

## Appendix A – Timeline for developing the Victorian HACC Program Annual Plan, 2003-04

Tasks	Date
DHS Regions develop Draft Regional Plans	6 May – 13 June
<b>DHS sends Draft Regional Plan to sector &amp; website</b>	<b>27 June</b>
<b>Regions consult sector on Draft Regional Plan</b>	<b>1 – 18 July</b>
Regions refine Draft Regional Plans (post consultation)	28 July
Central office drafts <i>Victorian HACC Program Annual Plan 2003/2004</i> from Draft Regional Plans Central office consults with Commonwealth officers on the content of the Annual Plan	August
Central office forwards <i>Victorian HACC Program Annual Plan 2003/2004</i> to State Minister for approval	8 September
<b>State Minister forwards <i>Victorian HACC Program Annual Plan 2003/2004</i> to Commonwealth Minister for approval</b>	<b>15 September</b>
<b>Regional Plans and <i>Victorian HACC Program Annual Plan 2003/2004</i> posted on website</b>	<b>Post joint approval</b>
<b>Invite or advertise initiatives (in accordance with Annual Plan)</b>	<b>27 September</b>
<b>Submissions due</b>	<b>24 October</b>
Regional recommendations forwarded to central office	31 October
Calculate minor capital allocations	14 November
Central office sends funding allocation recommendations to State Minister for approval	14 November
State Minister approves funding allocations	Post C'wealth Minister's approval of Annual Plan
<b>Joint Ministerial announcement</b>	<b>November</b> <b>(subject to joint approval of Annual Plan)</b>
Advise agencies	December
<b>Growth funds flow to agencies</b>	<b>1 January</b>

## Appendix B - Regional Consultation – Gippsland

The Region prepared a Draft Regional Plan 2003-06 and presented this to the sector for critical appraisal. A summary of the consultations is provided below, namely attendees and outcomes.

### Attendance

The outcomes of the following consultations contributed to the development of the Regional Plan 2003-06.

Consultation	Date	Number of people in attendance				
		Total number of attendees	Number of service providers	Number of clients or carers	Peak org's	C'wealth rep attended
Gippsland Koori HACC Network	1/7/03	9	3	0	0	No
	15/7/03*	4	3	0	0	No
East Gippsland & Wellington Shires	7/7/03	16	1 2	0	0	No
Bass Coast & South Gippsland Shires	8/7/03	15	6	0	0	2
Baw Baw & Latrobe Shires	9/7/03	9	7	0	0	No
Bass Coast Shire	17/7/03*	4	3	0	0	No
East Gippsland	24/7/03*	3	3	0	0	No

NB. The Meetings marked\* were additional consultations with agencies from a single local government area, held as a result of the need for further consultation being identified.

### Outcomes

#### Additional data

Through the consultations the following data was provided for consideration in the development of the Regional Plan 2003-06:

- Population profiles from agency
- Practice wisdom about how to increase the access of people from CALD and ATSI backgrounds to HACC activities
- Supply and demand of HACC Services.

Overall agencies reported a high level of demand for HACC services across the Region. However, it would appear from the qualitative information provided by agency representatives that those local government areas where there is a high level of funding per head of HACC target population that demand for services is less of an issue than in the comparatively lower funded areas. It seems that Bass

## **Appendix B - Regional Consultation – Gippsland**

Coast has generally been managing the apparent high level of demand by ensuring that expectations of service levels are made very clear to consumers from the outset.

Given that service delivery is not uniform across every local government area it would appear that there are sections, within the higher funded local government area's, where service providers are indicating that a high level of demand exists. This appears more apparent in smaller and more rural agencies where it is argued that the cost of providing HACC services may be greater.

### **Discussions about proposals**

#### **Equalisation or not?**

The Region proposed to top-slice 11% of the growth funds and to distribute this to the relatively under-funded local government area of Bass Coast. The Region proposed a range of equalisation options.

Overall, agency representatives who participated in the consultation process expressed an agreement in principle to the notion of attaining funds equalisation across the Gippsland Region. However, there was not agreement about the level of equalisation that should be applied. Some expressed a need to redress the apparent inequity as soon as possible and to reduce the length of any equalisation process. Others were more cautious and expressed a need for more detailed modelling before committing to an opinion.

DHS has been requested to model different scenarios for redressing HACC funds inequity across the Region (timeframe and dollars required) and present these to the sector. DHS will undertake be undertaking additional work in regard to the funds equalisation prior to the next funding round and will consult with the sector regarding the various options for redressing inequity over the course of the triennium. The modelling will take account of the impact of rolling HACC-like activities from Aged Care into HACC and the Department of Infrastructure population projections derived from the 2001 Census due early 2004.

#### **Priority 1 is to increase the supply and improve the responsiveness of 'HACC Basic' services and consolidate the 'HACC Basic' service system around the key local government and health sector providers.**

Stakeholders generally agreed with the Region's proposals to expand HACC services and method of funds allocation, with the following exceptions:

- Data analyses indicated a relative undersupply of Personal Care in Bass Coast and it was proposed to grow this activity. However, service providers in this catchment agreed that Nursing was a higher priority in the San Remo area and therefore should be expanded in preference to (preferably the equivalent of 1 day) Personal Care
- Bass Coast providers suggested that the split of service provision between Bass Coast Community Health and Wonthaggi District Hospital needed to better reflect the population within their respective catchments and agreed upon a 50:50 split in future
- Service providers in East Gippsland reported a high need for additional Property Maintenance in outer-lying rural areas
- Some of the Bush Nursing centres indicated a high priority for additional funding service system resourcing

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- Wellington service providers agreed with the proposed activity allocations but suggested that the split of service provision between the providers needed to better reflect the population within their respective catchments. It was agreed that DHS would determine this by utilising the 70yrs+ population data to be provided by the Wellington Shire.

**Priority 2 is to increase the quantity and quality of 'HACC Basic' services for people from CALD backgrounds and develop new collaborative direct service delivery arrangements between mainstream, multi-cultural and ethno-specific organisations.**

### Proposal

- To implement a region-wide CALD Communication strategy in 2003-04 that promotes HACC Basic services to the CALD population (\$5,000 in 2003-04)
- That Gippsland Migrant Resource Centre continue to promote the use of language services by mainstream providers
- That a CALD project be undertaken by the Equity and Access worker to ascertain the impact of Cultural Planning upon service delivery and determine appropriate strategies to enhance access to the HACC service system for the CALD population in the future (\$30,000 2004-06)
- That HACC agencies canvas the needs of the CALD ageing population with primary care partnership's in the Region 2003-06 in order to achieve recognition of the CALD ageing population as a priority for Health Promotion activities.

### Response

Stakeholders generally agreed with the focus of the proposals. However, concern was expressed at the consultations that the proposals were too ambitious considering the funding allocation of (\$5,000 in 2003-04 for CALD Communication Strategy). Requests were also made for clearer objectives and outputs in relation to the (\$30,000 growth in 2004-06) prior to any decision being made about allocation.

Latrobe and Baw Baw suggested that the funding for the 2003-04 CALD communication strategy should be doubled to \$10,000. Service providers stated that most primary care partnership's have already recognised the ageing CALD population and have integrated this into their health promotion plans.

The department has decided to allocate \$10,000 to Gippsland Migrant Resource Centre for a Pilot CALD Communication Strategy.

**Priority 3 is to increase the quantity and quality of HACC services for Aboriginal and Torres Strait Islander (ATSI) communities.**

### Proposal

- \$50,000 for a Koori HACC Liaison and Assessment Position. The aim is to develop partnerships between mainstream providers and the Indigenous community, increase cultural awareness and promote HACC mainstream services to the ATSI population in the Bass Coast, Baw Baw, Latrobe and South Gippsland Shires.

Response

The Aboriginal HACC Network and service providers generally agreed with the focus of the proposal and in particular to increase the local service provision to the Koori Community across Gippsland. Concern was expressed that the proposal required clearer objectives and outputs. Some expressed a need for the project be time-limited and reviewed after 2 years. The Aboriginal HACC Network emphasised the need for additional assessment and care coordination.

**Regional development initiatives**

The region proposed to expand HACC Training (\$14,645 for the Coordinator position and training in 2003-04, \$9,912 for training 2004-06)

There was general support for both elements of this proposal at most consultations. However some providers expressed a need to increase the level of HACC training and were not in favour of increasing the Coordinator's hours. Some providers supported the need for the re-establishment of the HACC training advisory committee while other did not see the need for this. Some providers expressed the need to reduce the impact of the administration workload associated with training for their staff.

The Region proposed a project (\$5,000) to investigate the most efficient means of replacing vehicles for Planned Activity Groups and in some instances for HACC staff.

There was general support by most service providers for a project in relation to replacement of Planned Activity Group vehicles and the issue of transport for this activity. Many agencies and in particular the larger organisations did not perceive any benefit from a project in relation to staff vehicles, however there were some organisations, in particular the smaller providers, who supported this element. Some providers expressed the need to link with existing transport programs with in the Region. Some providers proposed the ideas of HACC Vehicles being purchased on a state-wide level to obtain efficiencies of scale.

The region has decided not to allocate \$5,000 for this purpose and instead has allocated these funds for the CALD Communication Strategy. The region formed a view that this project did not require funding and could be done with in existing regional resources.

**Minor capital**

The proposal to retain up to 20% of the minor capital funding for discretionary purposes received strong support across the regional consultations, although some providers expressed a preference to know their agency allocations prior to making this decision.

**Incorporation of consultation data into the Regional Plan 2003-06**

All information, responses, etc obtained during the consultation period have been considered in the development of the Regional Plan 2003-06.

**Other issues**

A number of issues not directly relating to the content of the Regional Plan 2003-06 were also raised:

- A number of agencies expressed their concern that Planned Activity Groups and community transport (through Volunteer Co-ordination) were not priorities for 2003-06
- The cost of delivering services seems to be increasing at a rate higher than indexation
- Issues associated with the implementation of the SCoTT were identified.

## Appendix C – Supporting evidence for HACC Priority 2

### Analysis of the CALD population aged 65 and over

#### 1 Introduction

The following information is designed to show the extent to which the Victorian ageing population consists of people from Culturally and Linguistically Diverse Backgrounds (CALD). It is important that people from CALD populations have fair access to the HACC services provided by the mainstream, multicultural and ethno-specific agencies.

This paper also highlights the new and emerging CALD communities along with older, more established communities. Communities have been grouped into three bands depending on size to allow better comparison between percentage growth and growth in actual numbers.

#### 2 Key Findings

- 20.6% of the total Victorian 65+ population are from a CALD background.
- Between 2001 and 2006, the number of Victorians aged 65+ from CALD backgrounds is projected to increase by 16.3%, compared to a 5.2% increase in the 65+ English speaking population.
- Western and Northern regions contain the largest CALD 65+ populations as a percentage of their total populations. 12 of the top 19 LGA's are located within these regions.
- Between 2001 and 2006, historically large (>5,000) ethnic groups aged 65+ will continue to increase in size, with the Croatian community growing at the highest rate of 55%.
- Of the mid-sized 65+ ethnic communities, the Turkish, Spanish and Serbian communities are projected to increase by 67%, 44% and 42% respectively between 2001 and 2006. These ethnic groups are seen as emerging communities.
- The Greek, Italian and Jewish 65+ communities currently receive the largest proportion of HACC funding to ethno-specific and multicultural agencies.
- Based on current funding levels to ethno-specific and multi-cultural agencies, there appears to be a large disparity in funding per capita, between the various ethnic communities.
- Of the \$8.8 million provided to ethno-specific and multi-cultural agencies, 46% is for Planned Activity Groups.
- 22% of Planned Activity Group service users are of CALD background. This is correlated proportionately to the total CALD 65+ population in Victoria (20.6%)
- Generally people from CALD communities are underrepresented in services such as home care, property maintenance, nursing, delivered meals and allied health.

### 3 Data Sources

- All data has been obtained from one of the following sources: AIHW projections of older immigrants, 2001 census and the HACC Minimum Data Set (MDS).
- Language and country of birth are used only as a proxy for cultural identification. Unless otherwise stated, language has been used, as this is a more meaningful indicator of the nature of the service delivery required.
- AIHW projections are based on the 1996 census. When compared to the actual results per the 2001 census, the AIHW 2001 projections appear to be consistently higher indicating that long-term projections could be overstated.
- People from CALD backgrounds not only access HACC services provided by ethno-specific and multi-cultural agencies but **also** from mainstream agencies, particularly local Governments for home care & personal care, and nursing agencies.
- It should be noted that the extent to which MDS data accurately reflects information regarding the HACC population is uncertain. There are two key issues with respect to the MDS data. First, data quality for the variable *language spoken at home* is not always well recorded and secondly, missing data from ethno-specific agencies can mean that whole communities are excluded from the analysis. It is hoped that over time data quality will improve and strategies to improve data quality are being implemented.

### 4 Distribution of CALD population

#### 4.1 Persons aged 65 and over who speak a language other than English at home

Table 1 shows the number of people 65+ who speak a language other than English at home.

While 19.8% of the 65+ CALD population live in the Western region, they represent 40.19% of the region's 65+ population.

Table 1: 65+ CALD population - 2001

Region	No of 65+ CALD	% of 65+ CALD population	% of region's 65+ population
Victoria	125,561	100%	20.6%
Western	24,877	19.8%	40.19%
Northern	34,239	27.3%	39.40%
Eastern	25,431	20.3%	20.73%
Southern	28,112	22.4%	19.26%
Barwon SW	4,743	3.8%	9.22%
Hume	2,625	2.1%	7.80%
Gippsland	2,705	2.2%	7.55%
Loddon/Mallee	1,741	1.4%	4.18%
Grampians	1,031	0.8%	3.43%

Source: 2001 Census

**4.2 LGAs with large CALD communities**

The LGAs listed in Table 2a have 65+ CALD populations, as a percentage of their 65+ population, greater than the Victorian average (20.6%), based on people who speak a language other than English at home. It shows that in Whittlesea and Brimbank, 61.22% and 60.99% of the 65+ population respectively, are from CALD backgrounds.

Table 2b shows LGA’s with a 65+ CALD population greater than 1,000.

A breakdown by language spoken at home for all LGAs can be found in Appendix 3.

Table 2a: LGA’s with large CALD communities (based on %)

<b>Region</b>	<b>LGA</b>	<b>No. of 65+ CALD</b>	<b>% of total 65+ population</b>
Northern	Whittlesea	5,603	61.22%
Western	Brimbank	9,110	60.99%
Northern	Moreland	10,519	47.64%
Northern	Darebin	8,741	43.89%
Northern	Yarra	2,856	43.14%
Southern	Gr. Dandenong	6,584	41.93%
Western	Moonee Valley	5,985	38.24%
Western	Maribyrnong	3,260	37.92%
Northern	Hume	3,320	36.07%
Eastern	Manningham	5,001	35.19%
Western	Hobsons Bay	3,544	33.62%
Southern	Port Phillip	2,829	31.99%
Western	Wyndham	1,500	27.44%
Eastern	Monash	6,483	27.00%
Southern	Glen Eira	5,222	26.13%
Western	Melbourne	944	22.84%
Southern	Stonnington	2,627	21.70%
Southern	Casey	2,581	21.08%
Western	Melton	534	20.71%

Source: 2001 Census

Table 2b: LGA's with 65+ CALD populations greater than 1,000

Region	LGA	Total 65+ population	Total 65+ CALD pop.	%
Northern	Moreland	22,081	10,519	47.64%
Western	Brimbank	14,936	9,110	60.99%
Northern	Darebin	19,916	8,741	43.89%
Southern	Gr. Dandenong	15,702	6,584	41.93%
Eastern	Monash	24,009	6,483	27.00%
Western	Moonee Valley	15,650	5,985	38.24%
Northern	Whittlesea	9,152	5,603	61.22%
Southern	Glen Eira	19,981	5,222	26.13%
Eastern	Manningham	14,212	5,001	35.19%
Eastern	Whitehorse	23,808	4,536	19.05%
Barwon SW	Greater Geelong	28,985	4,268	14.72%
Eastern	Boroondara	22,772	3,980	17.48%
Southern	Kingston	19,913	3,628	18.22%
Western	Hobsons Bay	10,542	3,544	33.62%
Northern	Hume	9,204	3,320	36.07%
Western	Maribyrnong	8,598	3,260	37.92%
Northern	Yarra	6,621	2,856	43.14%
Southern	Port Phillip	8,844	2,829	31.99%
Northern	Banyule	16,521	2,803	16.97%
Southern	Stonnington	12,107	2,627	21.70%
Eastern	Knox	12,966	2,624	20.24%
Southern	Casey	12,246	2,581	21.08%
Eastern	Yarra Ranges	12,802	1,570	12.26%
Southern	Bayside	15,062	1,534	10.18%
Western	Wyndham	5,467	1,500	27.44%
Southern	Mornington P	23,954	1,420	5.93%
Southern	Frankston	13,831	1,309	9.46%
Gippsland	Latrobe	8,634	1,295	15.00%
Eastern	Maroondah	12,098	1,237	10.22%

Source: 2001 Census

## 5 Projections

### 5.1 Projected changes in the number of persons aged 65 and above, from CALD backgrounds

Table 3 shows the projected increase in the number of persons aged 65 years and above from CALD backgrounds, in 5 years intervals.

Between 2001 and 2006, it is anticipated that growth in the CALD 65+ population will result in an additional 24,686 people living in Victoria who speak a language other than English at home. Grampians is the only region expected to see a fall in the number of CALD 65+ people living in the region, during that period.

The growth in the CALD 65+ population will be concentrated in the metro regions.

Table 3: Projected increase in 65+ CALD population

DHS region	2001-06	2006-11	2011-16	2016-21	2021-26
Victoria	24,868	18,603	23,804	19,760	22,531
Barwon-SW	310	67	249	(2)	143
Grampians	(23)	(22)	27	24	60
Loddon-Mallee	227	129	293	124	225
Hume	345	128	189	78	154
Gippsland	213	(25)	65	(72)	(50)
Western	5,069	4,314	6,325	5,978	6,703
Northern	7,758	5,520	6,058	4,209	5,111
Eastern	5,234	3,994	5,161	4,552	4,757
Southern	5,553	4,498	5,437	4,869	5,428

**Source: AIHW 2001 Projections of older immigrants**

( ): negative growth

Note: Projected data needs to be treated with caution as it has been noted that earlier projections have been overstated.

## 5.2 Emerging ethnic groups 65 and over

Between 2001 and 2006, it is anticipated that there will be an increase in the number of people aged 65 and above, speaking a language other than English at home.

For analytical purposes, communities have been grouped into three bands based on the projected 2006 population figures to allow better comparison between percentage growth and growth in actual numbers.

- Band 1 - > 5,000
- Band 2 - 1,501 – 4,999
- Band 3 - 0 – 1,500

Table 4: Projected growth by language

	<b>Language</b>	<b>2001</b>	<b>2006</b>	<b>% change 2001- 2006</b>
Band 1	Croatian	3,723	5,750	54.45%
	Greek	21,042	29,544	40.40%
	Macedonian	3,900	5,094	30.62%
	Maltese	5,000	6,056	21.12%
	Chinese (2006: comprising Cantonese 66%, Mandarin 23% and other Chinese 11%)	7,352	8,801	19.71%
	Italian	41,727	47,904	14.80%
	German	10,763	11,396	5.88%
	Other European languages	8,265	8,056	-2.53%
Band 2	Turkish	969	1,620	67.18%
	Spanish	1,904	2,747	44.28%
	Serbian	1,507	2,146	42.40%
	South Slavic	1,079	1,520	40.87%
	Arabic (including Lebanese)	2,238	3,017	34.81%
	Other Southern / Southeast Asian	1,686	2,201	30.55%
	Vietnamese	3,010	3,748	24.52%
	French	2,101	2,398	14.14%
	Russian	2,544	2,897	13.88%
	Hungarian	3,061	3,273	6.93%
	Netherlandic	4,928	4,930	0.04%
	Polish	5,526	4,871	-11.85%
Band 3	Portuguese	205	346	68.78%
	Persian	190	294	54.74%
	Hindi	305	452	48.20%
	Korean	102	150	47.06%
	Indonesian	142	184	29.58%
	Japanese	147	186	26.53%
	Tagalog (Filipino)	1,056	1,311	24.15%
	Other Eastern Asian	755	931	21.70%
	Other Southwest Asian & North African	477	573	20.13%
	Tamil (Sri Lanken)	540	610	12.96%

Source: AIHW Projections of older immigrants

### 5.3 Long-term growth projections

Appendix 1 shows the long-term growth projections (2001 to 2026) in the 65+ populations for the ethnic communities listed in Table 4. These projections highlight that each community will peak at different times, with respect to growth rates and total 65+ populations.

## 6 Allocation of 2003-2004 HACC funds to ethnic communities

The HACC program funds services to the value of approximately \$8.8 million to multi-cultural (29%) and ethno-specific agencies (71%) for service provision. This amounts to 4% of total HACC service provision.

Table 5 shows the allocation of 2003-2004 HACC funding to ethno-specific and multi-cultural agencies split between PAG and other activities.

As noted earlier, people from CALD backgrounds not only access HACC services provided by ethno-specific and multi-cultural agencies but **also** use services provided by mainstream agencies, particularly local governments for home care & personal care, and nursing agencies.

Table 5: Allocation of 2003-2004 HACC funding to ethno-specific and multi-cultural agencies

<b>Community served</b>	<b>PAG funding \$</b>	<b>Other activity \$</b>	<b>Total funding \$</b>	<b>% of total funding</b>
Finnish	37,513	49,475	86,988	0.99%
Lao	21,735	16,027	37,762	0.43%
Romanian	30,378	46,627	77,005	0.88%
Filipino	203,336	820,080	134,651	1.53%
Jewish	41,093	93,559	1,023,416	11.64%
Polish	18,818	54,065	536,783	6.11%
Slavic	13,062	79,660	72,883	0.83%
Spanish	19,613	152,694	128,802	1.47%
Chinese	311,603	225,180	550,928	6.27%
Serbian	55,659	97,541	92,722	1.05%
Dutch	4,467	52,950	266,776	3.03%
Russian	128,190	138,586	153,200	1.74%
Greek	11,802	55,295	1,021,622	11.62%
Croatian	605,400	416,222	172,306	1.96%
Ukrainian	15,737	65,827	57,417	0.65%
Maltese	94,725	34,077	149,342	1.70%
Vietnamese	277,323	716,895	90,598	1.03%
Arabic	-	6,192	67,098	0.76%
Italian	45,792	44,806	994,218	11.31%
Macedonian	-	12,417	81,564	0.93%
Indian	483,408	67,520	6,192	0.07%
Latvian	-	51,600	10,687	0.12%
German	-	6,192	51,600	0.59%
Hungarian	142,230	7,112	6,192	0.07%
Indochinese	10,630	57	217,659	2.48%
Armenian	196,310	21,349	63,376	0.72%
African	-	63,376	55,309	0.63%
Cambodian	44,729	10,580	37,845	0.43%
Sri Lanken	37,791	54	12,417	0.14%
Cyprus	-	6,229	6,229	0.07%
Lithuanian	-	6,192	6,192	0.07%
Ceylonese	-	2,366	2,366	0.03%
Multicultural	1,152,881	1,366,276	2,519,157	28.66%
Total funding	4,004,224	4,787,079	8,791,303	100.00%

Source: HACC project register - Recurrent/Fixed-term recurrent 2003-2004 CALD funding, 2001 Census and AIHW projections of older immigrants

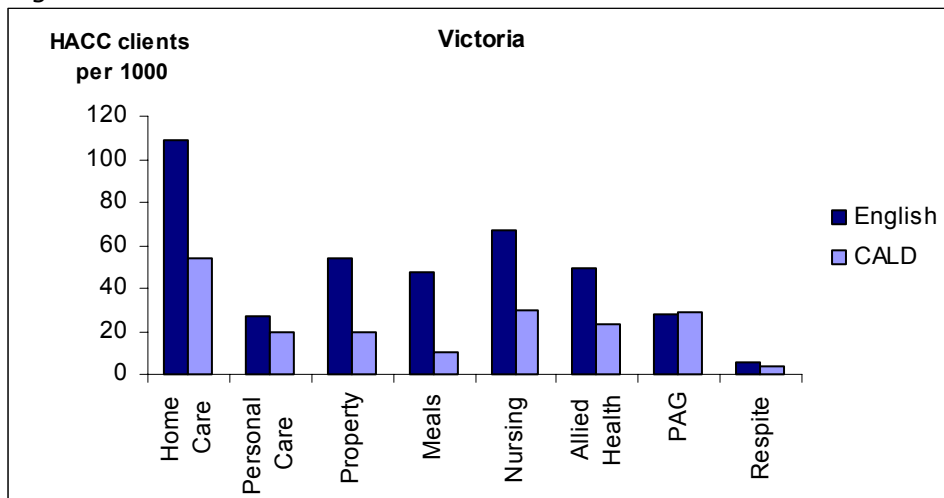
**7 HACC clients - English versus Non-English speakers**

Generally people from CALD communities are underrepresented in services such as home care, property maintenance, nursing, delivered meals and allied health. This is represented in Figure 1, which shows number of HACC clients 65+ per 1000 for each of the English speaking and non-English speaking 65+ populations.

With respect to home care, for every 1000 people 65+ that speak English at home, approximately 110 people use HACC services. In contrast, only 56 people access HACC services for every 1000 people 65+ from a CALD background.

Refer to appendix 2 for a breakdown by region.

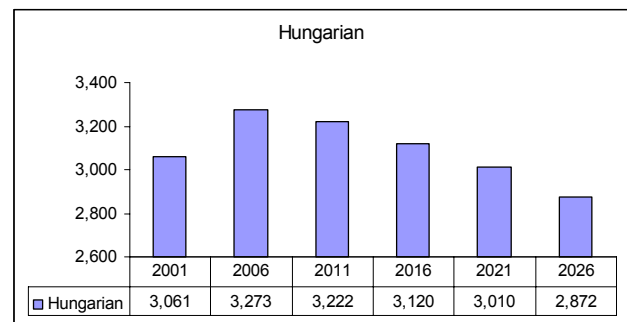
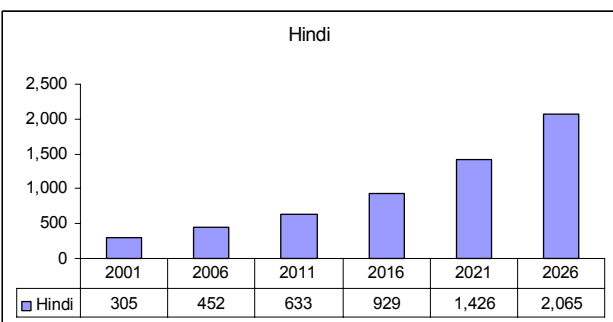
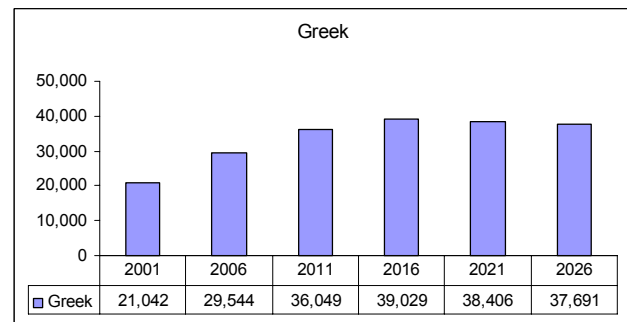
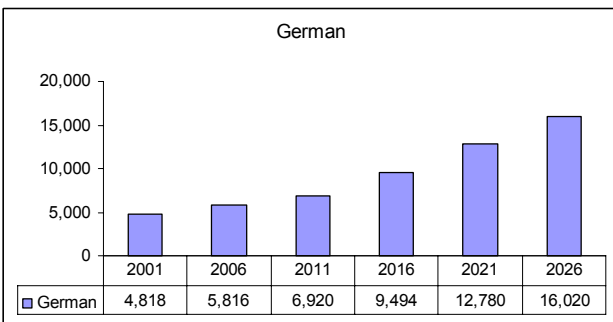
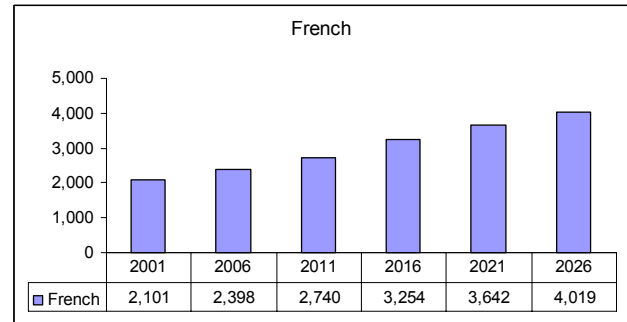
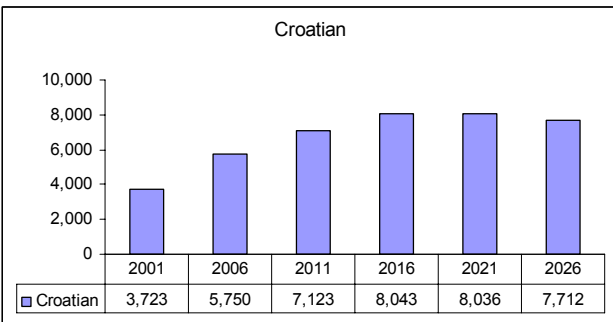
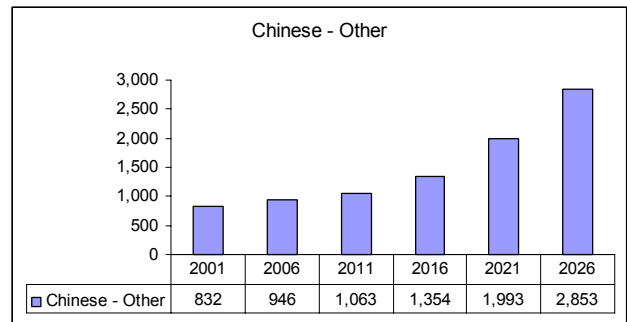
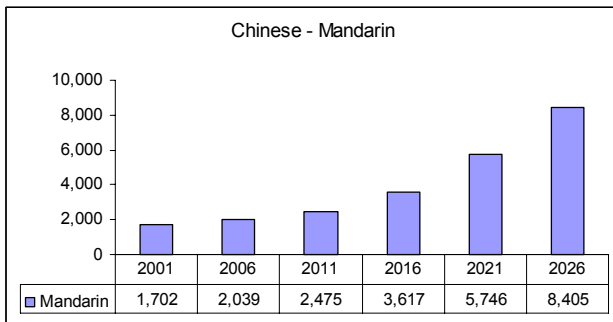
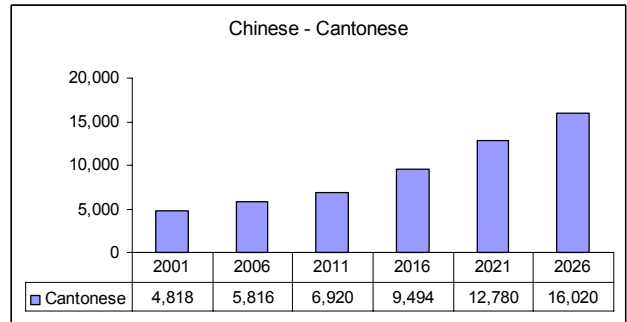
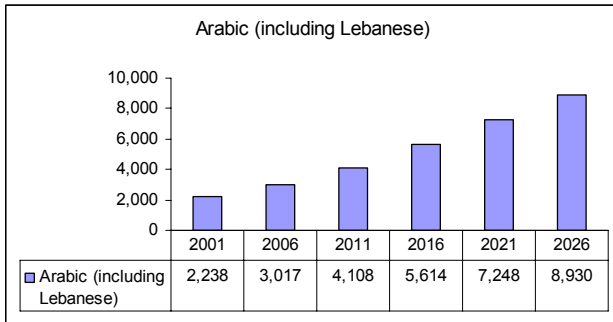
Figure 1: HACC clients

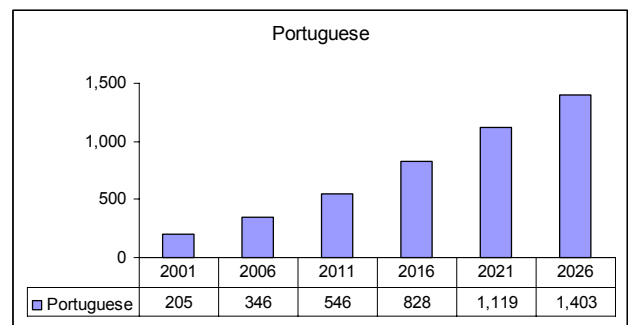
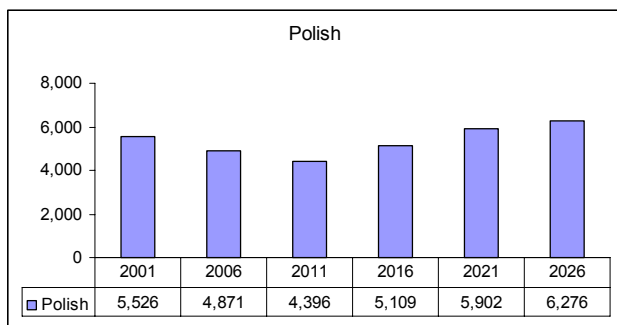
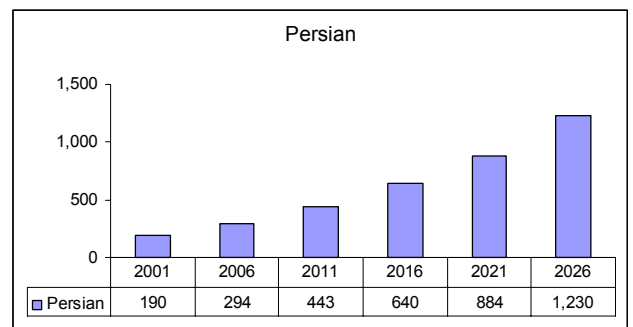
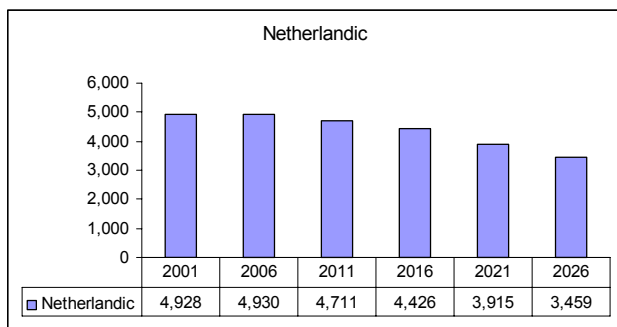
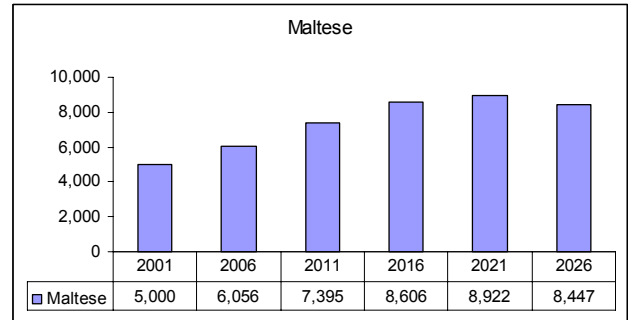
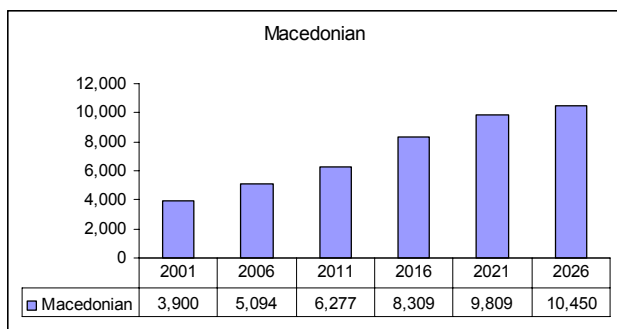
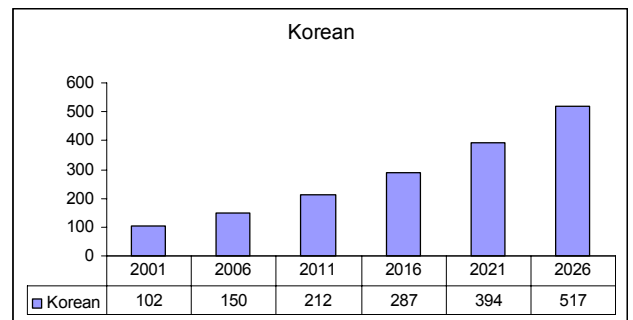
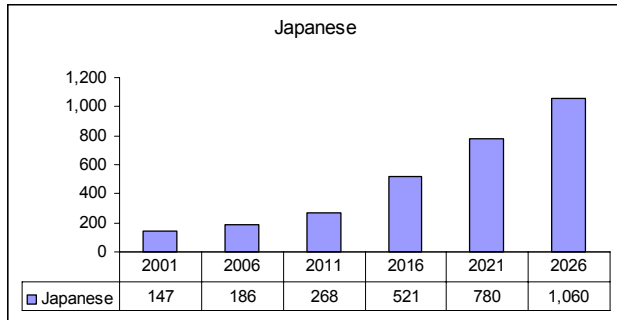
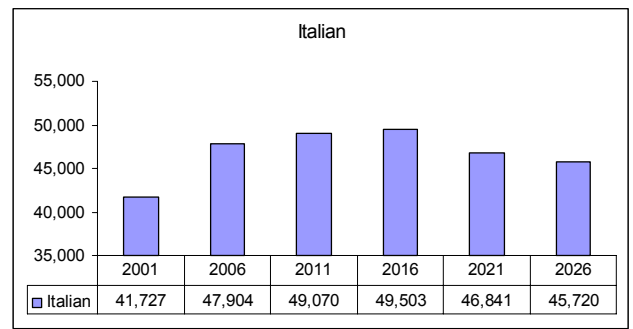
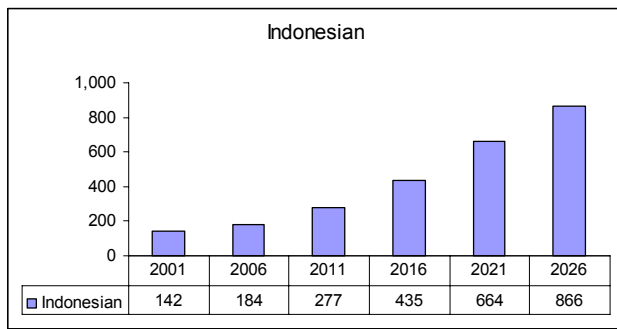


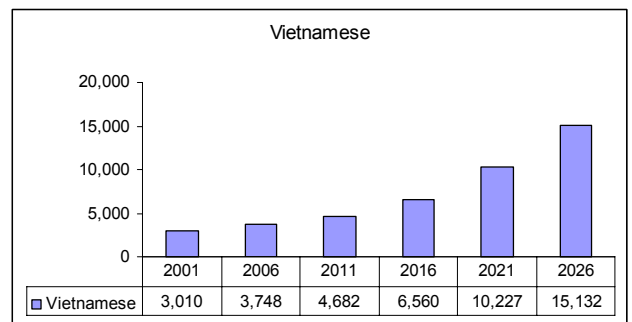
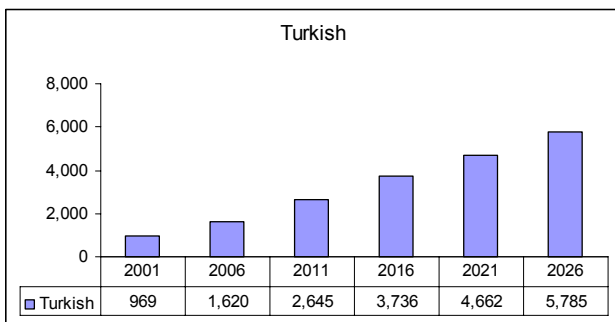
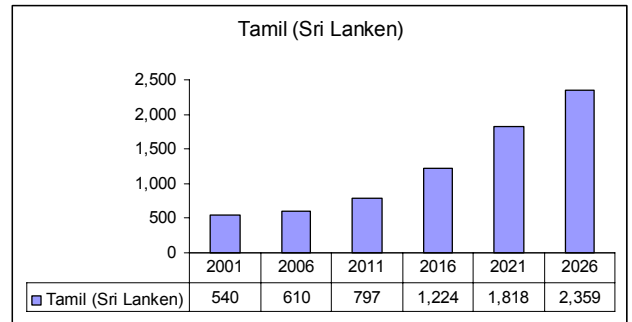
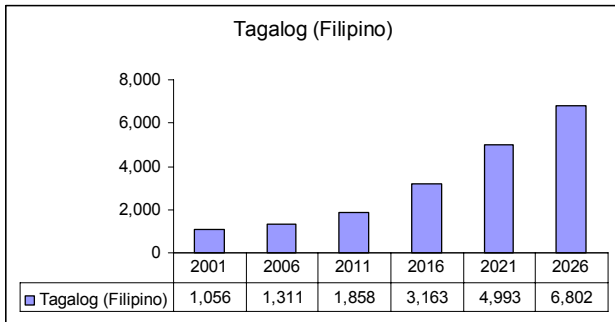
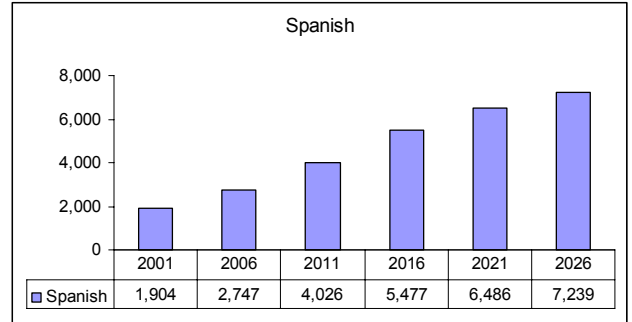
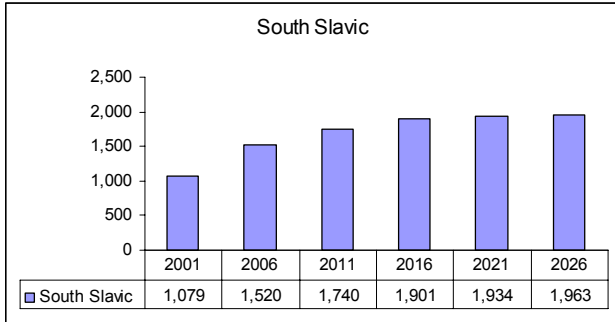
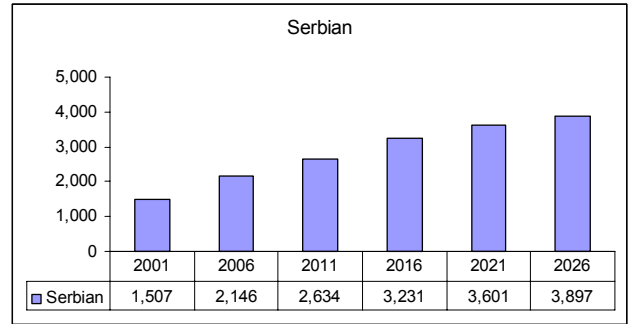
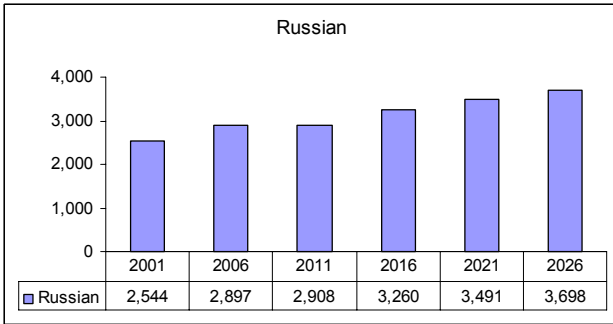
Source: MDS (2002 data) and 2001 Census

Attachment to Appendix C – Supporting evidence for HACC priority 2

**Appendix 1 - Projections of the number of persons aged 65 and above who speak a language other than English at home**

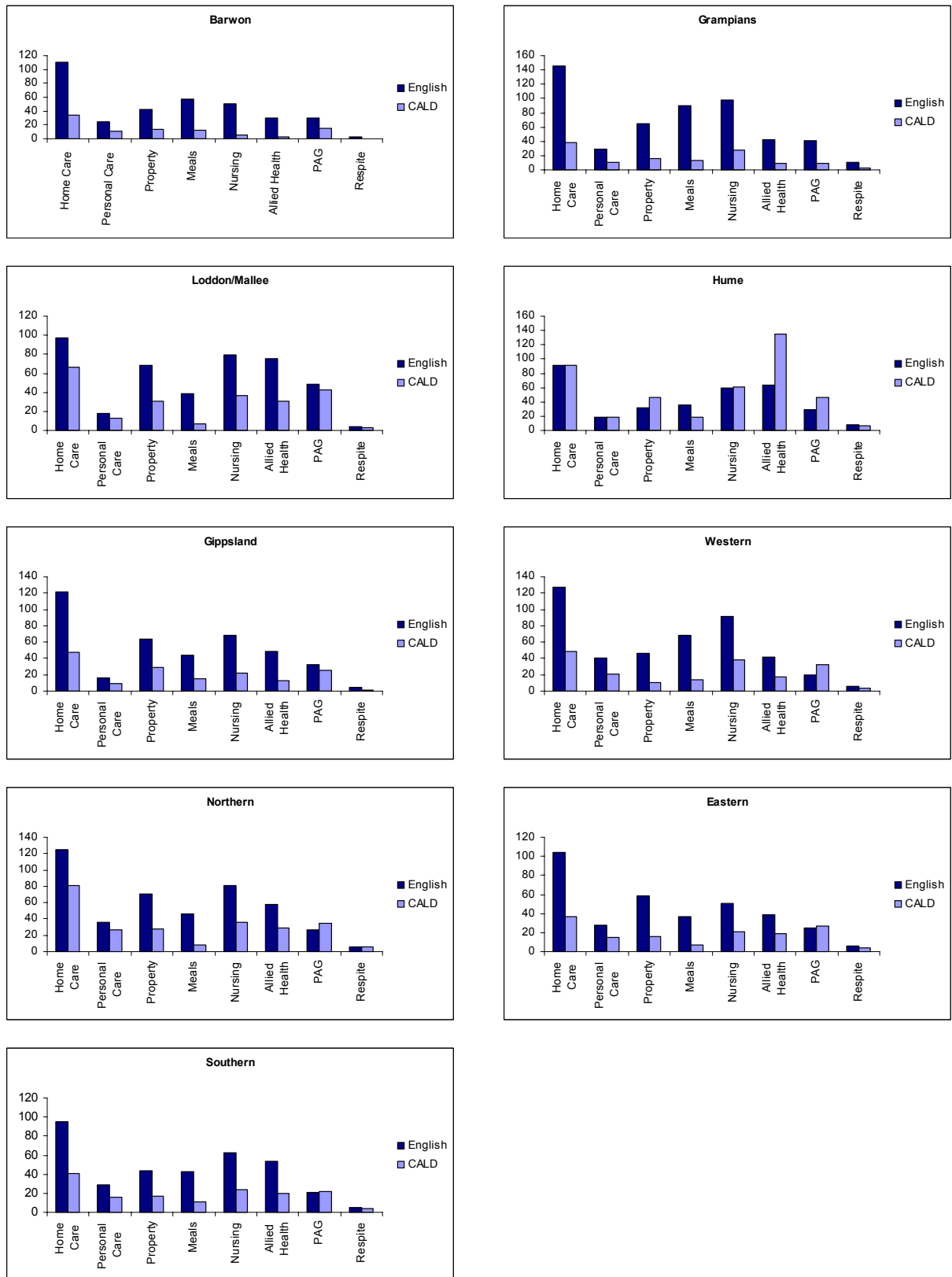






**Appendix 2: HACC clients - English versus non-English speakers**

This graph shows the number of HACC clients per 1000 in population, for both English speaking and non-English speaking populations. (Source: MDS 2002)







**List of HACC providers in Region**

Bairnsdale Regional Health Service  
Bass Coast Shire Council  
Bass Valley Community Group Inc.  
Baw Baw Shire Council  
Cann Valley Bush Nursing Centre Inc.  
Central Gippsland Health Service  
Dargo Bush Nursing Centre Inc.  
East Gippsland Shire Council  
Gelantipy District Bush Nursing Centre Inc  
Gippsland & East Gippsland Aboriginal Co-op Ltd.  
Gippsland Migrant Resource Centre Inc.  
Gippsland Southern Health Service  
Headway Gippsland Inc.  
Interchange Central Gippsland Inc.  
Kilmany Family Care  
Korumburra Italian Social Club Inc  
Lake Tyers Aboriginal Trust  
Lakes Entrance Community Health Centre Inc.  
Latrobe City Council  
Latrobe Community Health Service Inc.  
Mallacoota District Health and Support Service Inc.  
Moe District Meals on Wheels Inc.  
Omeo District Hospital  
Orana Senior Citizens Centre Inc.  
Orbost Regional Health  
Quantum Support Services Inc.  
Ramahyuck District Aboriginal Co-operative  
San Remo & District Community Health Centre Inc.  
South Gippsland Hospital  
South Gippsland Shire Council  
Swifts Creek Bush Nursing Centre Inc.  
The Buchan Bush Nursing Association Inc.  
Vision Australia Foundation  
Wellington Shire Council  
West Gippsland Health Care Group  
Wonthaggi and District Hospital  
Yallambee Traralgon Village for the Aged Inc.  
Yarram and District Health Service

## Appendix E - RREF & WREN explained

### 1. Relative Resource Equity Formula (RREF)

The RREF is used to distribute HACC growth funding between Regions. It calculates a base population at a local government area level which includes persons aged 0-69 years with a profound, severe or moderate disability, and persons aged 70+, who are not living in institutional care. The base population is then weighted to allow for probable variations in prevalence and intensity of need, using 5 variables:

- Socio-economic status
- Health status
- Rurality
- Indigenous status
- CALD.

#### 1.1. State and regional totals

The best estimate of the total Victorian HACC target population is the total base population. The RREF calculates regional shares of the total weighted population, expressed as percentages; these are the regional growth shares. These percentages are applied to the total Victorian base population to give regional target populations. These are the best estimates of the HACC target population at a regional level: regional totals sum to the total Victorian HACC target population.

#### 1.2. Limitations

The RREF populations are less reliable when projected into the future, and when applied to smaller areas within the state such as local government areas, since need is known to vary with several social characteristics but may also be unevenly distributed in less predictable ways.

### 2. Within Region Estimate of Need (WREN)

Two of the RREF weighting variables: socio-economic status and health status, can be used to identify the most likely spread of need within a region. The other three RREF factors are less reliable predictors of local need for HACC services, since they involve service system factors and more uncertain relativities between areas. Therefore socio-economic and health status have been used as the basis for the WREN formula. The WREN has been used to provide an indication of equitable allocation of the region's share of growth funding to each local government area.

#### 2.1. LGA populations

Within each region, the WREN calculates local government area shares of the regional population by multiplying base local government area populations by 2-variable weights and expressing these as percentages of their regional sum. Those percentages are then applied to the regional HACC target populations to give WREN target populations at a local government area level.

In summary, the WREN sits on top of the RREF, which in turn sits on top of the total Victorian target population. WREN populations sum to RREF regional totals, which sum to the state total.

**3. A note on projections**

Forward projections of populations and need estimates are an additional source of uncertainty. Projections from the 2001 census were not released in time for the present planning process. Updated projections will be incorporated in planning data when they become available.

## Appendix F – Service expansion proposed for Priority 1 activities in local government areas of Region

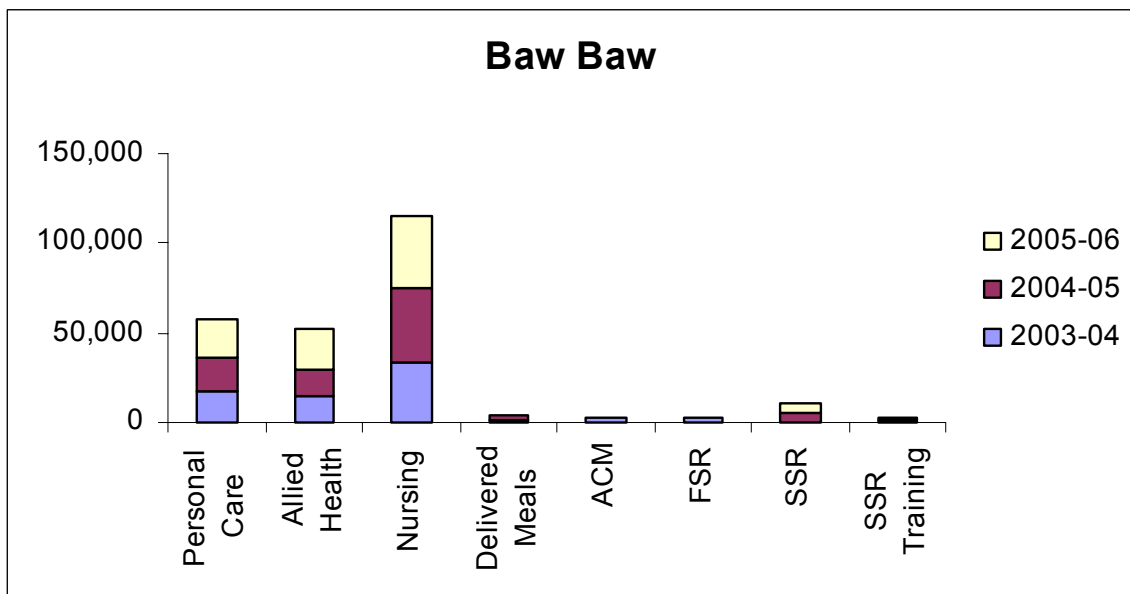
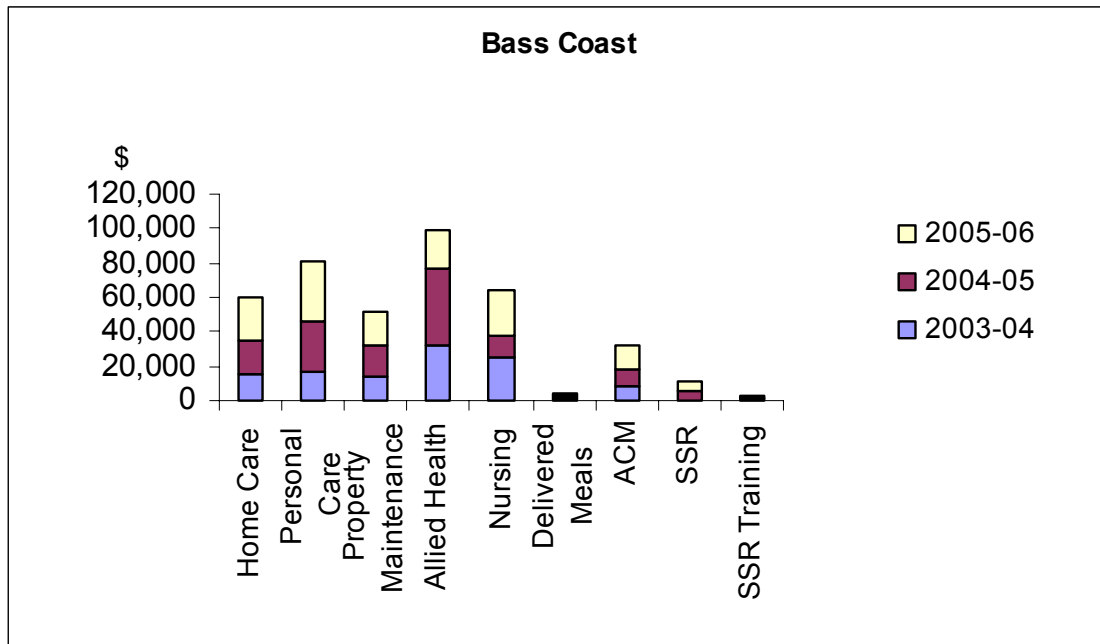
The table below shows the proposed service expansion for Priority 1 activities (excluding HACC Response Service) in each local government area, by units and funding, for 2003-06.

ACTIVITIES	Bass Coast		Baw Baw		East Gippsland		LaTrobe		South Gippsland		Wellington		Total Region	
	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$	Units	\$
<b>2003-04</b>														
Home Care	600	14,664	-	-	100	2,444	300	7,332	-	-	1600	39,104	2600	63,544
Personal Care	600	16,764	600	16,764	100	2,794	1500	41,910	350	9,779	-	-	3150	88,011
Property Maintenance	400	14,220	-	-	500	17,775	200	7,110	100	3,555	-	-	1200	42,660
Allied Health	450	32,297	200	14,354	625	44,856	-	-	100	7,177	150	10,766	1525	109,449
Nursing	400	25,144	535	33,630	285	17,738	1000	62,860	-	-	630	39,539	2850	178,912
Delivered Meals	700	861	1000	1,230	200	246	10000	12,300	3000	3,690	965	1,187	15865	19,514
ACM	-	8,502	-	3,175	-	15,341	-	13,800	-	9,255	-	2,446	-	52,519
Flexible Service Response	-	-	-	2,086	-	4,907	-	-	-	-	-	-	-	6,993
Service System Resourcing	-	-	-	-	-	8,586	-	-	-	-	-	-	-	8,586
SSR Training	-	1,959	-	1,923	-	2,805	-	3,922	-	1,562	-	2,294	-	14,465
<b>Total</b>	<b>3150</b>	<b>114,411</b>	<b>2335</b>	<b>73,162</b>	<b>1810</b>	<b>117,492</b>	<b>13000</b>	<b>149,234</b>	<b>3550</b>	<b>35,018</b>	<b>3345</b>	<b>95,337</b>	<b>27190</b>	<b>584,652</b>
<b>2004-05</b>														
Home Care	800	20,038	-	-	-	-	400	10,019	-	-	1070	26,800	2270	56,856
Personal Care	1000	28,640	700	20,048	-	-	1500	42,960	400	11,456	-	-	3600	103,104
Property Maintenance	500	18,218	-	-	300	10,931	400	14,574	200	7,287	-	-	1400	51,010
Allied Health	600	44,139	200	14,713	600	44,139	-	-	-	-	200	14,713	1600	117,704
Nursing	200	12,887	650	41,883	350	22,232	1000	64,435	-	-	800	51,548	3000	192,985
Delivered Meals	1500	1,891	1739	2,192	2000	2,522	10000	12,608	3000	3,782	171	216	18410	23,210
ACM	-	9,708	-	-	-	9,067	-	15,306	-	9,289	-	-	-	43,370
Flexible Service Response	-	-	-	-	-	3,500	-	-	-	-	-	-	-	3,500
Service System Resourcing	-	5,543	-	5,421	-	7,942	-	10,996	-	4,376	-	6,414	-	40,692
SSR Training	-	643	-	629	-	921	-	1,275	-	508	-	744	-	4,720
<b>Total</b>	<b>4600</b>	<b>141,707</b>	<b>3289</b>	<b>84,886</b>	<b>3250</b>	<b>101,253</b>	<b>13300</b>	<b>172,172</b>	<b>3600</b>	<b>36,698</b>	<b>2241</b>	<b>100,435</b>	<b>30280</b>	<b>637,152</b>
<b>2005-06</b>														
Home Care	1000	25,673	-	-	-	-	300	7,702	-	-	1150	29,524	2450	62,899
Personal Care	1200	35,227	700	20,549	-	-	1500	44,034	400	11,742	-	-	3800	111,553
Property Maintenance	500	18,673	-	-	300	11,204	-	-	200	7,469	-	-	1000	37,347
Allied Health	300	22,621	300	22,621	600	45,242	300	22,621	-	-	200	15,081	1700	128,187
Nursing	400	26,418	600	39,627	350	22,788	1000	66,046	-	-	800	52,837	3150	207,716
Delivered Meals	1500	1,938	635	821	2000	2,585	10000	12,923	3000	3,877	300	388	17435	22,531
ACM	-	13,479	-	-	-	13,003	-	15,342	-	10,500	-	-	-	52,325
Flexible Service Response	-	-	-	-	-	3,500	-	-	-	-	-	-	-	3,500
Service System Resourcing	-	5,776	-	5,625	-	8,268	-	11,347	-	4,519	-	6,581	-	42,117
SSR Training	-	712	-	693	-	1,019	-	1,399	-	557	-	811	-	5,192
<b>Total</b>	<b>4900</b>	<b>150,519</b>	<b>2235</b>	<b>89,937</b>	<b>3250</b>	<b>107,609</b>	<b>13100</b>	<b>181,413</b>	<b>3600</b>	<b>38,665</b>	<b>2450</b>	<b>105,222</b>	<b>29535</b>	<b>673,366</b>

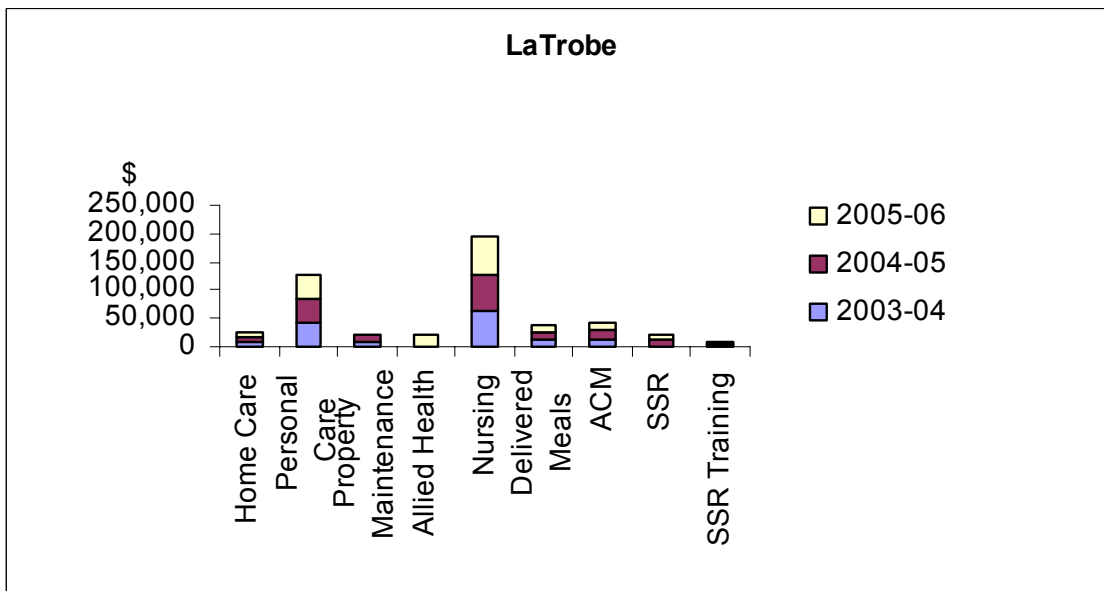
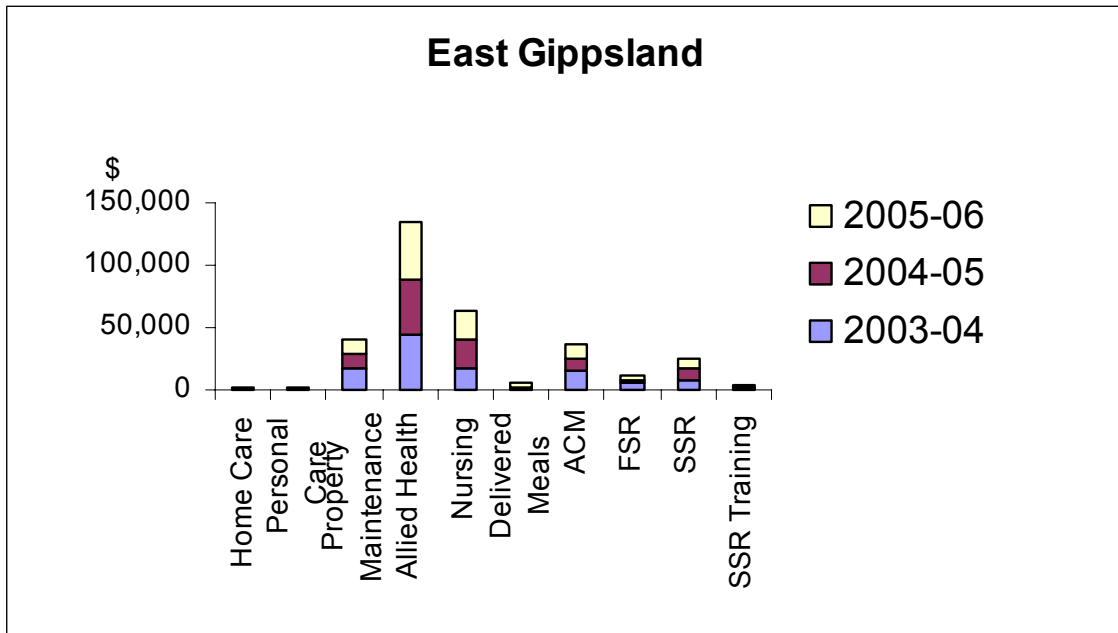
## Notes:

1. Services provided region-wide have been 'WREN'd' across all local government areas in Region.
2. Minor discrepancies between figures in Appendix F and those in the main body of the Draft Regional Plan are due to rounding.

Each graph below shows the proposed service expansion funding for Priority 1 activities for a given local government area in the Region, for 2003-04, 2004-05 and 2005-06.



Each graph below shows the proposed service expansion funding for Priority 1 activities for a given local government area in the Region, for 2003-04, 2004-05 and 2005-06.



**Appendix F - Gippsland**

Each graph below shows the proposed service expansion funding for Priority 1 activities for a given local government area in the Region, for 2003-04, 2004-05 and 2005-06.

