

Welcome!



Quality Aged Care with Multicultural Partnerships

Bayside Networking & Education Breakfast



Housekeeping

- Phones
- Toilets
- Emergency



Welcome to Country – Aunty Bernice Fischer

Minjerribah Moorgumpin Aboriginal Corporation



What is PICAC?



Partners in Culturally Appropriate Care (PICAC) is a national initiative, established by the Australian Government in 1997, that aims to assist older Australians who were born overseas.

In Queensland the PICAC program is delivered by ECCQ.



Partners in Culturally Appropriate Care

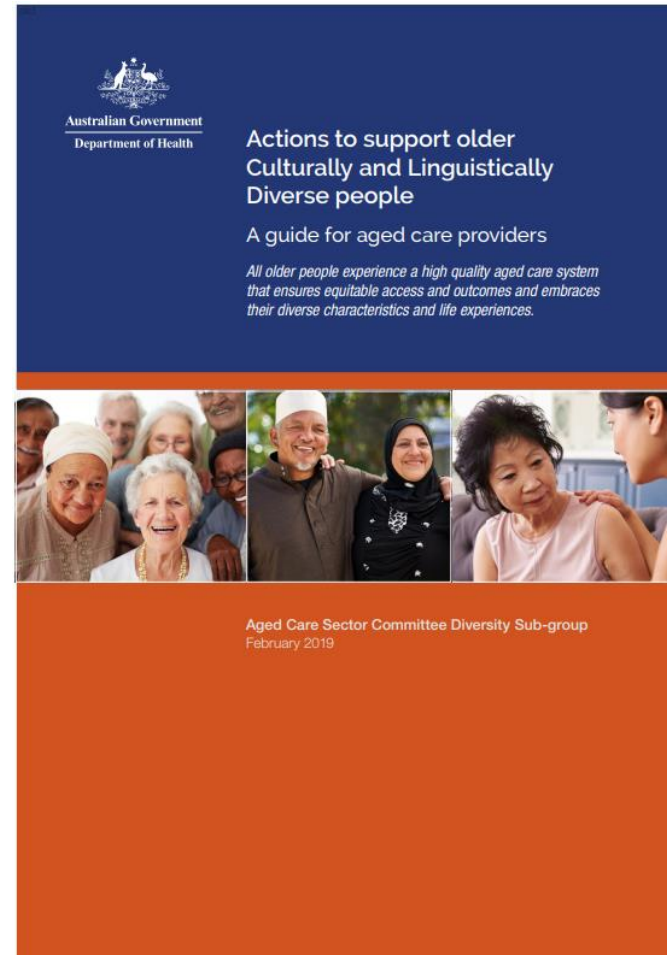
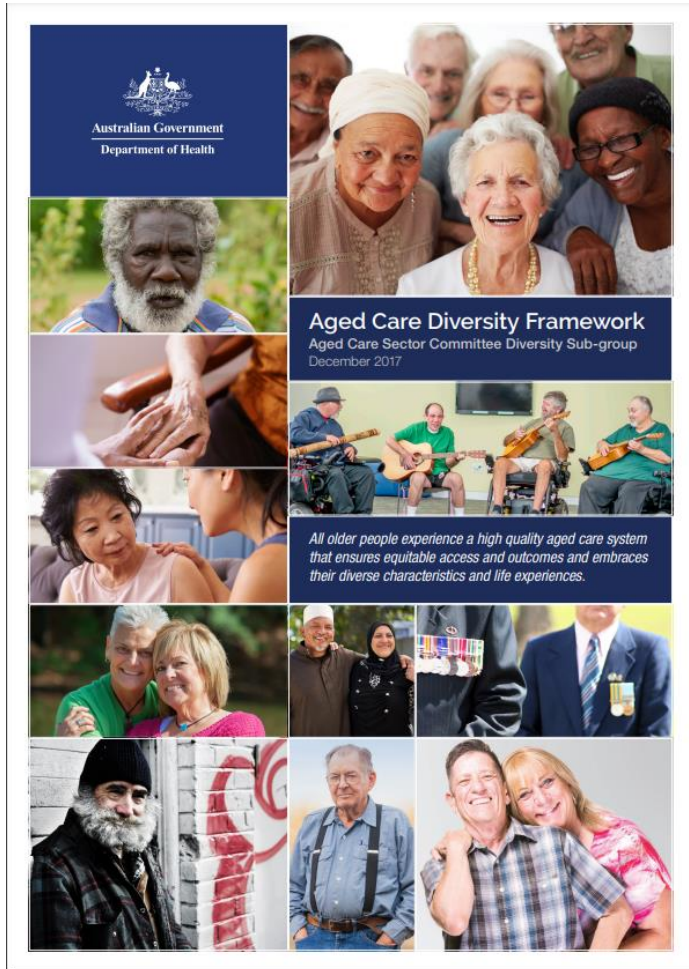


PICAC:

- Supports aged care service providers to deliver culturally appropriate care to older people from Culturally and Linguistically Diverse (CALD) backgrounds
- Helps older people from CALD backgrounds and their families make informed decisions about their aged care needs



Aged Care Diversity Framework



Aged Care Quality Standards



Sharing knowledge through Partnerships



Quality Age Care with Multicultural Partnerships

Thursday 16th March 2023

Aged Care and Understanding Health Inequities and Older People from Culturally and Linguistically Diverse (CALD) Backgrounds.



PICAC
Queensland



**Metro
South
Health**



**Queensland
Government**

Introductions

Lorella Piazzetta	Ana Sas
Senior Cultural Diversity Coordinator	Homecare Services Coordinator
Health, Equity and Access Team Strategic Partnerships	Aged & Disability Services
Metro South Health	MultiLink Community Services Inc.
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Acknowledgment to Country

Today, we acknowledge the Traditional Custodians of the land on which this training taking place (Quandamooka).

We pay our respect to Elders, past, present and future.

Aunty Bernice Fisher

(Minjerribah Moorgumpin (Elders-In-Council Aboriginal Corporation).



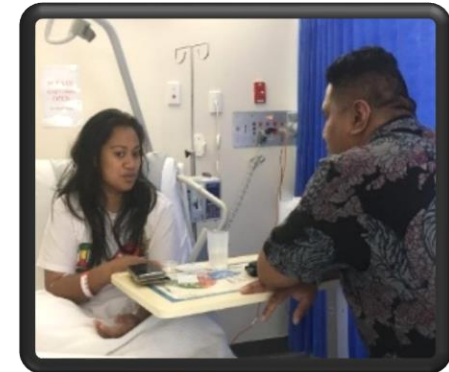
An overview

- Who are our culturally and linguistically (CALD) communities?
- What is health equity?
- What are the issues for older people from culturally and diverse backgrounds?
- Multicultural Ageing Partnership – who are we?
- What have communities told us (the partners)?
- What is best practice?
- Resources
- Questions

Culturally and Linguistically Diverse Communities (CALD)

Non-homogenous

- *Immigrants and migrants*
- *People from a refugee background*
- *People seeking asylum*
- *Visa categories*
- *International students*
- *Deaf people.*



Health Equity

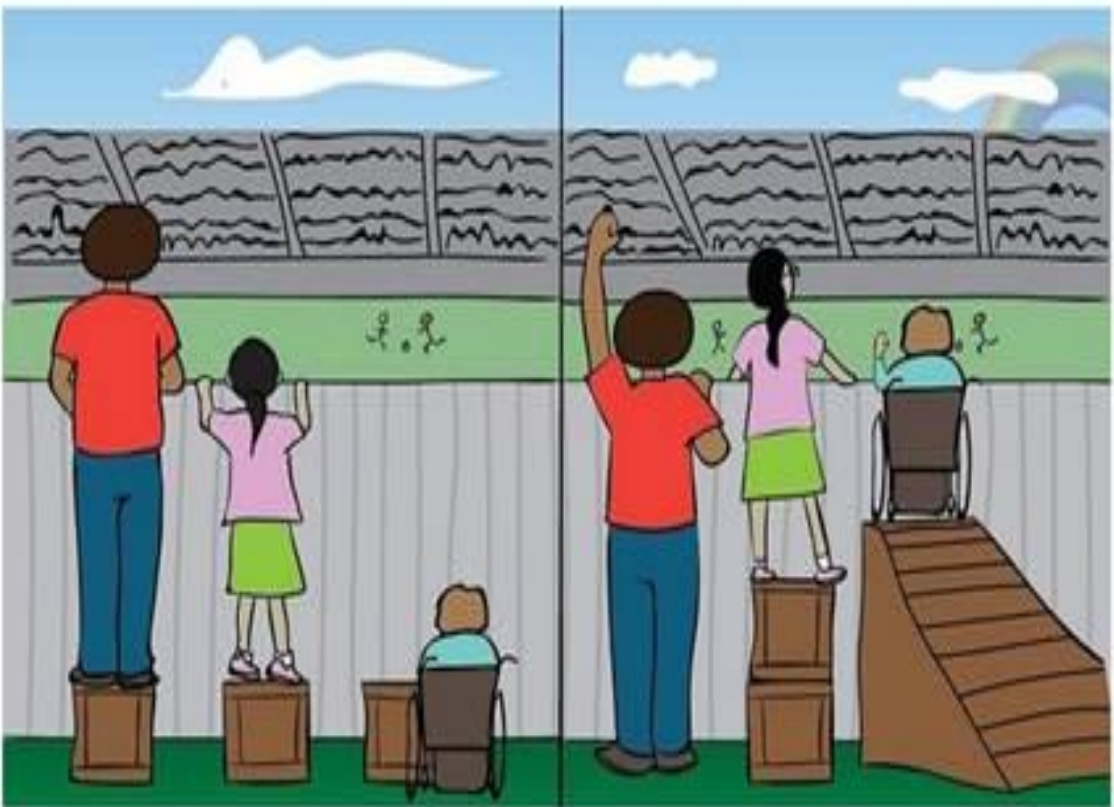
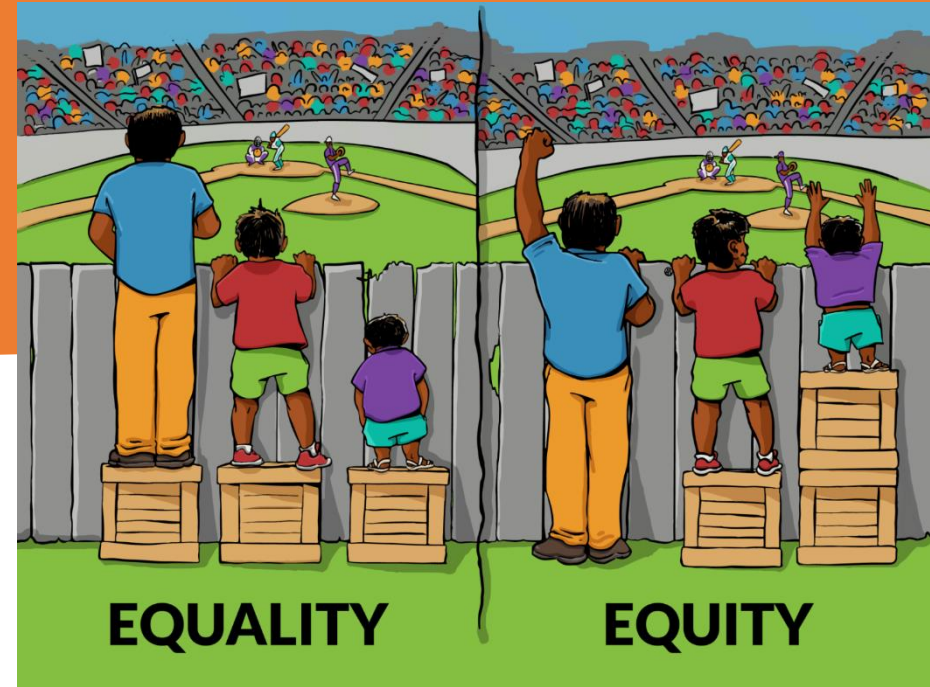
Does treating everyone the same achieve the same health outcomes?

Equity is the absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically’.

(World Health Organisation)

Does treating everyone the same achieve the same health outcomes?

Health Equity



A version of the equality vs. equity picture that highlights the importance of inclusion of people with disabilities. Image courtesy Maryam Abdul-Kareem.

Health Inequity and older people



Multicultural Ageing Partnering (MAP)

Commenced in 2017 as part of MSH funding for Logan – multicultural health events

- Aged Care and Disability event (My Aged Care, NDIS, 40 stallholders, over 350 attended)
- Interpreter training on palliative care (80 interpreters)
- Palliative care community workshops (2)
- Gold Coast presentation – aged care service provider presentation



Ongoing focus to:

- Share information, resources and practice with commitment to working together with particular focus on palliative care, end of life, older people and associated issues
- Contribute to research
- Extend partnership, seek funding.

2023 – Initial meeting, over 30 stakeholders working with older people from CALD background
Portuguese workshop (March).

Data – Local

Country of Birth

Redland LGA (2021)

65 years plus

	Number	Percentage
TOTAL	33300	100.0%
Australia	21341	64.1%
England	3679	11.0%
New Zealand	1616	4.9%
Scotland	547	1.6%
Netherlands	505	1.5%
Germany	438	1.3%
South Africa	353	1.1%
Italy	202	0.6%
Ireland	138	0.4%
United States of America	134	0.4%
Phillipines	132	0.4%
India	127	0.4%
Poland	102	0.3%
Papua New Guinea	101	0.3%
China excludes SARs and Taiwan	99	0.3%
Wales	99	0.3%
Canada	88	0.3%

Data – Local

Country of Birth	Malta	74	0.2%
	Croatia	73	0.2%
	Malaysia	72	0.2%
	Indonesia	71	0.2%
	Fiji	66	0.2%
	Greece	64	0.2%
	Zimbabwe	63	0.2%
	France	51	0.2%
	Sri Lanka	50	0.2%
Redland LGA (2021)	Hong Kong	48	0.1%
	Vietnam	36	0.1%
65 years plus	Egypt	34	0.1%
	Taiwan	33	0.1%
	Singapore	31	0.1%
	Mauritius	30	0.1%
	Lebanon	19	0.1%
	Bosnia and Herzegovina	18	0.1%
	Japan	17	0.1%
	Chile	16	0.0%
	Iran	16	0.0%
	Myanmar	16	0.0%
	Samoa	14	0.0%

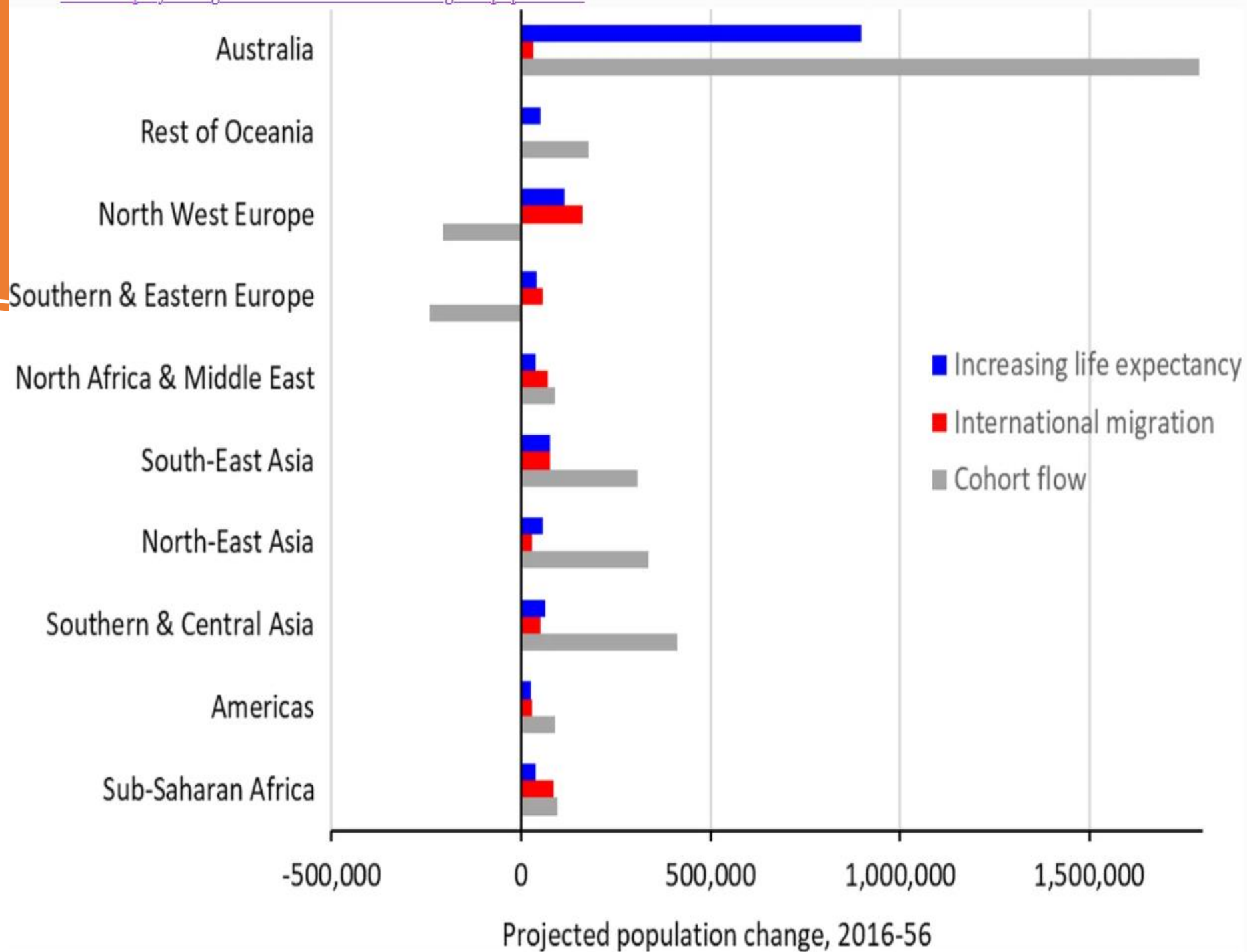
Data

Nationally

Source:

Past and projected growth of Australia's older migrant populations

Tom Wilson et al, 2020



Data Implications

Source: *Past and projected growth of Australia's older migrant populations*,
Tom Wilson et al, 2020

- Cohort flow change
- Culturally appropriate care, including access and equity
- Addressing language and communication barriers
- Awareness of age related diseases
- Care options
- Culturally competent aged care workforce
- Community collaboration and codesign
- Research inclusion.



What do we know?

Issues for older people from CALD backgrounds

- Language and communication barriers (reverting back to native language i.e. Language reversion)
- Social and cultural isolation
- Loneliness
- Depression, mental health (stigma)
- Cultural beliefs and expectations (accessing residential/aged care services, ethno specific vs generalist)
- Digital divide
- Health literacy and health experiences
- Lack of awareness of information, resources and available services
- CALD carers
- Others (e.g., Post COVID-19, Elder abuse, domestic and family violence, disability, trauma, dementia, access to transport financial hardships etc.)

“Many of our older people are so lonely. Back home they could go out their front door and there was the local village.....always someone to talk with. Here they stay in their house all day by themselves”

(Consumer)

Issues for older people from CALD backgrounds (aged care settings)

RESIDENTIAL AGED CARE

- Inconsistent or lack of culturally safe and responsive/inclusive care
 - in-language information and supports, accessing interpreters
 - maintaining cultural and religious connections
 - cultural and traditional foods
 - diverse needs (e.g. cultural activities)
- Trauma and resurfacing post-traumatic stress symptoms (long halls, small rooms, alarms)
- Multicultural workforce

COMMUNITY CARE

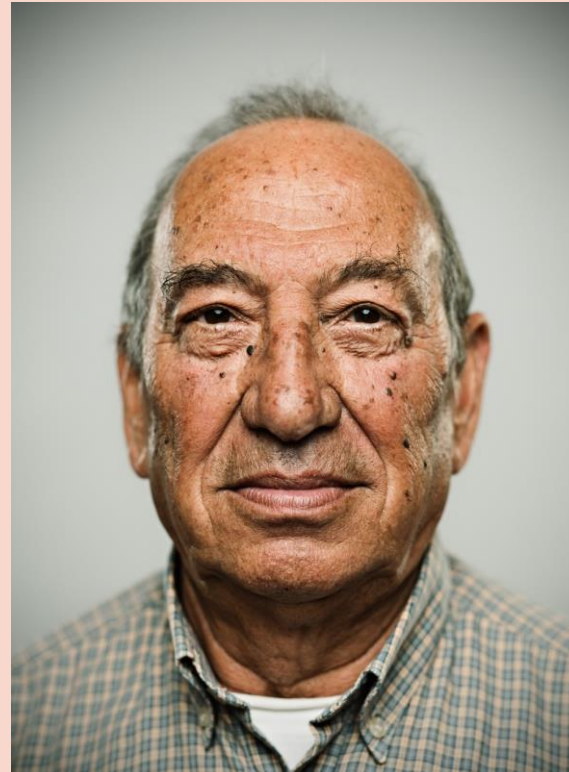
- Social and cultural isolation
- Language and communication providers (unavailability of certain languages)
- Scope of program and funding e.g., person wishing to attend their faith center
- Other common barriers e.g., financial hardships.

Stories

**Maria (Residential)
(Jewish, 87 years of age)**



**Luis (Community &
Residential) (Spanish 88
years)**



What did people tell us? (partners)

"It is very hard for us to embrace My Aged Care or seek support outside of the family"

Community member, Oromo community

"We need to focus on older people in CALD communities, many are not connected to services and are lonely"

Interpreter – Spanish-speaking

"Not enough social networks for older CALD people – many bought over to look after grandkids, quality of their lives deteriorate"

Community leader, Indian community

"We arrived over 30 years ago and worked to keep going, no English classes. We expect our daughter to take care of us.....but it is very hard as she has to work"

Spanish speaking couple

"I am linked into health and other services here at Redlands but I couldn't talk to anyone after the event at Christchurch.. It was very difficult"

Consumer, former WW2 survivor

"We bought you to the country for a better life and this is the least you can do for us –look after us and keep us out of those homes"

Consumer, Chinese community

"In our homeland, those homes were for people who were rejected by their families.....the stigma is very real for us here. Plus how do we know they can understand us and give us our traditional food?"

Consumer, Iranian community

Best Practice.....where to from here?

- Individual and organisational cultural capabilities/ culturally responsive/ safe care
- Organisational equity audits
- Governance and accreditation standards
- Accessing and working with Interpreters and providing appropriate document translations
- Relationships (family, carers, friends) and **partnerships.**

Best Practice.....where to from here?

- More culturally and linguistically appropriate information and community education e.g. Wills, Enduring Power of Attorney, funeral costs, Services Australia payments (previously Centrelink)
- Importance of faith, traditional foods and cultural beliefs as they age
- Culturally appropriate resources including social networking opportunities (bringing people together)
- “Not one size fits all” and health equity for all.

Any questions?



Thank you





Multicultural Resources for Aged Care Services

Multicultural Resources – QR code

- QR Code to access list of resources



Interpreter Services

TIS National

health.gov.au/tis-aged-care-providers

1300 655 820

Older people from culturally and linguistically diverse backgrounds

- Immediate phone interpreting 24 hours a day, 7 days a week
- Pre-booked phone interpreting
- On-site(in person)
- Video remote interpreting
- Automated Telephone Interpreting service (ATIS)



Interpreter Services

Deaf Connect

health.gov.au/deaf-connect-aged-care *1300 773 803*

Deaf, deafblind or hard of hearing Older Australians

- Available 7 days a week including emergencies and after business hours
- Face to face and video remote sign language interpreting
- Sign languages including Auslan, American sign language, International sign language and signed English
- Tactile signing and hand-over-hand signing for deafblind people
- Live captioning onsite or remotely



Interpreter Services

Interpreter Connect

myagecare.gov.au *1800 200 422*

First Nations Elders

- My Aged Care interpreting services in 16 First Nation languages
- Information on ageing and aged care services including registration and assessment process
- Arranging for the person's needs to be assessed
- Providing support to find the most appropriate service



Aged Care Specialisation Verification

Aged care providers may choose to offer specialised services for people:

- with diverse experiences, backgrounds, and characteristics
- who may identify with one or more of the groups defined as having special needs in the [Aged Care Act 1997](#).

To claim specialisation, providers must deliver care that:

- is sensitive to the needs of these individuals
- goes beyond the standard obligations of the [Aged Care Quality Standards](#).
- Applications must refer to the [My Aged Care Provider Specialisation Verification Framework](#) and its assessment criteria.





Stakeholder Toolkit

Connecting older Australians from diverse backgrounds with aged care services

Stakeholder Toolkit

OPAN Training

Who is missing?

Planning for diversity workshops



Redlands area – Alexandra Hills Hotel

Workshop one (in-person)- 11 May2023

Workshop two (in-person)-01 June2023

Workshop three (online only)- 13July 2023

<https://opan.org.au/education/education-for-professionals>

1800 700 600



Sat shri Akal and Namaste





Australian Government

Department of Health and Aged Care

Free translation service for aged care providers



Visit diversityagedcare.health.gov.au

Fill in the translation request form and our friendly team will respond within 48 hours, Monday to Friday.



Email diversityagedcare@health.gov.au

Different languages, same aged care



As an aged care provider, it is important that people in your care have information about the care they need, delivered in a way they can understand. Translated materials in their language will help them to make informed choices that suit their needs.

The Department of Health and Aged Care is working with Icon Agency and its consortium partners, including Able Australia, The LOTE Agency and others, to provide a free translation service for government-subsidised aged care providers, peak bodies and Partners in Culturally Appropriate Care (PICACs) across Australia.

This service will help you to communicate key written and audio/video materials to those in your care for whom English is not their preferred language.

This includes:

- Older people from culturally and linguistically diverse backgrounds
- First Nations Elders
- Deaf, blind, deafblind or hard of hearing older Australians.

If you, or the organisation you work for, provide aged care services and are in need of translation services for someone in your care, we will make it simple and efficient for you.

Eligibility checklist



You're one of the following groups

- ✓ An Australian Government-subsidised aged care provider that delivers care under one or more of the following programs:
 - Commonwealth Home Support Programme (CHSP)
 - Home Care Packages (HCP)
 - residential aged care
 - Short Term Restorative Care (STRC)
 - respite
 - transition care program (TCP)
 - National Aboriginal and Torres Strait Islander Flexible Aged Care Program
 - Multi-Purpose Services (MPS)
 - Disability Support for Older Australians (formerly Continuity of Support program)
- ✓ A peak body such as the Aged & Community Care Providers Association (ACCPA) or LGBTIQ+ Health Australia (LHA)
- ✓ A member of the Partners in Culturally Appropriate Care (PICAC) program
- ✓ Aged care navigators (including care finders from 1 Jan 2023) and EnCOMPASS Multicultural Aged Care Connectors



You own the copyright to the materials

- ✓ Materials are any printed or digital (including photography and/or video) assets aged care providers may use for administrative purposes. A copyright is a type of intellectual property that gives its owner the exclusive right to copy and distribute materials.
- ✓ New materials mean they don't currently exist and you're looking to the Icon Consortium to create them. This is only available where direct translation and/or interpretation of an existing resource is not appropriate for communicating with the target audience
- ✓ Existing materials mean they do exist and you're looking to the Icon Consortium to translate and/or interpret them
- ✗ Materials that are produced by other agencies or businesses are protected by their copyright, therefore cannot be translated and/or interpreted under this service unless requested directly by the owner

Here is a guide to the types of requests we accept

What's in scope?



- welcome material such as how your service operates
- form templates such as registration, service agreement and feedback forms
- in-facility wayfinding signage to assist people in getting to rooms and activities
- non-personal documents or letters from friends, family or medical practitioners
- audio and video messages that assist people to better understand or participate in your service.

What's out of scope?



- personal or individual content of care plans or documents
- marketing materials (including website copy) prepared for the primary purpose of attracting new people to a specific aged care provider
- any aged care information from the Department of Health and Aged Care that is of a general nature and available in translated formats on the department's website
- frequently changing material (such as newsletters)

How it works



Step 1

Visit

diversityagedcare.health.gov.au



Step 2

Fill in the online translation request form



Step 3

Our friendly team will respond within 48 hours, Monday to Friday.



Step 4

Translation specialists will work with you to understand your requirements



Step 5

We'll translate your eligible materials and return them in the required formats

Reflection Activity

1. What might you implement in your service that you have heard about today?
2. What barriers might you come across implementing this new initiative?
3. How could you overcome these barriers?



Thank you for participating!

Please complete the **Evaluation**
so we can learn how to best
support your service.

