.au> or phone Carol Pyke on (03) 9096 0509.*

## Continuing Care key achievements in 2010

The Continuing Care section oversaw a number of improvements in palliative and subacute care in 2010. Key achievements in each area include:

### Palliative care

- the establishment of the Palliative Care Clinical Network to provide clinical leadership in implementing new policy and program initiatives, including the Clinical Service Improvement Program
- ongoing funding to the Victorian Paediatric Palliative Care Program (VPPCP) to provide specialist occupational therapy assessments for children with a life-threatening condition and to ensure timely access to aids and equipment
- funding the development of 12 new nurse practitioner models, an important step in meeting the aim of appointing 22 nurse practitioner candidates by 2011.

### Rehabilitation and Hospital in the Home services

- implementation of the Hospital in the Home (HITH) review recommendations, including the release of draft HITH guidelines, available at <[www.health.vic.gov.au/hith](http://www.health.vic.gov.au/hith)>
- completion of the Royal Children's Hospital's post-intervention physiotherapy service review
- commencement of the spinal cord integration team pilot, which will provide a coordinated approach to assisting clients with a new spinal cord injury to transition home and into community living. The project is a partnership with the Transport Accident Commission, Austin Health, Alfred Health and the Department of Health
- expansion of home-based rehabilitation, new specialist clinics in regional areas and expansion of the Victorian Paediatric Rehabilitation Service to Ballarat through the subacute ambulatory care services program.

### Ageing and complex care

- expansion of the Hospital Admission Risk Program (HARP) from 22 to 35 statewide services across Victoria, including ongoing funding for existing HARP – Better Care for Older People initiatives
- finalisation of several regional subacute services plans after mapping current service provision against Victorian subacute services capability and access-planning framework. The *Planning the future of Victoria's sub-acute service system: A capability and access planning framework* can be found at <[www.health.vic.gov.au/subacute](http://www.health.vic.gov.au/subacute)>
- ongoing funding for four regional and nine metropolitan health services to provide residential in-reach services
- roll-out of an additional 163 Transition Care Program (TCP) places and an increase of authorised health service participation improving local access to the program

## Update on initiatives and projects for continuing care

Name of initiative or project	Progress	Contacts and further information
Program of Experience in the Palliative Approach (PEPA)	The Victorian PEPA program is now accepting applications for supervised clinical placements in palliative care services from GPs, Division 1 nurses, Aboriginal health workers and allied health staff.	Ellen Sheridan Ellen.Sheridan@health.vic.gov.au <a href="http://www.health.vic.gov.au/palliativecare/PEPA">www.health.vic.gov.au/palliativecare/PEPA</a>
Refugee health fellow positions	New recurrent funding has been provided to support continuation and expansion of the work undertaken by refugee health fellows based at the Royal Melbourne and Royal Children's Hospitals.	Joan Snyder Joan.Snyder@health.vic.gov.au
Health Independence Programs forum dates for 2011	The 2011 dates for the HIP forums and managers meetings are: 27 May 9 September 25 November Each forum and meeting runs from 10 am–3 pm.	Charlotte Pountney Charlotte.Dart@health.vic.gov.au
Palliative care statewide meetings	The 2011 dates for the palliative care statewide meetings are: 24 March 27 October Palliative care consortium managers and chairs and palliative care statewide, academic services and DH regional contacts are welcome to attend.	Jo Hall Jo.Hall@health.vic.gov.au
Launch of reviewed HARP web pages	The HARP web pages have undergone a significant revision with new information, including contacts for all HARP services and publications and presentations from the past two years. The web page also includes the executive summary of the Respiratory Review. The HARP Diabetes Review will be uploaded soon. All HARP services are encouraged to use these documents to guide quality improvement and service development of chronic disease streams. During 2011, the department will continue to work with individual health services to implement high priority recommendations.	Please visit our website at < <a href="http://www.health.vic.gov.au/harp">www.health.vic.gov.au/harp</a> >
Implementation of the Functional Independence Measure	Health services are required to report FIM data for rehabilitation services from 1 July 2010 and GEM data from 1 January 2011. The department is committed to minimising the reporting impact on health services, and will monitor the impacts of changes from Barthel to FIM.	For more information, contact Tania Cossich on 03 9096 0487 or at <a href="mailto:Tania.cossich@health.vic.gov.au">Tania.cossich@health.vic.gov.au</a> For AROC training inquiries, contact AROC on 02 4221 4411 or at <a href="mailto:aroc@uow.edu.au">aroc@uow.edu.au</a>

## The Continuing Care Team contact details

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