



Advanced Care Planning – Aged Care Services

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Ageing is everyone's business





Who am I?

Aged Care Planning

Barriers

Opportunities

 Role of Residential Aged Care
Services

Possibilities



- *"Everybody will die—death matters to everyone."*
- **By 2050, it is projected in Hong Kong:**
- Hong Kong is experiencing rapid population aging. In 2016, 30% of the total population was aged 55 or above, and this figure is expected to reach over 40% by 2050.
- **By 2066, it is projected in Australia:**
- There will be just over 4.5 million people aged 65–74.
- People aged 75–84 will account for one-third (34%, 3.5 million) of the older population.
- 1 in 5 older people will be aged 85 and over (21%, 2.2 million) (ABS 2018).



Hong Kong – GOOD NEWS STORY



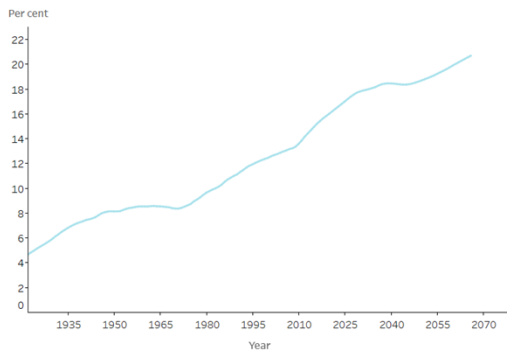
In July 2016, Hong Kong overtook the Japanese to become the longest living population on earth. Hong Kongers can now look forward to an average lifespan of 87.32 years for women and 81.24 for men. The territory's infant mortality rate fell to 1.3 deaths per 1,000 in 2015.¹ Even the smoking rate has fallen to 22%, down from a recorded high of more than 45% a few decades ago.²

[future-of-elderly-care-in-hong-kong.pdf \(pwccn.com\)](#)



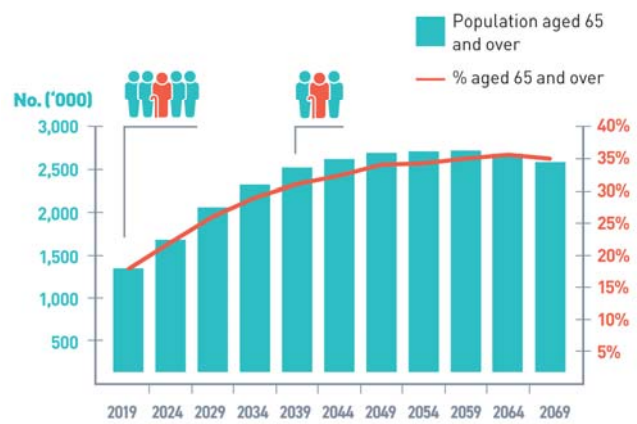
Comparison

Figure 1.1: Percentage of the Australian population aged 65 and over, at 30 June, over time



Notes
 1. Data for 1921 to 1970 are population estimates. Data from 1971 onwards are estimates of the resident population (ERP).
 2. Population data from 1992 to 2011 are recast estimates following the rebasing of the 2011 Census. For more information, see the ABS explanatory notes.
 Source: ABS 2018, 2019.
<http://www.abs.gov.au/>

Population aged 65 and over



<https://www.primaryhealthcare.gov.hk/bp/en/supplementary-documents/challenges/> (Ref)

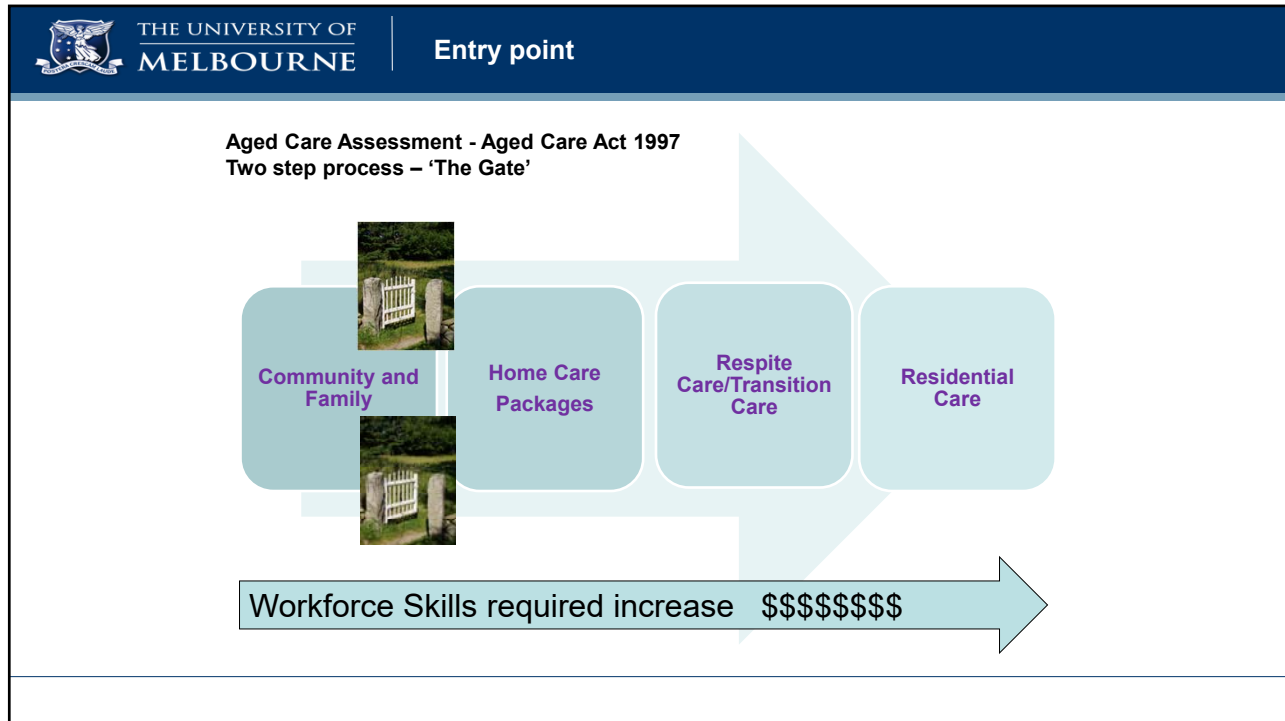


Australia's Aged Care System



Choices





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A profile of people living in residential aged care in Australia

While more older Australians are accessing care services from home*, our ageing population means there is a growing need for residential aged care support. Understanding the characteristics of those who use residential aged care today can help in tailoring the services currently provided and better prepare for the needs of the future.

The results from the 2015 Survey of Disability, Ageing and Carers provide a profile of those in residential aged care. For this analysis, residential aged care includes people in nursing homes, aged care hostels and care components of retirement villages where the resident had been, or was expected to be, living there or in another health establishment for a period of three months or more.

187,300 187,300 Australians living in residential aged care in 2015

161,700 2009 | **187,300** 2015
Consistent with our ageing population, the number of people living in residential aged care has increased.

85+ Most people living in residential aged care were aged 85 years or more

88% More than two-thirds of people living in residential aged care were women

73% Almost 9 out of 10 people living in residential aged care had a physical disability

73% Almost 3.4 of people living in residential aged care had a psychosocial disability*

29% **18%** Men living in residential aged care were more likely to have had a stroke, head injury or acquired brain injury than women

50% Half of people living in residential aged care had dementia†

53% **24%** People with dementia living in residential aged care were more than twice as likely to have 9 or more impairments* from those without dementia.

Total admissions into permanent residential care by age group and sex, 2021-22

Age group

Admission type: Total, First

Care type: Permanent residential care

Sex: Female, Male

Per cent

Note: Excludes unknown sex and age. Due to differences in methods, counts may differ slightly to those published in the Aged Care Data Snapshot: GEN-agedcaredata.gov.au

https://viz.aihw.gov.au/t/Public/views/Admissions2022/Admissions5_4



In Hong Kong, older people (aged 65 and above) accounts for 16% of the total population of 7.4 million.

The median age of residents in care homes is 83.

Approximately 15% of older people aged 80 and above live in care homes



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Planning Australia**
BE OPEN | BE READY | BE HEARD

- Advance care planning involves planning for your future health care. It enables you to make some decisions now about the health care **you would or would not like to receive** if you were to become seriously ill and unable to communicate your preferences or make treatment decisions.
- Advance care planning helps to ensure your loved ones and health providers know what matters most to you and respect your treatment preferences.



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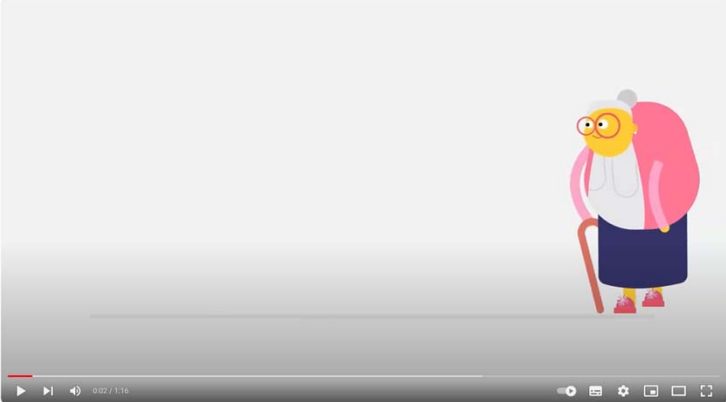
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[Advance care planning:
Talking about it
\(youtube.com\)](#)

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Why?



Australian Study (Batchelor et al, 2008)

- Higher aged care staff satisfaction.
- Reduction in unwanted hospitalisations and aggressive treatment.
- Reduces stress and anxiety for family members
- Increases family members satisfaction with outcomes post death.



- Advanced Care Planning – agreement that it is a **good idea**.
- Clearly established by research that it **has many benefits**.
- **Implementation** in the 'real world' is where system change is required.
- ACP is everyone's business – **but who takes responsibility?**



Who should be involved in advance care planning?



- General agreement at the policy level in Australia and Hong Kong that ACP should be promoted and encouraged
- Problem is in the implementation and take up of ACP
- Australia attention has been given to ACP in Residential Aged Care but take up limited – estimated range 0.2% - 5-14%



- No clear policy or procedure in place
- Global statements but no clear roles and responsibilities
- Cultural differences – talking about death - taboos
- Legislative differences
- Who starts the conversation



- Wide variety in how it is documented or recorded.
- Staff roles are not always clearly defined
- Activation and Action not always clear
- Legal context
- Written in clear understandable languages



- Migrant communities in Australia usually give all the attention and importance to the family relationships and prioritise family members as carers.
- If there is an issue or an accident it remained in the family. For the Filipino community it was seen as wrong to talk about it outside the family. If someone interferes from the outside it was perceived as potentially causing problems and conflicts within the family.




Why residential aged care is important in this area?




- Advance care planning does occur in residential aged care, although many people admitted to residential aged care have cognitive impairment and may have lost decision-making capacity, which limits their ability to develop an Advance Care Plan.
- Identifying if a resident has an Advance Care Plan or Advance Care Directive and identifying the resident's substitute decision-maker
- **Talking with residents about their values and preferences**, regardless of cognitive capacity, and involving their substitute decision-maker and others such as family in the conversations in facilitating advance care planning with residents who have decision-making capacity.
- Making sure there is **timely sharing of information** with other services and healthcare providers when capacity is lost and a care or medical decision is required or if transfer of care is required.




- Terrain is difficult
- Promotion of Conversations about ACP
- Case conferences and family meetings some evidence that this increases uptake
- Staff training and comfort about talking about end of life care
- Older the person more likely to have an ACP in place
- Evidence that an 'outsider' voice/education can increase uptake.



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Conversation Starters [Advance Care Planning](#)


Conversation starters
 The most important things in my life

About me	Being able to is the most important thing to me because	I was thinking about what happened to and it made me realise	As part of my culture, values and beliefs is important to me because
About life	A good day for me is one where I because	What I value and enjoy most in my life is because	The most important things on my bucket list are
About health care	I would prefer to receive my health care at because	When happens I get worried about my health care because	I would want these people included in discussions about my health.
About choices	An unacceptable health outcome for me would be because	I would not want treatments if there was little chance of recovery because	If I was choosing between quantity and quality of life, I would choose because


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Hong Kong Study (Yu, 2022)

- Kwun Tong
- 138 males/144 females aged 55+
- Only 13.5% had heard about ACP
- Those that had 63.2% had learnt about it on the internet
- Only 17% would consider ACP



No clear roles and responsibilities

Fear of talking about death and end of life care
– if we talk about it, it will happen

Not understanding that ACP increases your
control and choice about end of life care






Jockey Club End of Life Community Care Project


Research

- "A systematic approach to ACP to respect the wishes of residents regarding care decisions, including place of care (p206)."
(Jockey Club)









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What can we do?

-  Make it a standard part of practice and policy
-  Resources
-  Roles and Responsibilities for Leaders
-  Education and training for staff
-  Information for families
-  How and where will it be stored?

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Creative Approaches

-  Use of volunteers or peers
-  Family Education Evenings
-  Build a structure for discussions e.g., prior to admission, admission, 1 month later
-  Creativity – video wishes
-  Could be built into creative arts program
-  Letters/Cards
-  Pilot programs using different models
-  Evaluate and Write Up



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