

CONFERENCE ABSTRACT

Moving beyond the fragmented and reductionist model of aged care: Evaluation of a process to create an aged care worker of the future

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Introduction: Globally health care for older people is transitioning from a traditional reductionist biological and dependency focussed model to a consumer driven approach that maintains functional ability and promotes health while ageing 1,2. The Australian government's response to these challenges has been to introduce major reforms within the national aged care system where older people will be increasingly empowered to make choices and give direction to their individual needs to support their health 3. The World Health Organisation 2 recognised the emergence of this new consumer-driven social-ecological approach to ageing acknowledging the need to move from traditional health disciplines, and develop a new worker with skills to navigate and support consumer decision-making within a seamless and integrated service model.

In 2016 the University of Newcastle in Australia worked with the aged care industry to develop an Associate Degree in Integrated Aged Care. The degree was designed to allow individuals who had gained workplace and vocational experience in aged care to gain higher level tertiary preparedness and skills to work within a social-ecological and integrated model of service delivery.

A 12 month evaluation of the program was undertaken in 2017 to examine the academic transition, preparedness, progression and satisfaction of vocational students with relevant work experience to undertake studies in the new program.

Method: Mixed methods collected data from students and included surveys at orientation and at the completion of each teaching term, and 1:1 interviews after 6 months.

Results/Discussion: Transition: 83% enrolled held certificate qualifications in aged care. The prevailing reason for enrolment was to upskill. At orientation the students were concerned about managing work/study commitments and using the computer. Many of the students described finding the transition to university difficult.

Preparedness: Most described themselves as being the first in their family to undertake university study. They had to obtain a computer and develop computer skills to undertake this program.

Progression: 22 students enrolled into the program and 86 % remained enrolled at mid-year and 72% at the end of the year. Students who withdrew did so because the program did not meet their expectations or was too difficult. Time management continued to be their biggest challenge. During this first year of the program 25% of the students have been promoted within their organisations to undertake a more skilled role in care coordination.

Satisfaction: Students stated that the program was meeting their expectations and the educators have been supportive. Student survey feedback for all courses were all above the university mean.

Conclusions: Students with vocational qualifications now have an avenue to upskill in new integrated aged care models. The aged care industry is already recruiting these students to work in more advanced roles where the consumer driven approach is required.

References:

1. World Health Organization WHO. World report on health and ageing. Geneva: WHO. 2015.
2. World Health Organization. Integrated care for older people: Guidelines for community-level interventions to manage declines in intrinsic capacity. Geneva: WHO 2017.
3. Department of Health. Aged care reform. 2017. Available from: <https://agedcare.health.gov.au/ageing-and-aged-care-aged-care-reform/why-is-aged-care-changing>

Keywords: integrated care; social-ecological model; consumer-driven; associate degree
