

2008 SUPPORTED RESIDENTIAL SERVICES CENSUS

SUMMARY REPORT: FACILITIES

FEBRUARY 2009

PREPARED FOR

DEPARTMENT OF HUMAN SERVICES
SRS & ACCOMMODATION SUPPORT UNIT
LEVEL 12, 50 LONSDALE STREET
MELBOURNE VIC 3000

CONTACT: SHANE McDONALD
PHONE: (03) 9096 7227
EMAIL: SHANE.MCDONALD@DHS.VIC.GOV.AU

PREPARED BY

DR NINA VAN DYKE
SENIOR RESEARCHER
THE SOCIAL RESEARCH CENTRE
PHONE (03) 9236 8528
EMAIL: NINA.VANDYKE@SRCENTRE.COM.AU

Introduction

The 2008 SRS Census was undertaken during June to August with 181 facilities that include 6,125 registered beds. A return rate of 88 per cent (159 facilities) was achieved.

Previous censuses were conducted in 1993, 1998, and 2003.

The broad purposes of the census are to: (1) understand the SRS industry; (2) understand the characteristics and service needs of residents and proprietors.

Methodology

The 2008 census was developed by the Department of Human Services in consultation with the Social Research Centre.

Some census items are identical or similar to those included in previous censuses; the 2008 census has an increased emphasis on resident-level data.

The census consists of two parts: facility-level data and resident-level data.

Facility-level booklet:

- Facility details
- Residents' backgrounds
- Staff details
- Staff qualifications and hiring
- Future facility plans
- Fees
- Outside services
- Perceptions of self-assessment form

Resident-level booklet:

- Demographics
- Disabilities
- Support needs
- Services received
- Participation in activities
- Contact with family/friends

A sample of residents from each SRS was chosen for data collection. Please refer to full report for sampling details.

Resulting data were weighted by chance of selection and type of facility in order to represent all SRS residents and facilities. Please refer to full report for weighting details. All data presented are weighted unless otherwise specified.

Type of facility (2008 definition¹):

Pension-level: at least 80% of residents pay pension-level rates

Above pension-level: less than 80% of residents pay pension-level rates

Significance testing is at $p < .05$, confidence interval of 95%. Pension-level results are tested against above pension-level; each region against Total. Data from 2008 are compared with those from 2003 where comparable and available (see Full Report).

Main Conclusions

- There are large differences between the characteristics of residents in pension-level and above pension-level facilities:
 - Residents of pension-level facilities are much more likely to be male, younger, and with psychiatric, intellectual, acquired brain injury, or drug/alcohol disabilities
 - Residents of above-pension level facilities are much more likely to be female, older, and with age-related frailty, dementia, or physical disabilities
- Compared with 2003:
 - Residents in 2008 are more likely to be male, younger, and to have a psychiatric disability, but less likely to have age-related frailty
 - The percentage of residents with disabilities has increased in pension-level facilities but decreased in above pension-level facilities
- Various regional differences exist, but most are due to the type of facility mix within each region.

Main Findings: Facilities

Facility Details

Type of building

- 73% purpose-built; 20% converted home; 6% Other
- Pension-level: 51% purpose-built; 41% converted home; 7% Other
- Above pension-level: 87% purpose-built; 7% converted home; 6% Other
- 2003 vs. 2008: pension-level: increase from 48% to 58% purpose-built; decrease in Other from 17% to 6%
- 2003 vs. 2008: above pension-level: no significant change

¹ The 2003 census included a different definition of type of facility: pension-level: at least 50% of beds were for pension-level residents; above pension-level: less than 50% of beds were so designated. Where 2003 and 2008 data are compared, this earlier definition of facility type is used.

- Grampians SRSs more likely than average to be converted homes; Eastern Metropolitan SRSs more likely than average to be purpose-built

Year facility built

- Average (mean) year built: 1979
- 32% of proprietors did not know what year built
- Pension-level average year built: 1965; most built (mode): 1977-1987
- Above pension-level: average year built: 1988; most built (mode): 1988-1998
- Several regional differences, including that the Eastern Metropolitan region contains a relatively higher percentage of recently-built facilities

Building owned or leased

- 70% leased
- No significant difference between pension- and above pension-level
- Southern Metropolitan region: a greater than average percentage of facilities are leased

Monthly rental costs

- Mean: \$11,416
- Mode: \$10,360-20,319
- Range: \$1,480-\$50,000
- 27% do not know or refused to answer
- Pension-level mean: \$7,915
- Above pension-level mean: \$13,756

Structural condition of building

- Excellent/very good: 41%; good: 43%, fair: 12%, poor: 4%
- Pension-level facilities on average rated lower than above pension-level
- Loddon-Mallee: higher than average percentage of "excellent/very good"; Southern Metropolitan: lower percentage of "excellent/very good"

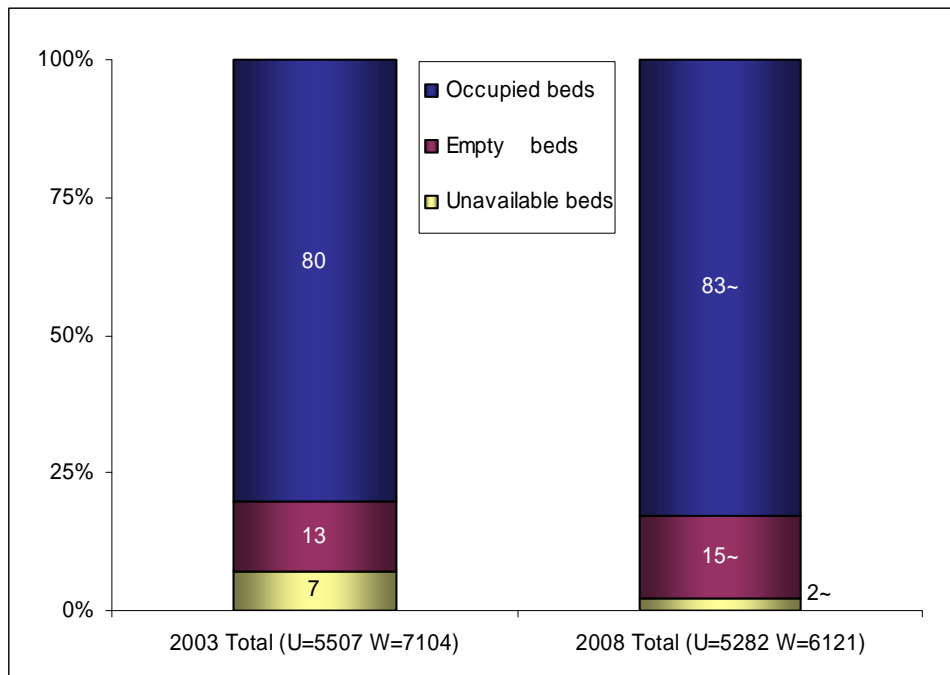
Interior condition of building

- Excellent/very good: 39%; good: 44%, fair: 14%, poor: 3%
- Pension-level facilities on average rated lower than above pension-level
- Southern Metropolitan: lower than average percentage of "excellent/very good"

Beds

- 83% occupied; 15% empty; 2% unavailable
- 2003 vs. 2008: percentages of both occupied and empty beds have increased by 3% and 2%, respectively; percentage of unavailable beds has decreased by 5%

Figure 1: Beds (2003 vs 2008)

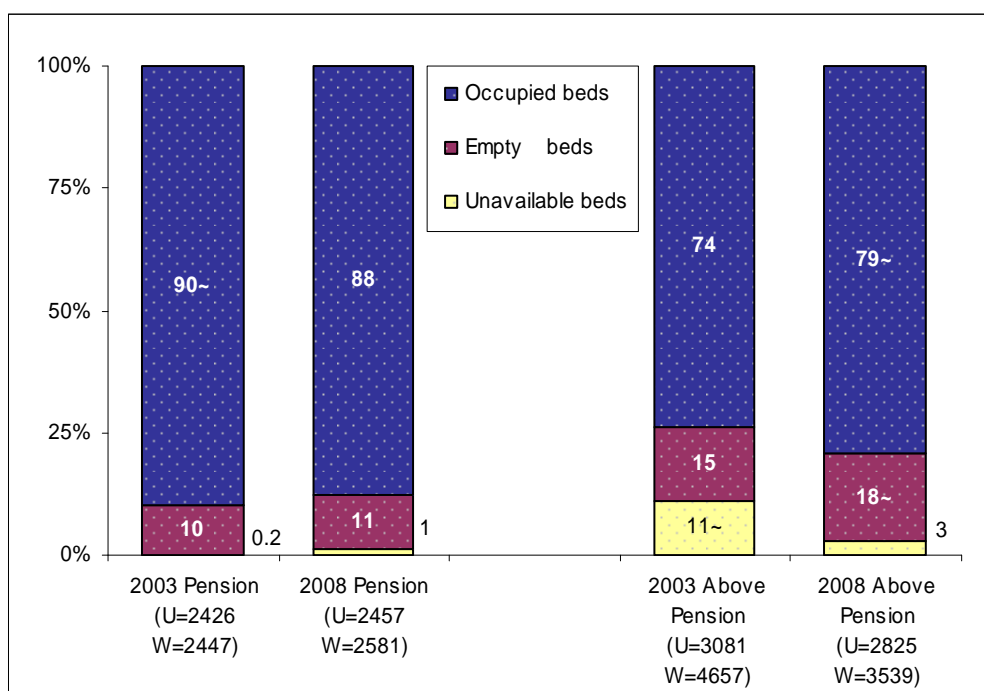


~ Statistically significant difference, at $p < .05$
U=unweighted sample base; W=weighted sample base²

² Facility data weighted based on actual pension-level versus above-pension level facility mix

- A greater percentage of beds in pension-level facilities are occupied (89% vs. 80%); a lower percentage is empty (10% vs. 18%)
- 2003 vs. 2008: pension-level facilities: percentage of occupied beds dropped from 90% to 88%
- 2003 vs. 2008: above pension-level facilities: percentages of occupied and empty beds have increased (by 5% and 3%, respectively); percentage of unavailable beds has decreased (by 8%)

Figure 2: Beds by Pension & Above Pension (2003 vs 2008)



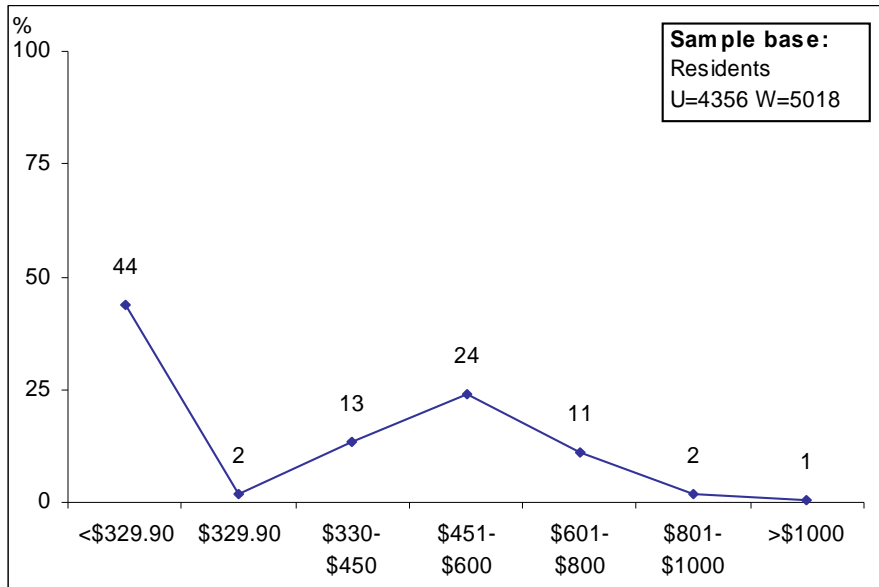
~ Statistically significant difference compared with other year, at p<.05
 U=unweighted sample base; W=weighted sample base

- Grampians has a higher than average percentage of occupied beds and lower percentages of both empty and unavailable beds; North-western Metropolitan has a lower than average percentage of occupied beds and a higher percentage of empty beds
- 25% of SRSs house pension-level residents only; 40% house above pension-level residents only
- Grampians has a relatively higher percentage of facilities in which all residents are pension-level; Eastern Metropolitan has a relatively higher percentage in which no residents are pension-level

Fees (weekly)

- 46% of residents charged \$329.90 (pension rate) or less
- 24% charged \$451-600

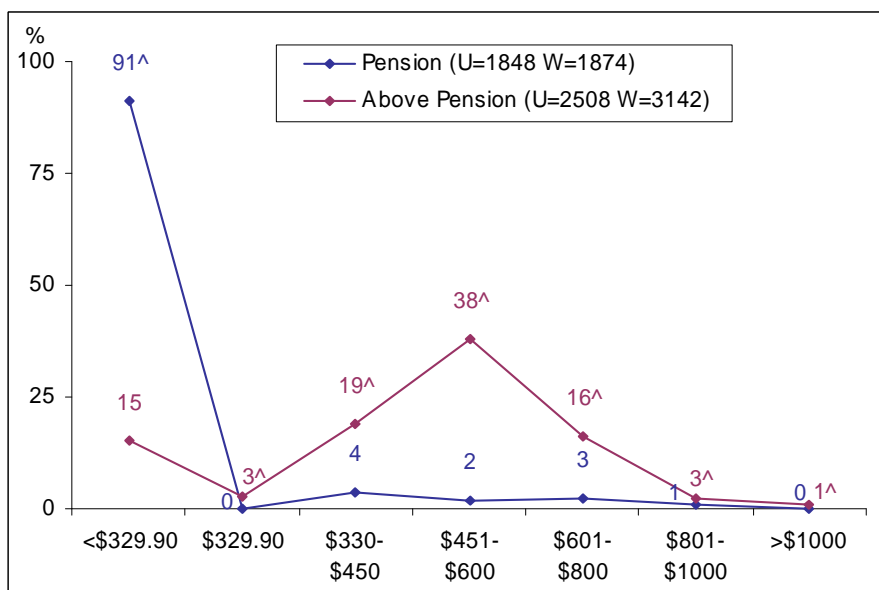
Figure 3: Fees charged per week (2008)



U=unweighted sample base; W=weighted sample base

- 91% of residents in pension-level facilities charged \$329.90 or less
- 18% of residents in above pension-level facilities charged \$329.90 or less
- Most common fee level for residents in above-pension facilities: \$451-600

Figure 4: Fees charged per week, by Pension & Above Pension (2008)



U=unweighted sample base; W=weighted sample base

- Eastern Metropolitan: tend to charge higher than average fees; Grampians: tend to charge lower than average fees

Nature of SRS

Whether usually have current number of empty beds

- 63% yes
- No significant difference between pension-level and above pension-level facilities
- No significant differences by region (compared with total)

Reasons usually HAVE current number of empty beds

- Residents move in and out frequently: 23%
- Low demand for beds (thus lots of empty beds): 20%
- High demand for beds (thus no/few empty beds): 15%
- 30% Other reason
- Used to have a waiting list/more referrals more common for pension-level facilities
- Residents moving in and out frequently more common reason in Barwon Southwest region; used to have a waiting list/more referrals more common reason in Loddon-Mallee region

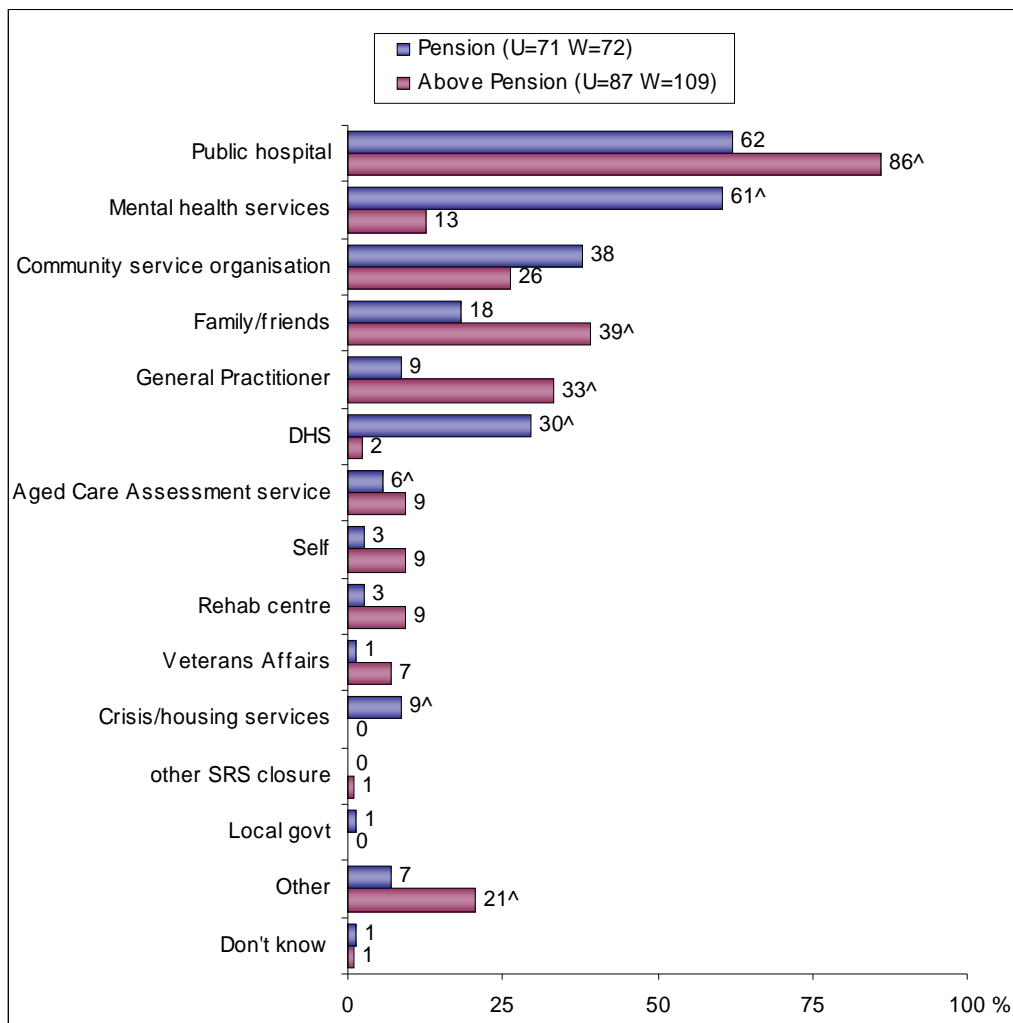
Reasons usually DO NOT HAVE current number of empty beds

- Residents move in and out frequently: 28%
- High demand: 23%
- 36% Other reason
- No significant differences between pension-level and above pension-level facilities

Main source of referrals

- Public hospitals: 77%; mental health care services: 32%; community service organisations: 31%; family or friends: 31%; 15% Other
- Pension-level facilities: more likely to cite mental health care services, DHS, crisis/housing services
- Above pension-level facilities: more likely to cite public hospitals, family or friends, GPs, aged care assessment services, Other source

Figure 5: Main sources of referrals, by Pension & Above Pension (2008)



[^] Statistically significant difference compared with other year, at p<.05
 U=unweighted sample base; W=weighted sample base

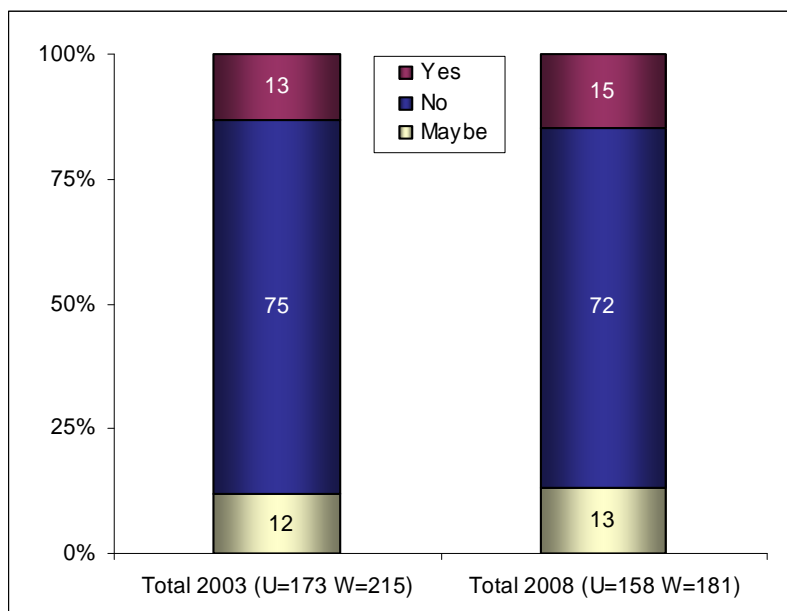
Main competitors

- Other SRSs: 46%; Commonwealth-funded aged care facilities: 43%
- Pension-level facilities: more likely to cite other SRSs
- Above pension-level facilities: more likely to cite State government-funded services or no main competitors
- Grampians: more likely to cite Commonwealth-funded aged care; Loddon-Mallee: more likely to cite other SRSs

Future plans for SRS

- 15% plan to close/change nature of their SRS within three years; 13% may
- 2003 vs. 2008: no change

Figure 6: Changes to SRS in next 3 years (2003 vs 2008)



U=unweighted sample base; W=weighted sample base

- Pension-level facilities: 16% may/plan to change
- Above pension-level facilities: 36% may/plan to change
- 2003 vs. 2008: no change for either level of facility
- Gippsland and Hume: more likely than average to say they plan to close/change

Details of future plans (of those considering change)

- 19% plan to sell business/change proprietorship within three years; an additional 19% plan to do so sometime
- The next most popular change is convert to a Commonwealth Aged Care facility, followed by close SRS/Retire, covert above pension-level beds to pension-level beds, covert beds to respite beds
- Pension-level facilities: more likely to sell business/change proprietorship before June 2009
- Above pension-level facilities: more likely to convert SRS to a Commonwealth Aged Care facility

Staff Details

Numbers of staff

- Average (mean): 13
- Range: 3-43
- Most common (mode): 10-19
- Pension-level facilities: mean of 8
- Above pension-level facilities: mean of 15
- Mean resident to staff ratio: 2.6
- Mean resident to estimated EFT staff ratio: 4.1³
- Grampians have a larger percentage of SRSs with smaller staff sizes

Permanent versus casual staff

- 75% permanent
- No significant difference between pension-level and above pension-level facilities
- Loddon-Mallee: greater percentage of casual

Full-time versus part-time staff

- 68% work part-time
- Pension-level: 56% part-time
- Above pension-level: 85% part-time
- Southern Metropolitan region: a greater than average percent works full-time

Permanent vs casual by full-time vs part-time staff

- 65% permanent, part-time; 19% casual, part-time; 12% permanent, full-time; 3% casual, full-time

³ Part-time staff counted as 0.5 FTE

- Pension-level versus above-pension: more likely to be permanent, full-time and casual, full-time; less likely to be permanent, part-time; equally likely to be casual, part-time

Paid versus unpaid staff

- 94% paid
- Pension-level facilities: 92% paid
- Above pension-level facilities: 94% paid
- No significant differences by region

Total staff wages (weekly)

- Average (mean): \$4,687
- Range: \$420-\$20,000
- Pension-level facilities: mean: \$2,648
- Above pension-level facilities: mean: \$6,181
- No clear patterns of differences among regions

Role of proprietor

- 78% serve as managers; 50% as personal care coordinators
- Pension-level facilities: greater percentage serve as managers
- Above pension-level facilities: greater percentage have no day-to-day role
- No statistically significant differences across regions

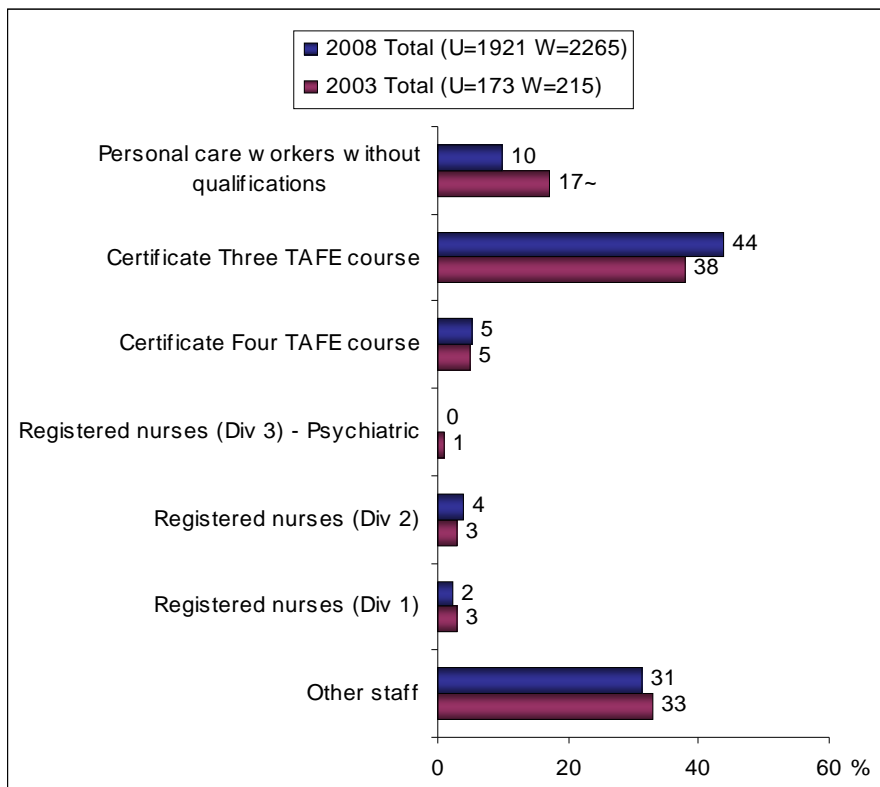
Whether proprietor located on-site

- 42% on-site
- No significant difference between pension-level and above pension-level facilities
- Loddon-Mallee: a greater percentage than average located on-site

Staff qualifications

- 44% Certificate Three TAFE; 31% Other staff; 10% personal care workers without qualifications
- 2003 vs. 2008: a reduction in percentage of personal care workers without qualifications

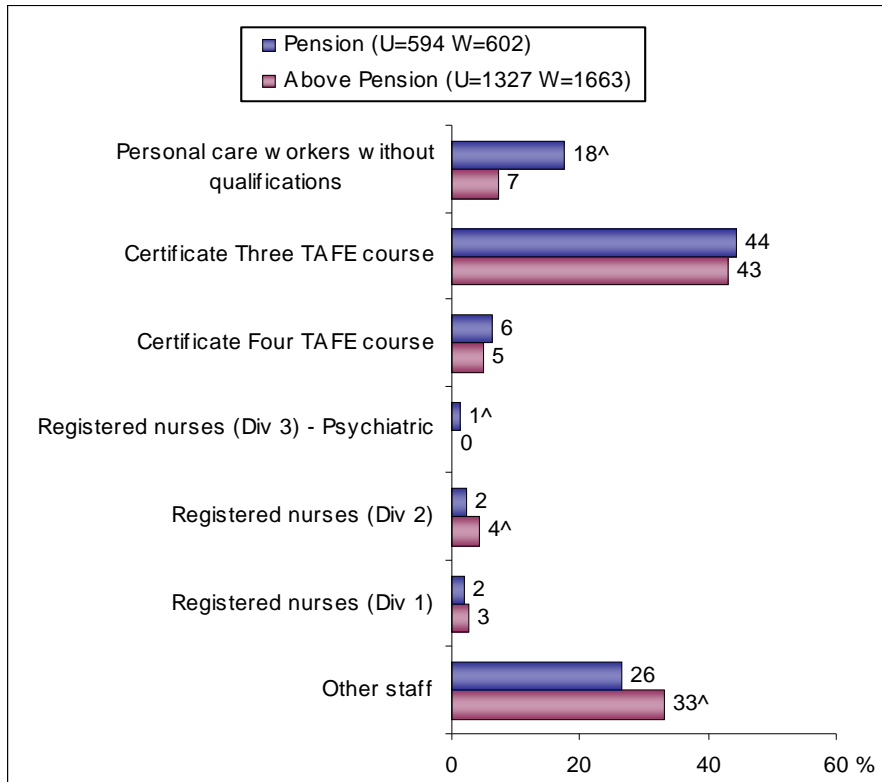
Figure 7: Staff Qualifications (2003 vs 2008)



~ Statistically significant difference compared with other year, at $p < .05$
U=unweighted sample base; W=weighted sample base

- Pension-level facilities: greater percentage of staff are personal care workers without qualifications and psychiatric nurses
- Above pension-level facilities: greater percentage of staff are Other staff and registered nurses (Div 2)

Figure 8: Staff Qualifications by Pension & Above Pension (2008)



[^] Statistically significant difference compared with other year, at p<.05
 U=unweighted sample base; W=weighted sample base

- 2003 vs. 2008: percentage of personal care workers without qualifications in above pension-level facilities has decreased (no significant difference in pension-level facilities)

Difficulty attracting qualified staff

- 32% yes
- Pension-level facilities: 42%
- Above pension-level facilities: 25%
- Southern Metropolitan region: greater difficulty than average; Loddon-Mallee: less difficulty than average

Outside Services

Visits by services to SRS

- 95% visited by GP; 87% by social/recreational service; 63% by podiatry service; 61% by Community Health Nurse; 55% by mental health service; 8% by dental service
- North-western metropolitan region: less likely than average to receive visits by Community Health Care nurses

Frequency of visits by services to SRS

- Same order as for occurrence of visits, with GP visits most frequent, followed by social/recreational, podiatry, Community Health Nurse, mental health, dental, and ABI
- Pension-level facilities: receive more frequent visits from mental health and ABI services
- Above-pension level facilities: receive more frequent visits from podiatry services
- Eastern Metropolitan region: less frequent visits from mental health services; Grampians and Loddon-Mallee regions: fewer visits by GPs and podiatrists

Whether services assist with planning/other resident-related issues

- 33% of SRSs say all assist; 53% say some; 14% say none
- Above-pension facilities: more likely to say all services assist
- Pension-level facilities: more likely to say none does
- Grampians region: more likely to say none assists

Additional assistance desired

- 32% of SRSs desire no additional assistance; 18% need additional assistance with residents' care or health needs; 10% want additional funding
- Pension-level facilities: more likely to desire additional assistance (40% vs. 18%)
- North-western Metropolitan: greater percentage than average desires additional assistance (85% vs. 68%); Gippsland: greater percentage would like additional training and education (42% vs. 9%); North-western Metropolitan: greater percentage requires assistance with transport (17% versus 7%)