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Evaluation of the impact of the Aged Care Assessment Team within the Illawarra Area Health Service

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University of Wollongong

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EVALUATION OF THE IMPACT OF THE AGED CARE ASSESSMENT TEAM WITHIN THE ILLAWARRA AREA HEALTH SERVICE

A thesis submitted in partial fulfilment of the requirements for the award of the degree of Doctor of Public Health

THE UNIVERSITY OF WOLLONGONG

by

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May 1994
DECLARATION

I declare that the work described in *Evaluation of the impact of the Aged Care Assessment Team (ACAT) project within the Illawarra Area health services* is entirely my own work. References to the work of others are indicated in the text. This work has not been submitted for the award of any other degree at any other university.

Mohammad Ashraf Semnani

June 1994
ACKNOWLEDGMENTS

Many people have helped me in this work, but in particular I should like to thank:

Professor Ross Harris, my supervisor, for his support and encouragement while needed.

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ACAT Managers and Co-ordinators within the IAHS for their help and support.

My wife Shohreh Hydari and my father Emadeddin Ashraf Semnani for their patience and support.
ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>ABS</td>
<td>Australian Bureau of Statistics</td>
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<tr>
<td>ACAT</td>
<td>Aged Care Assessment Team</td>
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<tr>
<td>ADL</td>
<td>Activity of Daily Living</td>
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<td>COP</td>
<td>Community Options Program</td>
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<tr>
<td>CTR</td>
<td>Community Transport</td>
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<tr>
<td>DC</td>
<td>Day Care</td>
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<tr>
<td>DHHCS</td>
<td>Department of Health, Housing and Community Services</td>
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<tr>
<td>DNCB</td>
<td>Domestic Nursing Care Benefit</td>
</tr>
<tr>
<td>DON</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>GAT</td>
<td>Geriatric Assessment Team</td>
</tr>
<tr>
<td>GP</td>
<td>General Practitioner</td>
</tr>
<tr>
<td>HACC</td>
<td>Home And Community Care</td>
</tr>
<tr>
<td>HCAA</td>
<td>Hostel Care Assessment Authority</td>
</tr>
<tr>
<td>HC</td>
<td>Home Care</td>
</tr>
<tr>
<td>HM</td>
<td>Home Maintenance</td>
</tr>
<tr>
<td>IAHS</td>
<td>Illawarra Area Health Services</td>
</tr>
<tr>
<td>MDS</td>
<td>Minimum Data Set</td>
</tr>
<tr>
<td>MO</td>
<td>Meals ON Wheels</td>
</tr>
<tr>
<td>NSW</td>
<td>New South Wales</td>
</tr>
<tr>
<td>OPAC</td>
<td>Older Persons Actions Centre</td>
</tr>
<tr>
<td>QALY</td>
<td>Quality Adjusted Life Year</td>
</tr>
<tr>
<td>W.S.D</td>
<td>Wollongong Statistical District</td>
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ABSTRACT

This study seeks to evaluate the impact of the ACAT program within the Illawarra Area Health Service. The purpose of the study was to describe outcomes from the ACAT activities in 1992 and first six months of 1993, these include consumer satisfaction, range of services offered to the clients and carers’ involvement in the consultation and negotiation process.

The main sources of data were ACAT records, team co-ordinator’s information and the study instrument. Of 285 carers selected for the study, 149 (52%) carers responded to the mailed questionnaire. Of questionnaires received, 117 (41%) questionnaires were completed, six questionnaires (2%) were partially completed, and 32 (11%) explained that they did not wish to participate. Due to the age of the clients and their frailty, in this investigation there was a large data loss. One hundred and thirty six (48%) carers of the total sample did not respond to questionnaires. In this study total response rate was 41 per cent. ACATs’ clients were the study subjects and their carers responded to the study questionnaires. Criteria for selection of study subjects were that they were 65 years or over, had an identified carer and were deemed to be able to participate in the investigation by the local ACAT co-ordinator.

The range of services offered to the clients, carers’ involvement in consultation, negotiation with ACAT concerning the elderly friend/relative and carers service satisfaction were the study variables. Most carers were older than 65 years of age and suffered from a number of chronic illnesses. The fact that 33 per cent of carers suffer from stress was one of the findings. Carers reported caring responsibilities negatively affected their health. Dementia was the illness with the highest incidence among the clients.

A number of institutional and Community Services were offered to ACAT clients. Seventy per cent of clients were referred to Community Services. Community Home Nursing was the most frequently used of the different Community Care Services (n=52)(46%).
Most carers (57%) were satisfied with services which their elderly relative/friend received. Despite carers’ worry about their elderly friend/relative and the fact that caring responsibility had a negative effect on their own health, a large number of the carers were satisfied with the services and happy to continue caring responsibilities. There was no significant difference between level of satisfaction and the effect of caring responsibility on the carer’s health.

Need for services beyond those already utilized was not high, but need for Respite Care was frequently mentioned (34%) (n=38). Forty five per cent (n=50) of carers had one contact with ACAT members. Carers were usually not involved in the process of decision making by ACAT about services required, since twenty one per cent (n=28) were consulted by ACAT staff only twice and only twenty six (n=29) per cent were consulted three times and more. Also, eight per cent (n=9) of the carers reported that they had never been contacted by ACAT staff.

Overall Aged Care Assessment Teams successfully offer a range of Community Services to the aged residents of The Illawarra. Carers were mainly well satisfied with the services received.
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DEFINITION OF TERMS

**Carer.**

In this investigation the carer is the person who cares and provides regular care for the elderly consumer. Any person(s) who accepts this responsibility can be described as a carer of the aged person regardless of his/her family relation to the consumer. As a result, the carer can be a close family member such as daughter, daughter-in-law or son, or can be a community member who has direct responsibilities for the elderly consumer.

**Aged Care Assessment Team.**

The term Aged Care Assessment Team (ACAT) refers to a multi dimensional health care team for care of the elderly, based in a number of locations in the IAHS. The team is known as the ACAT team or Geriatric Assessment Team (GAT) by community members.

**Elderly Consumer.**

The term ‘elderly consumer’ refers to people 65 years and over who were ACAT consumers in the Illawarra region during the years 1992&3.

**Consumer Satisfaction.**

Consumer satisfaction means carers’ satisfaction with different health care services which their elderly relative or friend received during the years 1992 and 1993 from ACATs in the Illawarra.

**Consultation and Negotiation.**

The terms consultation and negotiation refer to the negotiation and discussion held between the elderly person and carer as consumers of services and ACAT members as health care providers and as coordinators of different services for care of elderly in the Illawarra region.