A Gippsland PHN Priority 2025-28

Health Insights

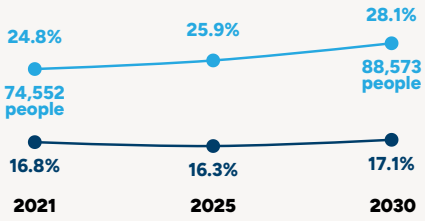
Let's talk about health and wellbeing

phn GIPPSLAND
An Australian Government Initiative

Healthy Ageing (people aged 65+)

Demographics

Gippsland has a high proportion of people aged 65 years or older and it is increasing.



Highest in East Gippsland **(30.9%)** and Bass Coast **(29.5%)** (2021)

By 2030 Gippsland is forecast to have the second highest proportion of people aged 65+ of all PHN regions.

Top languages spoken at home among people aged 65 year and older with low English proficiency: Mandarin, Italian, Vietnamese, Greek and Thai.

National data (people aged 65+)

19% of men and **11% of women** were employed in 2021; more than double 2001 figures

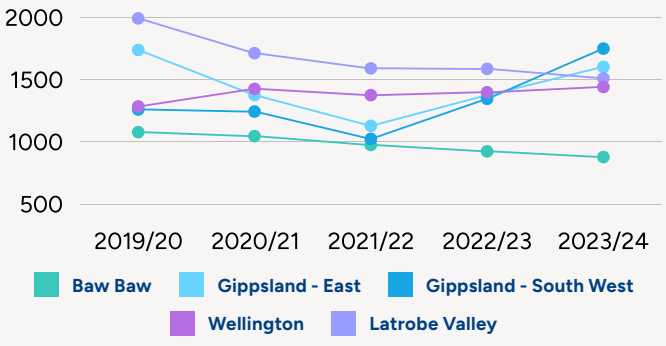
Disability increases with age; **36% of people aged 65–69 to 85% of people 90 and over** (2018)

84% of all deaths were for people aged 65+ (2022)

Leading diseases causing total burden of disease (fatal and non-fatal) for people aged 65 and over: (2022)

1. Dementia
2. Coronary heart disease
3. Chronic obstructive pulmonary disease
4. Lung cancer
5. Stroke

Lower urgency ED presentations for Gippsland residents aged 65 years and older by year



We acknowledge the Victorian Department of Health as the source of Victorian Admitted Episodes Dataset (VAED) and Victorian Emergency Minimum Dataset (VEMD) data used for this paper

Healthy ageing, or positive ageing, is where people are supported to maintain their health and independence to live well.

Gippsland data (people aged 65+)

A high reliance on pension payments among people in Gippsland:

60.7% of people 65+ received the aged pension (Victoria, 55.6%; highest rates in Latrobe, 64.9% and East Gippsland, 63.6%)

30.3% of people 15+ were pension concession card holders (Vic 19.0%)

Estimated prevalence of long-term health conditions among people aged 65 years or older:

- **30%** arthritis
- **16%** heart disease
- **14%** diabetes
- **10%** cancer
- **9%** asthma
- **9%** mental health condition

27% of all patients attending Gippsland general practices in 2023-24 were aged 65+. This accounted for:

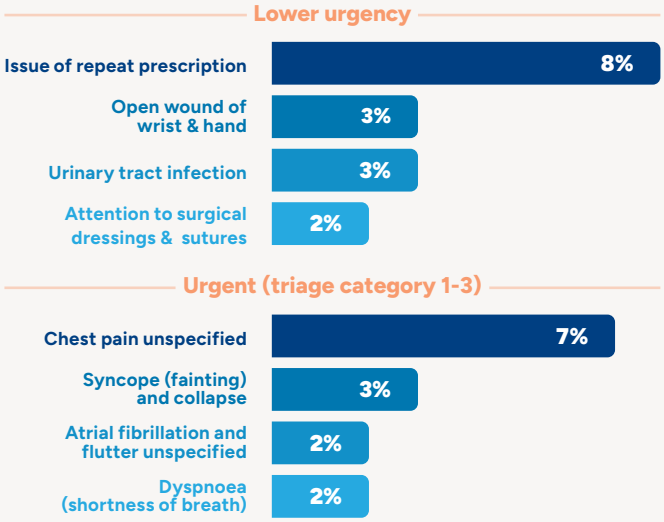
43% of the activity at Gippsland general practices

An average of **20** activities per patient

Emergency department (ED)

11% of ED presentations involved a fall (4,197 presentations in 2023-24)

Leading diagnoses among ED presentations for people aged 65 years or older, 2023-24



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Healthy Ageing (people aged 65+)

Hospital admissions

Gippsland had the fourth highest rate of **potentially preventable hospitalisations** for people aged 65 years or older among Australian PHNs; 7,506 per 100,000 (Vic 5,622).

The top conditions were:

Chronic obstructive pulmonary disease (COPD)

Diabetes complications (include stroke, heart disease, kidney disease, eye disease, foot ulcers and foot amputations)

Congestive cardiac failure

Falls are a serious concern

- Gippsland had the highest rate of accidental falls causing death of Australian PHNs (16.4 per 100,000 people of all ages compared to 10.2 in Australia).
- 1 in 3 people aged 65 and over fall each year.
- Even falls that do not cause injury often trigger a loss of confidence.

Dementia has the highest burden of disease, both through death and disability

- An estimated 6,734 people have dementia in Gippsland; this is expected to grow by 3.1% per year to over 13,000 people in 2054.
- People living with dementia are admitted to hospital at twice the rate than those without.

Health services and supports

My Aged Care is the starting point to access government subsidised aged care services for people 65 years or older.

Age 50+ for Aboriginal and/or Torres Strait Islander peoples

Age 50+ for people on low income, homeless or at risk of homelessness (45+ for Aboriginal and /or Torres Strait Islander peoples)

Aged care services in Gippsland include:

- 53 residential aged care homes (an estimated 3,417 places)
- 36 Home Care Package providers
- Commonwealth Home Support Programs
- Short term restorative care

Gippsland PHN services and supports

- **Mental Health in Aged Care**: 53 residential aged care homes have the opportunity to engage
- **Care Finder** services for older vulnerable people with no support and need intensive support to access aged care
- **Early intervention** services
- **Dementia and cognitive decline** services and supports
- Support for residential aged care homes with **after-hours toolkits**
- **Palliative Care support and training**
- **Gippsland Pathways**
- **Digital tools for connected care**
- Support for the **General Practice in Aged Care Incentive** for older people living in residential aged care
- Support with the roll out of **aged care on site pharmacy**

Professional perspective

Gippsland PHN stakeholder consultations have noted:

Advance care planning is important.

Staff shortages result in pressure on existing staff.

Dementia and mental health issues are common, including challenging behaviours.

There are great services, but often lack capacity to help everyone.

An increase in older people experiencing homelessness, including women impacted by family violence or loss of income.

High demand for Care Finder services to support people to connect to the right services.

> **Distance compounds this dilemma... we need to leverage telehealth to connect health and social care teams.**
>
> - Health professional

Community, consumer and carer perspective

Isolation can lead to severe loneliness, often impacting both mental health and physical health.

Elder abuse issues often go unrecognised and services and supports can be hard to access.

Access to palliative care is often difficult and referrals can be made too late to benefit the consumer.

Worry about the ageing process and loss of independence.

A desire to remain in the home for as long as possible.

Navigation of services can be difficult and many need support.

> **I worry about what my future looks like in five years time. Am I going to be able to get the services I need?**
>
> - Community member

What can we do to improve?

Empower the ageing community to plan and take control over decision making.

Early interventions and activities can reduce hospital activity, accidental falls, and support healthy ageing including exercise, diet, mental health and social groups.

Manage any chronic health issues. Over time, needs may change from independence to the involvement of a multidisciplinary team to assist.

Improve support for people living with dementia, including their family and carers.

Improve communication between GPs, clinicians, consumers and carers about treatment choices, including palliative care.

Improve care coordination, including with broader supports for elder abuse and alcohol and other drug misuse.

Integration of health and social care to meet the needs of individuals.

Advocate for improved support to meet community needs.

Access more Gippsland PHN publications here

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