Brisbane North PHN

Care Finder in Kilcoy: Consultation and Scoping

Final Report

Prepared by Impact Co.

April 2025

IMPACT CO.

We acknowledge the Turrbal and Jagera people, the Traditional Custodians of the lands on which Brisbane North PHN operates. We pay our respects to their Elders past, present, and emerging and recognise their continuing connection to Country. We are committed to working respectfully and collaboratively with Aboriginal and Torres Strait Islander peoples to improve health outcomes in the region.

Contents

Brisbane North PHN Care Finder in Kilcoy: Consultation and Scoping – Final Report

List of acronyms

ABS	Australian Bureau of Statistics
ACAT/ RAS	Aged Care Assessment Team/ Regional Assessment Service assessment (now replaced with the Single Assessment System.
ACVVS	Aged Care Volunteer Visitors Scheme
ADA Australia	Aged and Disability Advocates Australia
CHSP	Commonwealth Home Support Package
Country to Coast PHN	Central Queensland, Wide Bay and Sunshine Coast PHN
DDWMPHN	Darling Downs and West Moreton PHN
DoHAC	Department of Health and Aged Care
DVA	Department of Veterans Affairs
HCP	Home Care Package
IRSD	SEIFA Index of Relative Socio-economic Disadvantage
IUIH	Institute for Urban Indigenous Health
LGA	Local Government Area
MASS	Medical Aids Subsidy Scheme
MoU	Memorandum of Understanding
NHS	National Health Survey
ODT	On Demand Transport
OT	Occupational Therapy
PHA	Population Health Area
PHIDU	Public Health Information Development Unit
SA2/SA3	Statistical Area 2/ Statistical Area 3
SDAC	ABS Survey of Disability, Ageing and Carers
SNA	Supplementary Needs Assessment
STRC	Short-Term Restorative Care program

Executive summary

About this report

This Final Report (this Report) represents the final deliverable of a consultation and scoping project that Brisbane North PHN commissioned Impact Co. to undertake. The project aimed to build a comprehensive understanding of the needs, barriers and opportunities for better uptake of the care finder program in the Kilcoy region through a localised assessment. This has been undertaken to help inform future commissioning of the care finder service for this region.

Care finder is a federally funded program through the Department of Health and Aged Care (DoHAC), delivered in response to the Aged Care Quality and Safety Royal Commission. Care finders are engaged to provide specialist and intensive assistance to help the target population in accessing health and aged care services and connect with wider community supports. A Supplementary Needs Assessment (SNA) conducted by Brisbane North PHN in 2022 identified several target populations for the care finder program. Following this SNA, a specific care finder service was established to support the Moreton Bay Region. The SNA also identified that specific place-based challenges and constraints in implementation still exist for the care finder service within the Kilcoy and surrounding region of the Caboolture Hinterland.

To identify the key needs or considerations for a care finder service in the Kilcoy region, a mixed method research approach was adopted that included consultations with key stakeholders and a desktop review, which involved an analysis of population health data.

Key insights

Following a desktop review, conversations with **26 stakeholders across 22 organisations** and **two focus groups with 28 older people** living in the Kilcoy region, the following 2 insights were formed.

Uniqueness of the region
This theme covers eight key insights describing what the Kilcoy region looks like. This includes geographical information about the region's location, demographic information about the region's older population and health information about the needs of older people in the area.
1. The Kilcoy region sits within the Brisbane North PHN catchment area but borders other PHNs.
2. There is a perception that Kilcoy is fairly remote and isolated despite being relatively close to regional hubs.
3. The Kilcoy region is home to a relatively large proportion of older people.
4. The population of older people in the region is not particularly diverse.
5. The Kilcoy region is relatively socio-economically disadvantaged, but many people own their own homes.
6. Older people in the Kilcoy region are not necessarily more isolated and disconnected than average for older persons.
7. Many older people in the Kilcoy region have long-term health conditions.
8. The intersection of the disability and aged care sectors need to be considered to meet the needs of residents in Kilcoy.
Current services in the region
This theme covers an insight and overview relating to the availability of services in Kilcoy and what this means for the role of a care finder in the region.
9. There are limited local service delivery options, particularly for in home care, occupational therapy and home and lawn maintenance services. These service delivery gaps make the role of a care finder more challenging.
Local referral pathways

This theme identifies three key insights regarding the local referral pathways, including experience of existing care finders, preferences of older people in the community and the need for assertive outreach.

10. Care finders are not seeing Kilcoy residents being referred into their service.

11. The need for strong assertive outreach will require a different referral pathway emphasis from the mainstream care finder services.

12. A move to more online communications (like community Facebook groups) has left some older people in Kilcoy feeling disconnected and unsure where to find information about services available to them.

Ensuring quality service delivery where it is needed most

This theme contains four key insights about ensuring the care finder service is able to meet the needs of the community, based on information shared by those in the region. This includes the importance of building trust and rapport within the community and working to enable development of other local services.

13. Prospective care finder participants can be more challenging to identify as they are more likely to be socially isolated.

14. There is a need for local care finders, with an ability to build trust and rapport.

15. There is a need to build the capacity and capability of the community to provide local services.

16. There is a need to manage care finder burnout and disillusionment.

Navigating to quality services and promoting choice in a thin market

This theme presents five key insights about navigating the Kilcoy market where there is limited choice, ways to improve the perception of health care services in the region.

17. There is a need to overcome service provider challenges and 'referral to nowhere'.

18. A care finder in Kilcoy will need to build robust referral networks to ensure eligible populations are linked in with wider care finders managing priority cohorts.

19. There is a need to consider the local reputation of health and aged care providers when referring clients.

20. The boundary intersection of Brisbane North, Darling Downs West Moreton and Country to Coast can cause service availability issues, and can be frustrating to older people in the community.

21. There is a need for longer term contracts and more consistency in service delivery.

Supporting the needs and preferences of older people in the region

The four insights in this theme cover key insights from conversations with older people in the Kilcoy region regarding their needs and preferences when it comes to accessing services and aged care, including difficulties they experience with the My Aged Care system.

22. There is a need to support older people with digital literacy in accessing health and aged care services, including Aged Care Needs Assessments.

23. There is a need to address the asset considerations for My Aged Care as many live on properties that make them ineligible for funding support for health and aged care services.

24. Limited public transport and home care access considerations specific to the region need to be considered.

Where to from here?

To address the challenges and improve the health and wellbeing of older people in the Kilcoy region, the localised assessment identified a number of potential next steps for Brisbane North PHN to consider. These include:

Next steps to address immediate service needs:

- **Ensuring an appropriate service provider is engaged to deliver the service**: the most appropriate service provider for Kilcoy would be one that is local, capable of building capacity, and delivers inclusive services.

- **Tailoring the design of the care finder program and the way that care finder is delivered in Kilcoy:** the role of the care finder in Kilcoy should be tailored so that it includesassertive outreach, marketing and promoting the service, supporting older persons to navigate income and asset testing, and improving digital literacy among older persons.

- **Placing an emphasis on partnerships or collaborations in the approach to market to identify a suitably qualified service provider(s):** the insights generated through desktop research and consultations suggest that a combination of multiple service providers might be the ideal approach.

- **Setting realistic KPIs tailored to the context of the care finder service model delivered in the Kilcoy region:** tailored targets and measures should be used to monitor and evaluate the success of the care finder program in Kilcoy. This should consider the particular challenges and requirements of delivering the service in this region.

Future / longer-term considerations:

- **Working in partnership with neighbouring PHNs to expand the care finder service and address boundary issues:** since Kilcoy sits near the boundaries of several administrative areas, there is a potential benefit to consumers, both within Kilcoy and just outside of Kilcoy, to Brisbane North PHN creating greater access to services across borders.

- **Facilitate partnerships between State-funded and Commonwealth-funded service providers to support innovative workforce models:** given the shortage of allied health workforce in the region, Brisbane North PHN can play a valuable role in promoting partnerships between service providers to support resource sharing.

- **Apply the learnings from the care finder model in Kilcoy to other areas:** as similar challenges are likely experience in other similar regions, any reflections or learnings identified in the Kilcoy context may also benefit other regions.

Section 1: Introduction

Purpose of this Report

This Report presents the key findings following consultation and data analysis of a localised assessment of how the Commonwealth's care finder service could be deployed to more effectively meet the needs of residents within the Kilcoy region.

The key findings in this Report draw on:

- interviews with 26 stakeholders both from within the local region and across the wider Brisbane North PHN catchment area;
- 2 focus groups with older people living in the region;
- publicly available data about the health needs and demographics of older people within the region; and,
- a detailed understanding of the current operational arrangements of the care finder service.

Collectively, these have helped to inform recommendations on how care finder could be effectively commissioned to better meet the needs of older persons with intensive support needs in the Kilcoy region.

Methodology

The insights in this Report were developed through a mixed-methods approach involving the analysis of publicly available datasets and consultations with a broad range of stakeholders.

This is further described below:

Quantitative data

Data on demographics, health needs and service supply as it relates to older people was accessed through the following sources:

- Australian Bureau of Statistics (ABS), Census 2021
- Public Health Information Development Unit (PHIDU), Social Health Atlas of Australia 2024

Stakeholder consultations

Consultations were conducted with older people, service navigation providers, aged care providers, health service providers, and regional and community stakeholders in order to canvas stakeholder perspectives on health needs, service supply, and service navigation utilisation and barriers.

In total, the project team spoke with **26 stakeholders across 22 organisations**. Where possible, engagement with older people was sought through outreach and collaboration with service providers. The feedback of **28 older people** is represented in this Report. Please see **Appendix: List of stakeholders consulted** for more information.

Note: From this point forward, within this Report, the term *'older people'* will be used to encompass those aged over 65, and those aged over 50 years who are First Nations Australians. This is consistent with the definitions used by My Aged Care, and the eligibility criteria of care finder services.

Limitations

This Report is subject to several limitations that may impact the development and interpretation of insights. These are:

- **Quantitative data limitations:**
  - There have been some limitations in the quantitative data that have informed the demographics of the Kilcoy community, including due to the recency of available data and data that is specific to Kilcoy (i.e. available at a postcode level). Where data has not been available at the postcode level, analysis has been undertaken of data at the Population Health Area (PHA) level, the Statistical Area 2 (SA2) and Statistical Area 3 (SA3) level, and

at the Local Government Area (LGA) level, to help to inform insights relevant to the broader regional footprint and are assumed to be representative of the Kilcoy region;

- o Where localised data was not available, research on the needs of older people at a national level has been sought, with assumptions made about it being broadly representative of the needs of older persons within Kilcoy;
- o Data sources have been identified where they have informed key insights. This means if additional analysis is undertaken for this region (such as an evaluation of the service), it can be updated if more recent data becomes available;

- **Stakeholder consultations:**
  - o Stakeholder interviews have been undertaken with all of the service providers commissioned for care finder within the Brisbane North PHN region, except IUIH who were unavailable for consultation during the engagement period. This may limit the insights specific to First Nations care finder services within the Kilcoy region;
  - o Local consultation has been undertaken with health and aged care service providers within the Kilcoy region, including the two local GP practices, pharmacist, Kilcoy Hospital, Sundale Aloaka Care Centre (the local residential aged care facility), Somerset Assist, All About Living and Anglicare (aged care home package providers), and Caboolture Hospital.
  - o The understanding of the local community has been further informed of individual interviews with residents of the region, as well as with the Somerset Regional Council, the Kilcoy Library, Somerset Health and Fitness Centre, the local RSL, and the local Meals on Wheels service;
  - o Understanding the needs of older people has also been informed by consultations with peak bodies including Aged and Disability Advocates Australia (ADA Australia) and Carers Queensland. Other organisations consulted relevant to the target cohort were the FRAIL Collaborative at Clinical Excellence Queensland and the local provider of the Aged Care Volunteer Visitors Scheme (ACVVS). Dementia Australia and Alzheimer's Queensland were not available for consultation despite attempts made to connect with them.; and

- **Other limitations:**
  - o This project will not seek to forecast emerging trends that may impact on the service provider and stakeholder landscape and will be limited to the current context.

Structure of this Report

This Report contains the following sections:

Section	Description
1 – Introduction	Describes the purpose, the methodology followed , and any limitations to the findings identified in this Report.
2 – Background and context	Explains what the care finder program is, including who is eligible for it, who its target population is, what the role of a care finder is, and the ongoing evaluation of the program. This section also provides context relating to the upcoming reforms of the aged care system and what implications they may have for the delivery of the care finder program.
3 – Key insights	Presents 25 key insights generated from desktop research and consultations, grouped thematically according to six overarching themes.
Appendix	A list of the stakeholders consulted with during this process and whose perspectives are reflected in this report.

Section 2: Background and context

About the care finder program

Care finder is a federally funded program through the Department of Health and Aged Care (DoHAC), delivered in response to the Aged Care Quality and Safety Royal Commission.

Care finders are engaged to provide specialist and intensive assistance to help the target population in accessing health and aged care services and connect with wider community supports. This can include assisting with registering for My Aged Care, applying for Commonwealth support programs, navigating various systems and organising care. Care finders *do not* deliver care to clients.

A Supplementary Needs Assessment (SNA) conducted by Brisbane North PHN in 2022 identified have identified several target populations for the care finder program. Following this SNA, a specific care finder service was established to support the Moreton Bay Region. The SNA also identified that specific place-based challenges and constraints in implementation still exist for the care finder service within the Kilcoy and surrounding region of the Caboolture Hinterland.

Five organisations are currently commissioned by Brisbane North PHN to provide care finder services, however only four serve the Somerset Region. These providers are shown in **Table 1** below.

Table 1: *Providers who deliver care finder in the BNPHN region*

Service	Locations Served	Focus
Communify Queensland	Brisbane	
Footprints Community	Entire Brisbane North PHN catchment	Mainstream service and people who are homeless/ at risk.
Micah Projects	Entire Brisbane North PHN catchment	Mainstream service and Forgotten Australians
Qld Council for LGBTI Health	Entire Brisbane North PHN catchment	LGBTIQ+
World Wellness Group	Entire Brisbane North PHN catchment	People from CALD backgrounds

The care finder customer journey

Figure 1 below demonstrates the ideal consumer journey for older people engaged in the care finder program.

Figure 1: *The care finder journey*
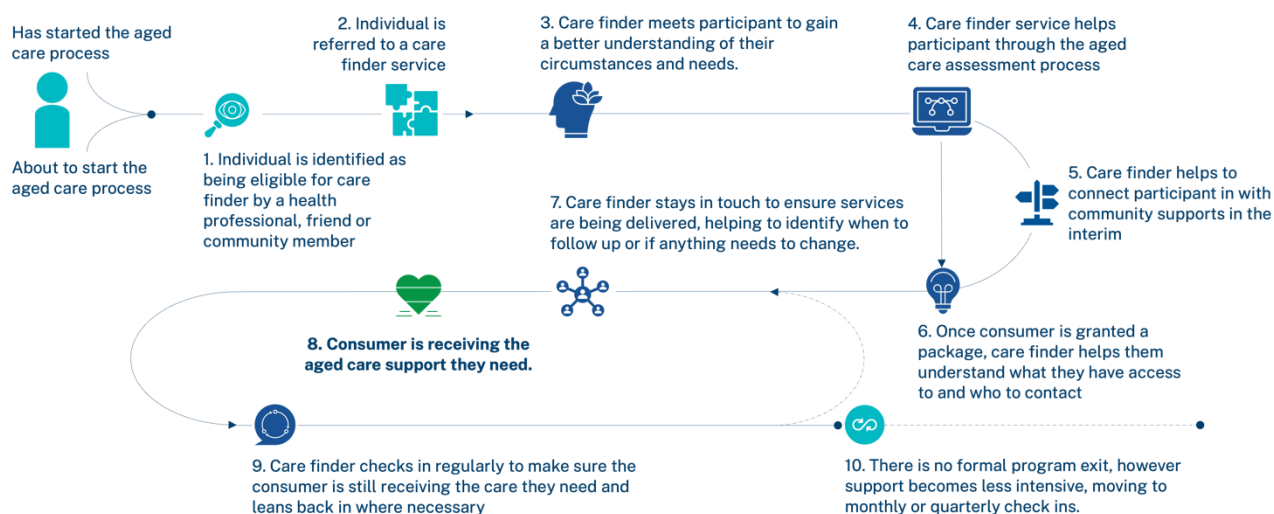
Eligible population

To be eligible for care finder support, individuals must:

- need help with one or more everyday tasks;

- be aged 65 years or older (50 years or older for Aboriginal or Torres Strait Islander people) OR 50 years or older (45 years or older for Aboriginal or Torres Strait Islander people) on a low income and homeless or at risk of being homeless; and
- be eligible for government funded aged care support.

Target population

The care finder program is targeted to people who have limited or no support to access aged care services and require intensive support to interact with My Aged Care and navigate the aged care service system.

Individuals may be socially or geographically isolated and have significant mental or physical health concerns that make it difficult for community or family to offer necessary support for them to access services that allow them to continue living at home.

Typically, referrals come from GPs, hospitals and other health/ community services, with care finders doing some assertive outreach to find clients.

Examples of target population based on the criteria:

- a person who is uncomfortable engaging with government due to past discrimination and/or trauma (e.g. due to being homeless or identifying as LGBTIQ+, a Forgotten Australian or a care leaver) and whose partner feels the same way about accessing help.

- a person who is socially isolated (without spousal support) and at significant risk of a fall who is not engaging with aged care because they are refusing help from their family to call My Aged Care to find out more about aged care and set up an assessment.

- a person who does not speak English and is being cared for by a family member who speaks English but does not feel confident to call My Aged Care to find out more about aged care support and set up an assessment.

- a person with low literacy who is having trouble understanding the information that providers are sending and has a carer who wants to help them but the person does not give permission for the carer to be their representative due to fear of elder abuse.

Role of a care finder

Care finders support participants to interact with My Aged Care, be assessed for eligibility for aged care programs engage with local support services and provide ongoing check-ins to ensure participants continue to receive the support they require.

Care finders are also able to conduct assertive outreach and build relationships with local service providers and referrers (such as GP clinics and hospital staff).

Ongoing evaluation of the program

Australian Healthcare Associates are managing the ongoing nation-wide evaluation of the program. Recommendations from the first evaluation report include:

- identifying information needed to inform the next phase of care finder commissioning;

- providing additional guidance and training for care finders and the My Aged Care workforces on how to support those under 65 and people who are homeless or at risk of homelessness;

- working with the evaluator, PHNs and care finders to streamline activity reporting to improve data quality, and

- instigating regular communications to Services Australia, assessment teams and the My Aged Care call centre to help communicate who should be connected with the care finder program.

These recommendations have been taken into consideration in our approach to determining the key insights of this project and the recommendations contained in the report.

Upcoming reforms to the aged care system may have implications for the delivery of care finder

Two prominent reforms to the Australian aged care system are scheduled to come into effect from 1 July 2025: the Aged Care Act 2024 and the Support at Home Program.

- The Aged Care Act 2024 (the Act) will replace the existing Aged Care Act 1997 and aims to create a rights-based aged care system that puts older people at the centre of care and strengthen quality standards.
- The Support at Home Program will replace the current Home Care Packages (HCP) Program and the Short-Term Restorative Care (STRC) Program, while the Commonwealth Home Support Programme (CHSP) will also transition to the Support at Home Program no earlier than 1 July 2027. The aim is to provide a more streamlined and equitable system for in-home aged care.

The following considerations should be taken into account when considering what the future of care finder in Kilcoy may look like in the context of the reforms:

Increased complexity of care finder support required during transition

The simultaneous introduction of the Support at Home program and the new Aged Care Act may create a period of increased complexity for older people, their families, and service providers, including care finder organisations. Care finders will need to be well-informed about the new systems to effectively guide their clients through the changes.

Greater demand for at-home support

Under the Support at Home program, the separate funding tiers for Assistive Technology and Home Modifications are expected to increase the supply and accessibility of these supports, enabling more people to remain at home longer.

Higher costs for aged care providers

Under the Support at Home Program, the move towards capped service prices from July 2026 onwards could affect the profitability of some services, particularly in rural or remote areas where delivery costs are higher. This may potentially lead to some providers withdrawing certain services or choosing not to operate in those regions if it is not considered financially viable.

In terms of the Act, its shift to allocating residential care places directly to older people, rather than to providers, could incentivise providers to improve their services to attract consumers. However, it also removes the security of allocated places, which might impact the financial viability of some providers, especially in areas with lower demand such as rural and regional areas.

Furthermore, the Act's emphasis on strengthening quality standards could lead to higher quality services but may also increase operational costs for providers as they strive to meet higher standards. This may lead to some providers exiting the sector if they are unable to meet the new standards in a financially sustainable way.

In comparison, the Support at Home Program does recognise some of these financial challenges for providers and makes provision for a 'thin markets' grant program to support providers in rural and remote areas and those servicing diverse needs groups to support sustained service availability. Providers operating in rural, remote and/or specialised markets can also apply for additional funding to support their financial viability.

Less scope for innovative service models

The introduction of a defined service list under the Support at Home program will clarify the scope of services that can be funded. This may lead to a more standardised service offering across providers and potentially reducing variability. However, it may limit the capacity to provide tailored or innovative service models that fall outside the list.

Section 3: Key Insights

This section of the report is split into six sub-sections reflecting the overarching themes across the 25 key insights. These are

1. Uniqueness of the region;
2. Current services in the region;
3. Local referral pathways;
4. Ensuring quality service delivery where it is needed most;
5. Navigating to quality services and promoting choice in a thin market; and
6. Supporting the needs and preferences of older people in the region.

Uniqueness of the Region

This sub-section of the report presents 8 key insights to describe what the Kilcoy region looks like. This includes geographical information about the region's location, demographic information about the region's older population and health information about the needs of older people in the area.
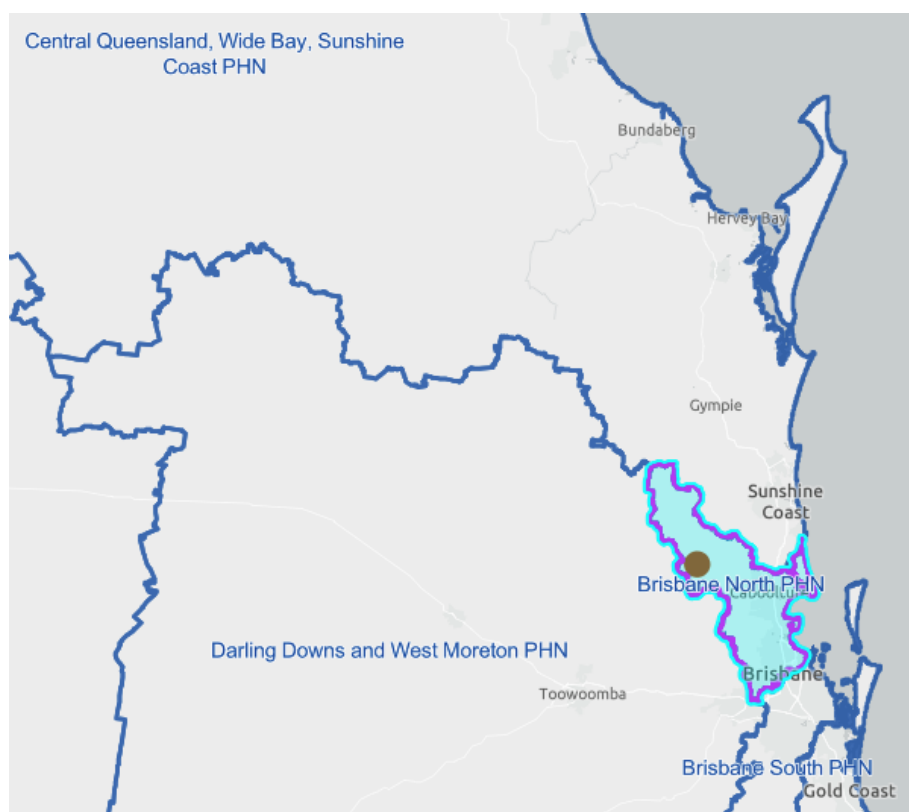
Insight 1: The Kilcoy region sits within the Brisbane North PHN catchment area but borders other PHNs.

The Kilcoy region as defined for the purposes of this project are the 12 local areas with '4515' postcodes, which includes Glenfern, Hazeldean, Jimna, Kilcoy, Kingaham, Monsildale, Mount Kilcoy, Royston, Sandy Creek, Sheep Station Creek, Winya and Woolamr.

These areas are all located within both Brisbane North PHNs catchment area and the Somerset Local Government Area (Somerset LGA). The Somerset LGA also covers locations in the neighbouring PHN catchment area of Darling Downs and West Moreton PHN (DDWMPHN). This means that the Kilcoy region is near to both DDWMPHN and Central Queensland, Wide Bay and Sunshine Coast PHN (Country to Coast PHN). People living in the Kilcoy region are less than 30 minutes drive from these two neighbouring PHN catchment areas. This is illustrated in **Figure 2** and **Figure 3** below.

Implications for care finder in Kilcoy: There is a need for care finder in Kilcoy to consider service supply across PHN borders and how to best support residents within the Kilcoy region regardless of administrative boundaries.

Figure 2: *Map showing location of Kilcoy (brown dot) within Brisbane North PHN's borders (turquoise and purple area) in relation to the borders of neighbouring PHNs*

Source: https://www.health.gov.au/resources/apps-and-tools/primary-health-network-locator/app

Brisbane North PHN Care Finder in Kilcoy: Consultation and Scoping – Final Report

Figure 3: Map showing location of Kilcoy (brown dot) within Brisbane North PHN's catchment area (pink area) and the Somerset Local Government Area (turquoise area).

Source: **https://www.health.gov.au/resources/apps-and-tools/primary-health-network-locator/app**
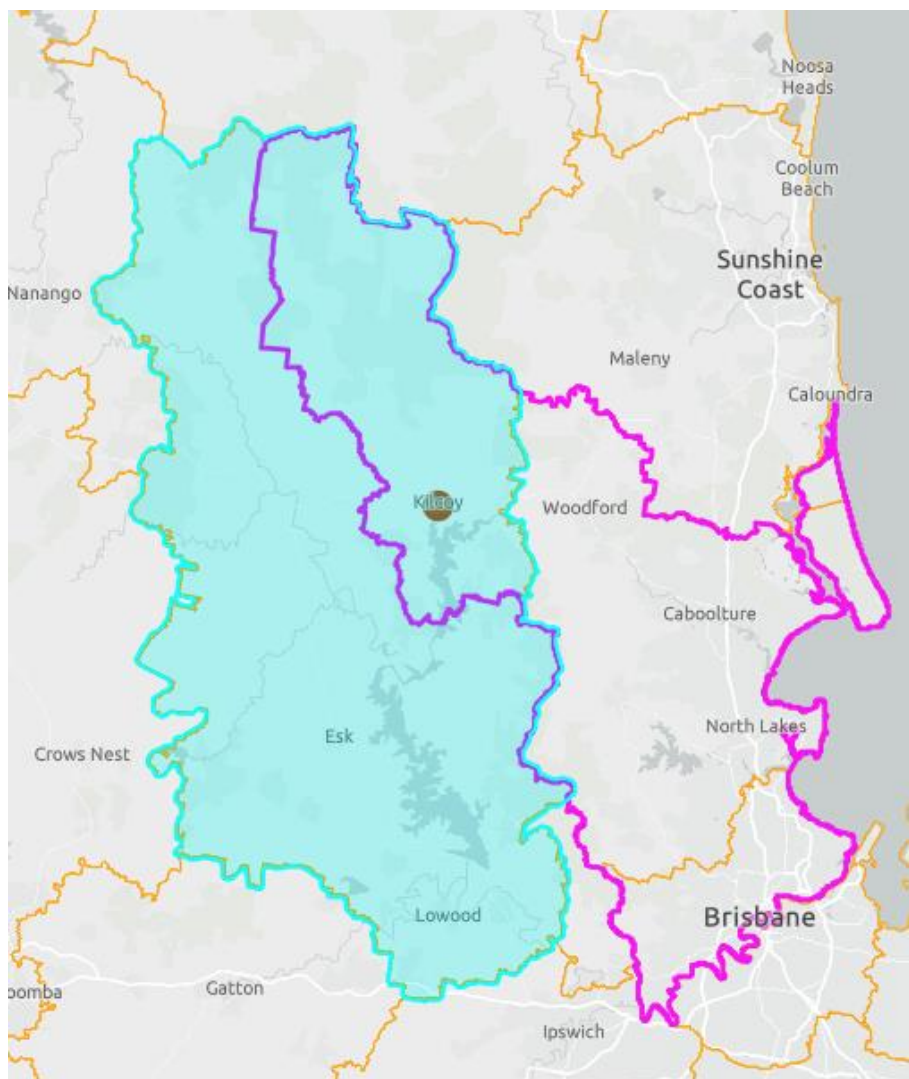
Insight 2: There is a perception that Kilcoy is fairly remote and isolated despite being relatively close to regional hubs.

While stakeholders have talked about Kilcoy being hard to travel to and from for services, it is located relatively near several more well-serviced areas.

For example, local hubs near Kilcoy include Woodford, Calbooture and North Lakes. Kilcoy is approximately 25km (20 minutes) from Woodford, 50km (40 minutes) from Calbooture and 70km (60 minutes) from North Lakes.

In addition, Kilcoy is also 85km (1 hour 10 minutes) from Sunshine Coast and 105km (1 hour 40 minutes) drive from Brisbane central.

Figure 4 shows the location of Kilcoy in relation to these regional hubs on a map of the region.

Implications for care finder in Kilcoy: There is an opportunity for care finder to help residents in the Kilcoy region make better use of services in nearby regional hubs if travel restrictions can be overcome (see below).

Source: https://www.google.com/maps/d/edit?mid=17JYzzjso-
8DgZB1YIhDeOYbDHngQ9ro&ll=-26.956561547742016%2C152.68340678265636&z=10
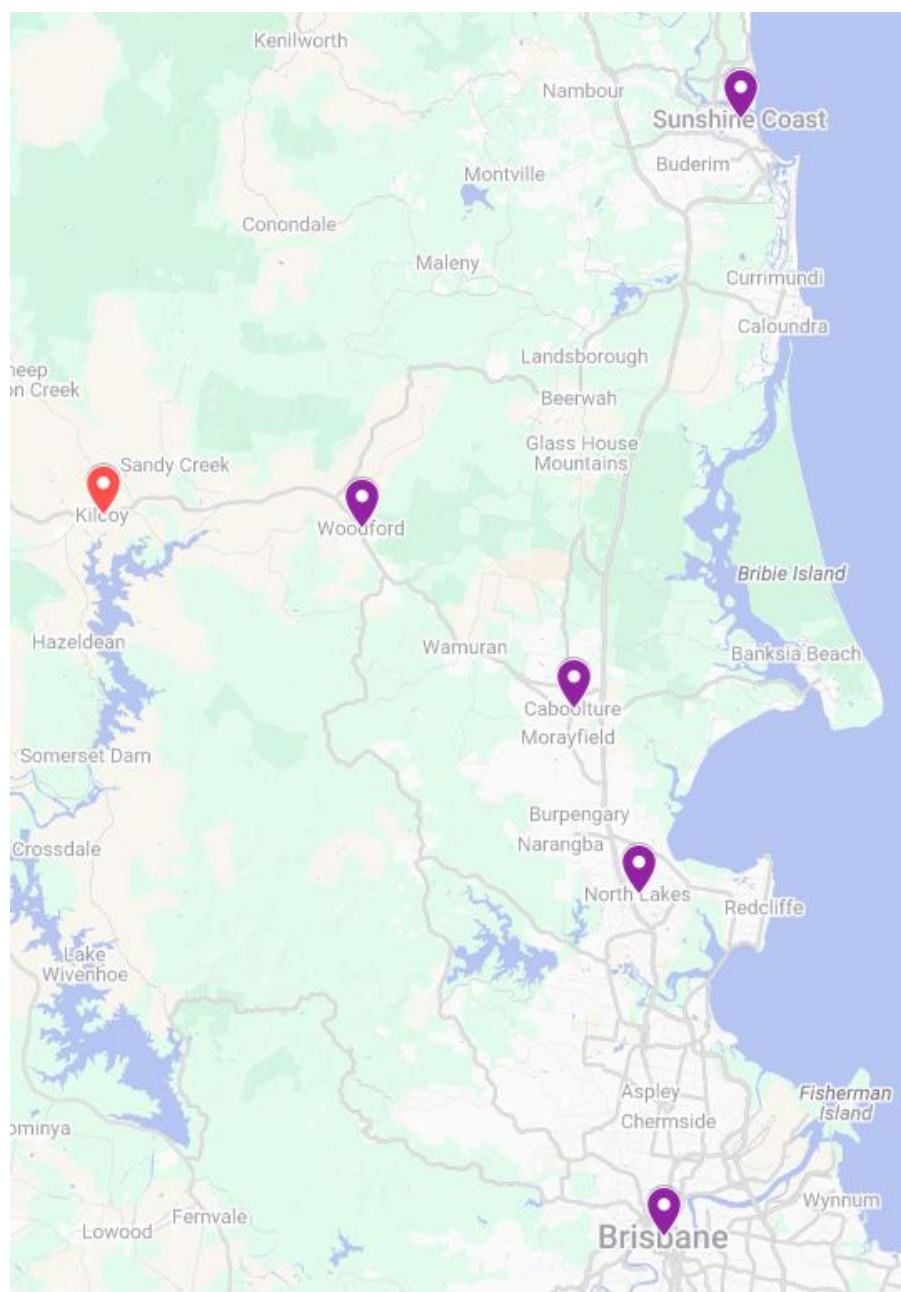
Insight 3: The Kilcoy region is home to a relatively large proportion of older people.

The Kilcoy region (defined as the 4515 postcode area) has a proportionally older population than average for Queensland.

According to the 2021 Census, there were 902 older people aged 65+ living in the 4515 postcode area (21% of the total population of 4,467 people). This is above average for the state as a whole (15.7%), and higher than rural areas of Queensland excluding major urban areas (18.5%). In 2021, the data shows a further 293 people aged 60-65 years; given the time period, the majority of these would now be in the 65+ years age group likely increasing the ageing profile of the region.

Figures 5 and **6** below show the older persons cohort in north Brisbane as a proportion of the total population in each SA2, and in terms of the total number of older persons. While the north-western part of the region (including Kilcoy) has a smaller absolute number of older people, largely due to its lower overall population size, the number of older people as a proportion of the overall population is relatively high. The

Brisbane North PHN Care Finder in Kilcoy: Consultation and Scoping – Final Report

challenges faced by older people in these areas may be further compounded by limited access to services compared to their counterparts in more metropolitan areas. Geographic isolation, fewer transportation options, and reduced availability of specialised health and social support services are likely to exacerbate the difficulties faced by older residents in these outer-lying areas. Further detail on this is provided in other findings contained within this Report.

Implications for care finder in Kilcoy: Population data suggests there is a high need for a care finder service in the Kilcoy region given the older population profile. There is also a need for care finder given the geographic isolation of Kilcoy and the impact this has on service provision and choice (which is discussed further below).

Figures 5 and 6: Geographic summary of the population aged over 65, by SA2, north Brisbane (Kilcoy shown in brown dot)
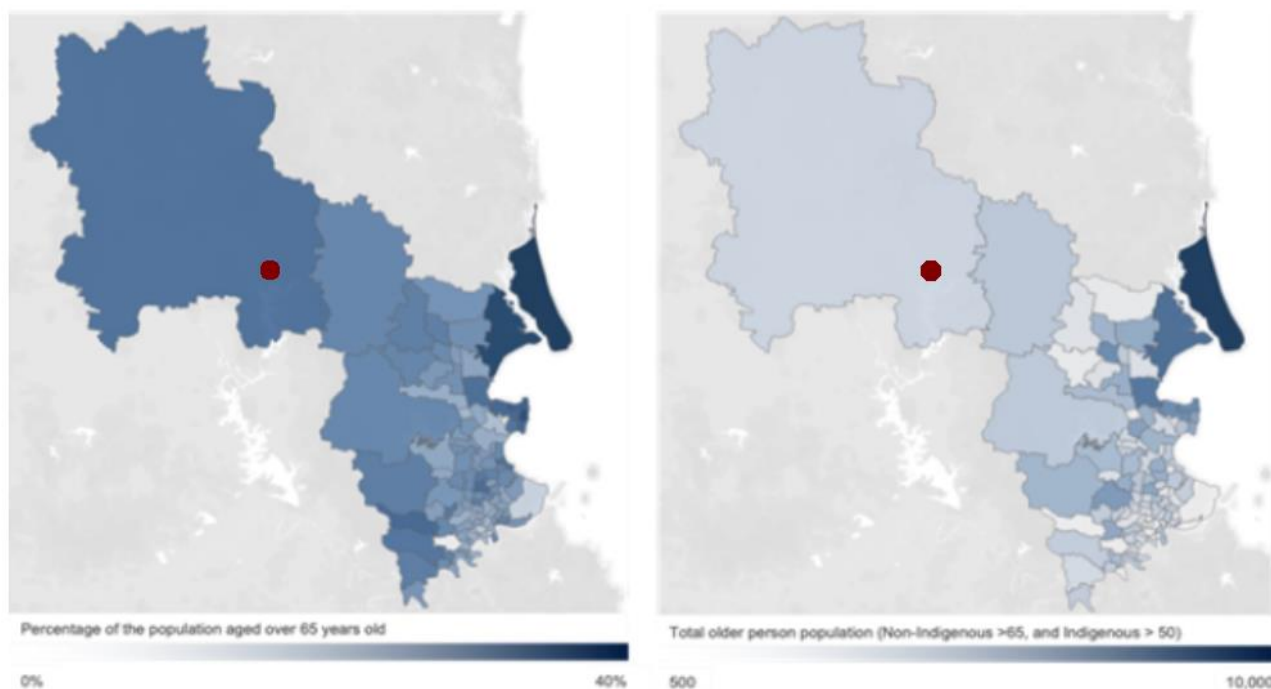
Source: Impact Co analysis of ABS estimated resident population data by SA2 from 2001 to 2023

Insight 4: The population of older people in the region is not particularly diverse.

The Kilcoy region does not have a large older Aboriginal and/or Torres Strait Islander population.

According to ABS data, only 1.5% of all people aged 50 years and over from the Kilcoy region (24 people) identified as Aboriginal and/or Torres Strait Islander (noting 144 people aged 50+ years did not state their Indigenous status). This is above the Australian average for this age group (1.35%) but below the state average (1.85%), and further below the average for rural areas of Queensland excluding major urban areas (2.8%). However, it is noted that there is a recognised general under-reporting of those who identify as First Nations Australians due to various factors including perceived and real discrimination, historical trauma, cultural safety and previous negative experiences with the health and aged care system.

Older persons living within the Kilcoy region do not generally come from culturally or linguistically diverse backgrounds.

While 24% of people aged over 65 years (198 people) were born outside Australia, their countries of birth were predominantly English-speaking countries such as the United Kingdom and New Zealand. In the broader Kilcoy region (defined as the Population Health Area of Kilcoy/Woodford - D'Aguilar), only 4.8% of people aged 65+ years (11 people) were born overseas in predominantly non-English speaking countries. This is lower than the national (19.5%) and state (10.4%) average, including the average for rural areas of Queensland excluding major urban areas (8.3%). Similarly, only 0.2% (4 people) of people aged 65+ years who were born overseas reported poor proficiency in English. This is lower than the national (5.4%) and state (1.8%) average, including the average for rural areas of Queensland excluding major urban areas (0.9%).

Brisbane North PHN Care Finder in Kilcoy: Consultation and Scoping – Final Report

However, the population in the region, as a whole, is more culturally diverse than the older cohort, with 7.6% (796 people) of the Kilcoy population born overseas in non-English speaking countries (compared to 4.8% of the older population). Consultation suggests that this is due to key settlements of particularly Filipino families who have settled into the area due to local employment opportunities, particularly from Kilcoy Global Foods (the abattoir and meat works).

There are only a small number of people who are at risk of, or who are experiencing, homelessness in the region.

Analysis of SA3 data on the wider Caboolture Hinterland region suggests that there are only a small number of people who are at risk of, or who are experiencing, homelessness in the region, with 51 people reporting this in the 2021 Census. While homelessness rates are on the rise across the Brisbane North PHN region, it is anecdotally understood that, within the last year, those residing at a local caravan park were moved outside of the Kilcoy local area.

The proportion of older people who identify as LGBTQIA+ is unknown.

No data is available on what proportion of the population within the Kilcoy region identify as LGBTIQA+. However, according to the ABS latest national estimates, on average across Australia 1.9% of people aged 65-74 years, and 1.4% of people aged 74+ years, identify as LGBTQIA+ (compared to 9.5% of those aged 16-24 years).

Implications for care finder in Kilcoy: This suggests that there may be less demand for specialist care finder providers for priority cohort groups than in some other areas within the Brisbane North PHN region. However, caution is recommended given the expected under-reporting of diversity and the need for a culturally appropriate and sensitive care finder service to screen for specific priority cohort needs.

Insight 5: The Kilcoy region is relatively socio-economically disadvantaged, but many people own their own homes.

ABS data from 2021 indicates that 48.8% (1,120 people) of people aged 65+ years in the broader Kilcoy region were on a low income. This is higher than the national (46.1%) and state (46.3%) average, including the average for rural areas of Queensland excluding major urban areas (46.5%). Interestingly, the PHIDU 2021 data suggests that while there is some socio-economic disadvantage, those under mortgage stress within the Caboolture Hinterland area was only 20.3%, the lowest level of mortgage stress of any SA3 in the Brisbane North PHN region. This may be due to lower house prices in the region as well as some longstanding residents, with 40.1% of residents owning their home outright, compared with 34.9% who have a mortgage.

The Somerset Local Government Area had a SEIFA Index of Relative Socio-economic Disadvantage (IRSD) of 962 (based on an Australian score of 1000), where lower index scores represent higher levels of disadvantage. This is lower than the state (997) index, including the index for rural areas of Queensland excluding major urban areas index (981). Within the Brisbane North PHN catchment, Kilcoy falls within the Caboolture Hinterland SA3, which has the fourth lowest SEIFA rating of the 19 SA3s within the Brisbane North PHN catchment (with a rating of 974), with an average across the Brisbane North PHN of 1029. This further indicates a level of socio-economic disadvantage for Kilcoy residents.However, the SA3s of Bribie-Beachmere, Caboolture, Strathpine and Redcliffe are all more disadvantaged than those in the Caboolture Hinterland region.

Implications for care finder in Kilcoy: This suggests that while there is a level of socio-economic disadvantage in the region, there are a larger proportion of residents who own their own home than the average across the Brisbane North PHN region. This is particularly significant given the assets and income testing that is applied for My Aged Care and pension assessments. It alsoaligns with anecdotal reports that there are some older people who are financially disadvantaged but may have assets that require them to pay for health and aged care services (particularly where they live on larger acreage properties). This challenge is discussed further below.

Insight 6: Older people in the Kilcoy region are not necessarily more isolated and disconnected than average for older persons.

The proportion of older people in Kilcoy who are living alone is lower than average. 18% of older people aged 65+ years (163 people) were living on their own in the Kilcoy region. This is lower than the national (24.8%) and state (23.5%) average, including the average for rural areas of Queensland excluding major urban areas (23.1%). In the broader Kilcoy region, 1.7% of people aged 65 years and over (53 people) are living in 'triple jeopardy', which refers to cases where residents are living alone; with disability and on a low income. This is lower than the national (2.7%) and state (2.4%) average, including the average for rural areas of Queensland excluding major urban areas (2.3%).

25.4% of people aged 65 years and older in the Kilcoy region (584 people) were living without internet access in their home. This is lower than the national (25.8%) average but higher than the state average (23.2%), including the average for rural areas of Queensland excluding major urban areas (24.4%). A higher proportion of older people live without internet access than the general Kilcoy region, noting that 17.9% of Kilcoy residents live without internet access from their homes. Stakeholders also reported that mobile phone reception can be an issue, especially for residents living outside of the township of Kilcoy.

Implications for care finder in Kilcoy: This may suggest that a local care finder service may need to consider wider factors than just living alone in terms of eligibility, particularly as it is understood that a lot of those who live with spouses over 65 years may still be more vulnerable due to the combination of physical and cognitive capacity of the couple, and other factors including internet and mobile access. In addition, there may need to be more varied approaches to marketing and communication of the care finder and wider health and aged care services, including through community noticeboards and the library. (It should be noted that Somerset Regional Council do provide a listing of the local health and aged care service providers and their contact numbers at the front of the Kilcoy IGA).

Insight 7: Many older people in the Kilcoy region have long-term health conditions.

According to the ABS 2021 Census data, the majority (64%) of people aged 65 years and over in the Kilcoy region stated they had one or more long-term health conditions (535 people out of the 840 older people who provided data). The most common types of long-term health conditions among people aged 65+ years were arthritis, heart disease, diabetes and cancer. For the oldest age group in particular aged 85+ years, this also included dementia.

While there is limited data available on the health conditions of older people specific to the Kilcoy region, assumptions can be drawn based on the AIHW's national data about older Australians. In terms of the burden of disease, according to the AIHW in 2023, the leading causes of fatal and non-fatal burdens of disease for people aged 65 and over were cancer, cardiovascular diseases, and neurological conditions, followed by musculoskeletal disorders, and respiratory diseases. This is broadly aligned with what the Census data shows for the Kilcoy region. More specifically, according to AIHW's data, dementia, coronary heart disease and chronic obstructive pulmonary disease were the leading specific causes of burden for people aged 65 and over in 2023, followed by lung cancer, stroke and other musculoskeletal disorders.

AIHW data shows that in Australia in 2022, the median age at death for all people was 80 for males and 85 for females. According to the Australian Bureau of Statistics (ABS) National Health Survey (NHS) 2022, an estimated 3 in 4 (74%) people aged 65 and over reported their health as good, very good or excellent. In 2022, the leading cause of death for people aged 65–84 was coronary heart disease, while for people aged 85 and over, dementia including Alzheimer's disease was the leading cause of death. In 2021–22, 1 in 3 injury hospitalisations involved people aged 65 and over.

Implications for care finder in Kilcoy: This suggests a need for care finder to connect older people in the region with long-term health care that would help address their long-term health conditions, such as heart disease. The data also suggests a particular need for care finder to support the oldest cohort (aged 85+ years) to connect with aged care services that could help mitigate their risks from dementia. If care finder can help connect older people with more preventative services, this may help mitigate the risk to older people of injury hospitalisations.

Insight 8: The intersection of the disability and aged care sectors need to be considered to meet the needs of residents in Kilcoy.

According to the ABS Survey of Disability, Ageing and Carers (SDAC) 2018, half (50%) of people aged 65 and over across Australia had disability. The national rate of disability increased with age, rising from 36% of people aged 65–69 to 85% of those 90 and over.

In the Kilcoy region, 18% of people aged 65 years and over (389 people) had a profound or severe disability (including those living in long-term accommodation). This is lower than the national (18.4%) average but higher than the state average (17.4%), including the average for rural areas of Queensland excluding major urban areas (16.9%). However, in comparison, 13.3% of people aged 65 years and over (288 people) had a profound or severe disability and were living in the community. This is lower than the national (14.3%) and state average (13.9%), including the average for rural areas of Queensland excluding major urban areas (13.4%). This suggests that a relatively high proportion of older people – with a disability live in long-term accommodation rather than in the community.

In terms of need for assistance, 21% of older people aged 65 years and over in the Kilcoy region (151 people) indicated a need for assistance with core activities. In many cases, older people support other older people, with 100 people aged 65+ years saying they provided unpaid assistance to a person with a disability, health condition or due to old age.

Implications for care finder in Kilcoy: This insight highlights the demand for home care support for those aged over 65 years. It also highlights the need for a care finder service that is able to understand the transition between the NDIS and My Aged Care systems, particularly if a community member permanently moves into a residential aged care home.

For home care supports, specifically, the care finder will need to provide support for a community member if they choose to transition from the NDIS to services under the My Aged Care system as this may have implications on the available service providers as well as funding package amounts. Given the NDIS is not means tested, it has been suggested, anecdotally, that the NDIS provides more funding and provide access to wider number of service providers.

Current services in the region

This sub-section of the report presents a key insight relating to the availability of services in Kilcoy and what this means for the role of a care finder in the region.

Insight 9: There are limited local service delivery options, particularly for in home care, occupational therapy and home and lawn maintenance services. These service delivery gaps make the role of a care finder more challenging.

Through desktop review and conversations with regional contacts and service providers, the below maps (**Figure 7** and **Figure 8**) have been developed to demonstrate the service landscape of the region, in terms of where Kilcoy sits within various administrative borders, and what physical services are based in Kilcoy.

Table 2 details local services, categorised by proximity to Kilcoy and type of service on offer.

This is followed by a more detailed explanation of the availability of specific services.

Figure 7: Regional borders
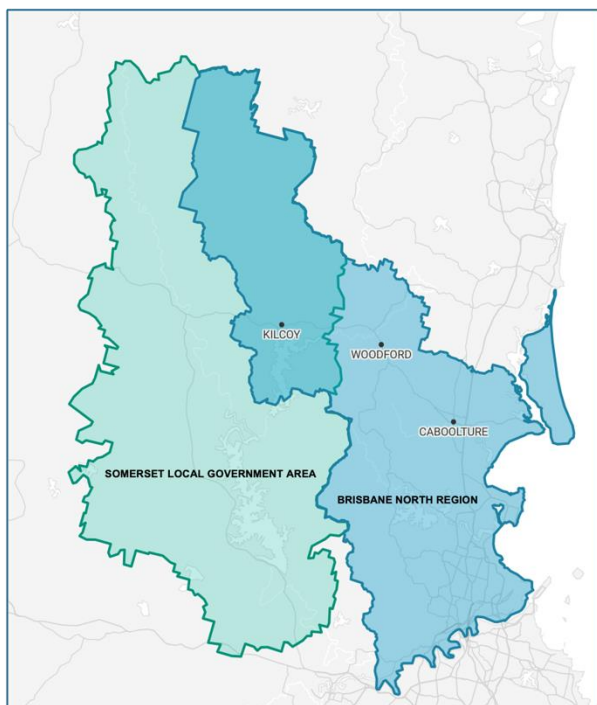
Figure 8: Services in Kilcoy
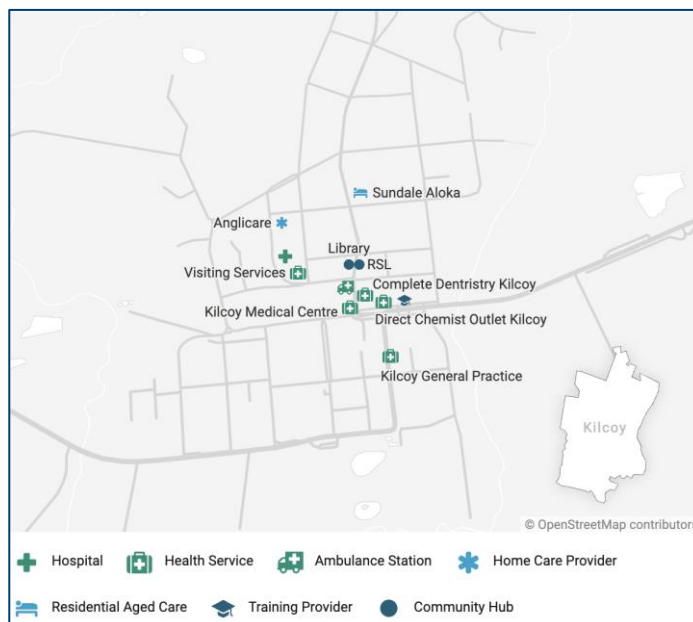
Table 2: A list of local services, categorised by proximity to Kilcoy and type of service.

Kilcoy-based Services	
Provider	**Description**
Care Coordination	
Anglicare	In home care services (including personal care and nursing support)
Home Care	
Anglicare	Aged Care and home care support
Mental Health	
Stride	Adult mental health service (Weekly)*
True Blue	Counselling service (Weekly)*
Nutrition and Meals	

Kilcoy Meals on Wheels	Regular, volunteer run meal delivery service
Anglicare	Meal delivery service
Oral Health	
Complete Dentistry Kilcoy	Local dentist
Metro North HHS	Dental Van (twice weekly)*
Community and Support Groups	
Kilcoy Library	Community hub. Hosts many social groups, including a sewing group and a cards club.
Kilcoy RSL	Community hub
Friends of Kilcoy Cemetery	Community group that maintains the local cemetery
Kilcoy Cancer Care Group	Community group that provides informal support to cancer patients and their networks.
Training Providers	
Aspire to Succeed	Certificate training courses, based in Caboolture but have a Kilcoy office.
Transport Services	
Translink	Public Bus. Runs twice a day, only Saturday and Sunday outside of school terms.
Pursers	Bus service. Runs once a day on Monday, Wednesday and Friday.
Other	
Caboolture Neighbourhood Centre	Financial Resilience officer
Services Offered in the Brisbane North Region (inc. Kilcoy)	
Provider	**Description**
Home Instead Senior Care	In home care services (including personal care and nursing support)
Department of Veterans Affairs	Care coordination services, including travel support. Also provide funding to eligible population.
Footprints	Aged Care Volunteer Visitors Scheme
ADA Australia	Contracted by DHAC to provide aged care advocacy services to eligible participants.
Somerset Assist	Care coordination service, offer some home care services (level 1 and 2 packages)
Providers Based in Woodford Servicing Kilcoy	
Provider	**Description**
Quad Care	Occupational Therapy Services
Deception Bay Neighbourhood Centre	Certificate training

*Visiting Service

The following provides more detailed insights in relation to the availability of specific services:

- **Cleaning services** – It was noted that there are a few providers of home care packages within the region who have access to cleaners who operate within the region. However, this was recently strengthened through a training course from Woodford and an event day that was held in the region,

which sought to engage both the target cohort and the potential workforce who could provide services to older persons.

- **Gardening services** – It was noted these were a critical service offering for Kilcoy residents due to them living on acreage or larger blocks that have bushland and may be more subject to snakes and other access issues if gardening maintenance is not undertaken. This was seen as especially difficult to source given there were no gardening maintenance suppliers identified in Kilcoy. It was also noted that where there is a need for personal care and gardening, usually the participant will prioritise personal care support over the need for gardening maintenance (even where this is also needed).

- **Personal care services** – The need for personal care workers for support with showering and usually for social engagement was highlighted, including taking older persons to either social and community events or to do grocery and other shopping. It is understood there are three main suppliers of this service in the region: Anglicare, Bluecare and Somerset Assist. While the capacity for this within Kilcoy was boosted with recent training, some service providers often can only provide this service twice per week despite it being required more frequently.

- **Meals** – It is noted that nutrition support and meal delivery can be difficult to access. Anglicare provides a meal service for their clients with aged care packages, however this is not available more broadly. Kilcoy Meals on Wheels delivers to Commonwealth Home Support Programme (CHSP) clients but is unable to deliver to clients on Home Care Packages. Somerset Assist has, in some cases, stepped in to assist clients to access frozen meal delivery (such as Lite 'n' Easy) despite not formally offering a meal delivery service.

- **Health-specific services** –
  - Allied health services:
    - Occupational therapists (OTs) are often needed for home visits to assess the need for rails and hoists to help prevent falls, and that this can be very difficult to source. It is understood the only OT to service the region has recently started maternity leave and the only other available service is only provided via telehealth. One stakeholder noted that the upcoming changes to aged care service delivery may enable the provision of rails and hoists without requiring a home assessment from an OT, which may help with this challenge. Quad Care (based in Woodford) advertises a home-visit OT service in Kilcoy, however there is limited detail available regarding their operation as a provider as part of My Aged Care.
    - Similarly, while the need for a social worker may not be common, care finders have noted that, within the region, the only social worker is employed by Kilcoy Hospital, which means this service is unable to be provided.
    - Psychology services were noted to be particularly difficult and not provided within the region, requiring people to travel to Caboolture, Maleny or North Lakes for this service. However, it is understood some of this may be provided through telehealth consultations.
    - Podiatry services were previously supported in Kilcoy, with a podiatrist travelling in from Woodford. However, more recently, he has stopped providing the service in Kilcoy and older people must travel to him for his services instead.
  - Wound care management was raised by both GP practices as a key need for older people in the region. Where daily dressings were required, this often was not effectively supported by Anglicare or Bluecare who may only be able to visit twice per week. It was noted that for the management of some wounds, more expensive dressings and specific complex wound management care was required, which is not provided in the region.
  - Medical specialist services are not available within Kilcoy. Stakeholders noted medical specialist services are most commonly used from Caboolture, North Lakes and, in some cases, the Royal Brisbane and Women's Hospital or the Princess Alexandra Hospital.

Implications for care finder in Kilcoy: The service landscape in the region is quite limited and some concerns regarding travel time and willingness of more centrally located services to visit Kilcoy has been identified as a key issue. A care finder service commissioned for Kilcoy may have to play a role in service coordination and finding innovative ways to achieve efficiencies to improve the service landscape.

Local referral pathways

This sub-section of the report presents three key insights about the local referral pathways, including experience of existing care finders, preferences of older people in the community and the need for assertive outreach.

Insight 10: Care finders are not seeing Kilcoy residents being referred into their service.

Existing care finders operating within the Brisbane North PHN region reported that they had experienced no or very few Kilcoy residents referred to be a part of their service over their period of operation.

It was noted that the typical referral pathways, which tend to be the local hospital, GP clinics, community-based referrals, other care coordination services (such as Team Care Coordination), and My Aged Care, were not resulting in referrals from the Kilcoy region. Footprints and Micah noted a very small number of Kilcoy residents referred to their service and these were reported as being referred by Caboolture Hospital or, in the case of Footprints, due to some assertive outreach undertaken in the area for a short period of time.

The Team Care Coordination service (which is usually oversubscribed) refers to care finder for more vulnerable cohorts after its 12 week duration but noted that a lack of referrals from Kilcoy Hospital was surprising as they tended to get a large number of referrals from all other hospitals across the Brisbane North region and were very well known by clinicians having been in operation for over 20 years.

When speaking with GP practices and wider service providers within the region, it is understood that part of the reason for this low referral rate into the care finder service may be due to GP practices adopting a preference to make referrals to local allied health services, with the perception that services, such as care finder, which are based outside of Kilcoy tend to not stay and not be sustainable. This is creating a hesitancy from GP practices to refer to services that, for workforce or travel reasons, are perceived to not provide an effective service or which will not remain in the area due to viability and volume.

'If you can demonstrate that this is a viable and sustainable service in the region, people will come. But there have been a lot of services, which have started within the region and are gone within 6 months' – Service provider in interview.

Implications for care finder in Kilcoy: This feedback suggests the need to strengthen local referral pathways into care finder, including from Kilcoy hospital, GP practices in the region and wider health and aged care community-based referrals. This may include providing relevant clinicians with improved awareness about care finder, its target cohort, and the services it provides.

Insight 11: A care finder for Kilcoy will need a strong emphasis on assertive outreach to support increased awareness and referrals.

It was identified that there will need to be strong word-of-mouth and local network-based marketing and communication of any specific care finder service for Kilcoy due to low numbers of current referrals.

It is expected this will require a much stronger emphasis on assertive outreach, which is a similar approach adopted by priority cohort care finder services (such as those identifying as LGBTIQA+) and will take some time to build the client base. Assertive outreach pathways that have worked for other programs include linkages with local community groups, participating in event days within the region to promote the service with the local community, and talking more broadly to older persons who may know of people who fall within the more vulnerable cohort who are the target group of the care finder service.

Promoting care finder as a service that supports older people to stay in their home longer was raised as a suggestion for improving uptake by one stakeholder. There can be a misconception when talking about linking with aged care that it is about promoting residential aged care services, which tends to trigger disengagement amongst older persons who do not want to leave their own homes.

For a limited period, Footprints invested in assertive outreach in the Kilcoy region, with some success with some additional short-term funding. This was relatively successful in promoting the care finder service, particularly as the care finder who helped with this lived close to the Kilcoy area. Many in the community spoke positively about her approach to engagement and ability to build trust in the community. She would

make herself available weekly at a local café and was connected with the Kilcoy Older Persons Network being led by Somerset Regional Council.

'Assertive outreach takes a lot of time to build momentum, establish community connections and build reputation, this will be quite different from the mainstream care finder service model' – Specialist care finder service provider.

Implications for care finder in Kilcoy: A care finder service targeting Kilcoy residents will need to initially focus on assertive outreach as the primary means of identifying participants for care finder. This may mean the care finder participant targets set for Kilcoy need to be realistic, especially during the first 6-12 months of service delivery as word-of-mouth referrals and its reputation are being established. Targets also need to be reflective of the older cohort population size and recognise the limitations in wider care coordination and navigation services available to the region.

Insight 12: A move to more online communications (like community Facebook groups) has left some older people in Kilcoy feeling disconnected and unsure where to find information about services available to them.

It was noted that there has been a community shift to more online methods of communication in recent years. Although this was seen as a good thing for improving social connection and informal support channels for some, some older people in Kilcoy felt there was no longer clear, trustworthy information available regarding available local services or supports.

Beyond assertive outreach activities, a care finder service in Kilcoy would need to ensure information about the service is available and shared in various platforms, including existing forums older members of the community seek out and trust as well as more contemporary communication channels (such as the 'Kilcoy Love My Town' Facebook group). Community noticeboards and letter box drops were suggested as ways that older people in the community find out about services and events in the town. The Kilcoy Library, RSL and Bowls Club were also seen as good community hubs frequented and trusted by older members of the community.

Implications for care finder in Kilcoy: A care finder service for Kilcoy would need to tailor communication methods to align with community preferences. This might include, for example,building trust and rapport with community hubs,such as the library, to connect with more vulnerable members of the community.

Ensuring quality service delivery where it is needed most

This sub-section of the report presents four key insights about ensuring the care finder service is able to meet the needs of the community, based on information shared by those in the region. This includes the importance of building trust and rapport within the community and develop the capacity of other local services.

Insight 13: Prospective care finder participants can be more challenging to identify as they are more likely to be socially isolated.

Current care finder service providers noted the challenge in delivering care finder in smaller communities, such as Kilcoy, as the target cohort (i.e. those with intensive support needs) can be difficult to identifybecause:

- they live at home alone without support and may be socially isolated;
- have limited access to travel;or
- are vulnerable in some other way such as being of a lower socio-economic status, or being in unstable or unsafe housing conditions (such as hoarding).

This tends to mean they are less involved in the local community and, as such,less visible among the community. The care finder target cohort may also be resistant to support, or distrustful of existing support networks. Given they are less likely to be connected within the community, the target cohort may be more difficult to find to refer to the care finder service.

One stakeholder also noted that while the care finder guidelines specify an eligibility criterion, his threshold could be interpreted slightly differently across care finder service providers. Given the demographics of Kilcoy, this should be clearly defined and conveyed to wider service providers. Forexample, a Kilcoy specific care finder service may include those with some spousal support but who have no transport options and, therefore, remain isolated from accessing the care and support they need.

'You have to understand care finder isn't for the older persons who are easiest to find and engage with in the community. By their very definition they will be harder to find.' – Care finder service provider

Implications for care finder in Kilcoy: Clear communication and guidelines on eligibility will be important for referral organisations to understand and for the care finder service in Kilcoy to clearly define. The target cohort will, by their definition, be harder to find, and thought needs to be given to where and how they might interact with the wider community and health and social services so that they can be identified and referred for care finder support. An example of this will be hospital referrals where an incident or event occurs and then the hospital-based social worker or OT,on discharge, note that they will need home care supports and may require an aged care assessment. Ideally, identification will happen before this point but it may assist in providing the care finder service when it is needed most.

Insight 14: There is a need for local care finders, with an ability to build trust and rapport.

Many stakeholders have flagged that residents from the Kilcoy region have, for the most part, a preference for receiving services from someone they know and trust. One stakeholder noted that this will mean being consistently visible in the community at a certain place (such as a café on a Tuesday), while others mentioned the preference would be for a care finder who is a local resident. All care finders have noted that it takes more than the first visit to understand needs and set goals because disclosure of what is really happening and needed does not occur until trust is established.Some priority stakeholder groups, such as the Queensland Council for LGBTIQA+, noted that their target cohort often prefer to not receive care from a local resident due to concerns about wider discrimination from older people in the town (if they are aware of their LGBTIQA+ status). As such, there can be a strong need for privacy, which is better serviced by someone from outside the community.

These two pieces of feedback suggest a need to balance the desire for local knowledge and networks, with the privacy needs of more vulnerable older people in the community.

'You often learn a lot from going to the participant's home about how well they are coping, and therefore the services that would best assist them. You don't get this from online engagement as people will say they are ok, and often not seek help where they need it.' – Local aged care service provider.

Older people in the Kilcoy community expressed a reluctance to ask for help and to manage as best they could for as long as they could before reaching out to family or service providers. All consumers who participated in the focus groupsnoted that admitting the need for support can be very difficult and feel very vulnerable. This highlights the importance of a care finder in the region building trust within the community – even beyond those enrolled in the program.

'I don't want to be a burden' – Local resident

Implications for care finder in Kilcoy: There is a need to balance the need for a care finder with local knowledge, networks and trust with privacy and disclosure considerations. This may impact how the service is commissioned, along with the prioritisation of specific workforce attributes of the care finder, such as preexisiting local networks or a demonstrated ability to build trust and rapport with vulnerable cohorts.

Insight 15: There is a need to build the capacity and capability of the community to provide local services.

One stakeholder noted that given the lack of wider services to refer to in the Kilcoy community (as identified in the sub-section relating to current services in the region), there may be a need for the care finder to help in building community capacity to care for older people. This may include supporting and linking those in the community with personal care worker certifications or training, connection to businesses that may not be aware of the demand in the local community that they could service, and in supporting a wider health and older persons network of businesses and organisations within the region.

Some examples of linking with local qualifications and training providers include Aspire to Succeed (Caboolture based with a Kilcoy office), Collaboration Learning (Caboolture),and Deception Bay Neighbourhood Centre who have run TAFE qualifications in Woodford. A key avenue in which to promote community capacity building may be at the Kilcoy Older Persons Network, which is run through and chaired by the Somerset Regional Council and meets once a month.

'We have found that, in more regional and rural towns, the care finder service has to help with capacity building within the community in order to strengthen the options and services available for referral' – Care finder service operating across Queensland, and within the Brisbane North region.

Implications for care finder in Kilcoy: There will be a need for the care finder to build community capacity to support older persons and make business connections to strengthen the number of service providers who deliver services in the Kilcoy region. This may be easier in high-need areas such as cleaning, gardening services and personal care (such as help with showering, groceries and social connections) but also may be important to consider for more specialist health and aged care needs, such as social workers, occupational therapists, podiatrists and psychologists.

Insight 16: There is a need to manage care finder burnout and disillusionment.

Some care finder service providers noted that there were some initial issues in the retention of care finders. It was noted that being a care finder requires a deep understanding of the aged care pathways and system. Workforce burnout can occur because staff can get disillusioned due to the wait times of an aged are assessment (up to 2 months) and subsequent access to alevel 3 or 4 home care package (where the wait can be up to 12 months), for example. Multiple care finder providers noted that their clients passed away before being able to access the home care support they needed. Trauma-informed approaches, a wider care finder support network, a caseload that takes into account complexity, and an ability to refer to other care finders were all raised as being important in managing workload and workforce burnout.

'We had some initial trouble with staff retention in care finder and needed to ensure both the right personality in terms of being approachable, knowledge about the aged care system, and a level of resilience and care in not overstepping the role of the care finder' – Care finder service operating across Queensland, and within the Brisbane north region.

Implications for care finder in Kilcoy: There will need to be considerations as to how the care finder program in Kilcoy connects in with the wider network of care finders in the Brisbane North region to share learnings and prevent feelings of isolation. This may be important to the sustainability, workforce retention and how the health and wellbeing of the individual care finder will be supported to ensure sustainability and support

Navigating to quality services and promoting choice in a thin market

This sub-section of the report presents five key insights about navigating the Kilcoy market where there is limited choice, and improving the perception of, and access to, health care services in the region.

Insight 17: There is a need to overcome service provider challenges and 'referral to nowhere'.

One of the major concerns highlighted by all stakeholders in the region is the limitations in servicesavailable to meet the needs of older persons. As noted earlier, stakeholders noted that the most frequent demand for aged care package services was for cleaning, personal care and gardening services, and that even these can be very difficult to source across the region. The services currently available will need to be strengthened to meet increasing demand in the region.

More significant challenges occur for older persons being assessed as requiring higher needs (i.e. level 3 or 4 home care packages), which require more frequent personal care (for meals and showering) and access to allied health professionals (such as social workers or occupational therapists). This challenge in service provision is due to significant workforce shortages in the wider region in being able to source allied health professionals and the travel time associated with providing care in Kilcoy. Some had noted that when they sought a social worker, the only one within the region worked at the Kilcoy Hospital and couldn't provide care unless they were a hospital inpatient. Others noted that, while telehealth may be an option for some allied health and speciality medical services, OTs need to travel to the region to conduct home assessments to support rails, hoists and toileting supports.

'We can't find OTs [occupational therapists] in the Brisbane region, so our chance of finding them in Kilcoy is almost impossible' – Care finder provider servicing Brisbane North region

Implications for care finder in Kilcoy: It will be important to identify a range of service providers where service demand is more prevalent across the Kilcoy region. For example, for services such as gardening, cleaning, and personal care, community capacity building and business connections from the wider region could strengthen high-demand services to improve choice and capacity within the region. This may also include coordinating needs for multiple people so that there is sufficient demand to warrant a whole day visit to the region for those outside of Kilcoy.

For less common services that are not available within the region, further innovative solutions may need to be explored such as MOUs with the Kilcoy Hospital or Sundale Aloaka Kilcoy Care Centre (and the forthcoming Aliria retirement village), which may allow for a pooled approach to provide access to care provided by social workers, psychologists and occupational therapists, or telehealth-based services that might be facilitated by the care finder.

Insight 18: A care finder in Kilcoy will need to build robust referral networks to ensure eligible populations are linked in with wider care finders managing priority cohorts.

The need to ensure that any care finder service is able to refer to priority cohort care finder services, including the Queensland Council for LGBTIQA+, World Wellness Group and IUHU for those identifying as LGBTIQA+, culturally diverse and or as a First Nations Australian, was highlighted as important by consulted stakeholders. This will require the commissioned care finder provider to appropriately screen and refer to these services, and to also ensure that they are providing a place where people feel culturally safe in identifying these needs, noting that the older generation may be particularly vulnerable to discrimination from their peer cohort and may be reluctant to identify as one of these priority cohorts due to historical trauma. Aligned with the key insights identified earlier in this Report, care finders who support these priority cohorts all noted that data on the demographics of the region will significantly under-report these priority cohorts.

It was also noted that sometimes linking to religiously affiliated health and aged care services may not be appropriate for many in this cohort due to historical events that may have led to trauma and perceptions of discrimination.

Implications for care finder in Kilcoy: There will be a need for the commissioned care finder provider to demonstrate how they will provide a culturally safe environment and seek to provide referrals to other care

finder services that manage priority cohorts, particularly those who come from culturally and linguistically diverse backgrounds, identify as First Nations and who may identify as LGBTIQA+. This will also include maintaining a close relationship with the wider network of care finder providers to ensure there is choice for local residents so that it can best meet the needs of the Kilcoy population.

Insight 19: There is a need to consider the local reputation of health and aged care providers when referring clients.

Within a small community, such as Kilcoy, the reputation of health and aged care services is critically important. However,consideration needs to be given by care finders to bringing a level of objectivity when making decisions about which services to refer on to.

Engagement with consumers and some of the health and aged care service providers often elicits comments about negative experiences with health or aged care services within the region. This may potentially lead to the care finder providing referrals to what are seen as higher quality services or services that support a better consumer experience.

However, some consideration needs to be given in providing a level of objectivity and acknowledgement towards the workforce challenges of service providers, ensuring consumers have choice, and preventing bias in connecting them to services. In some cases, it may be difficult if there is limited choice in service providers and there has been a negative experience of the service. This may require consumer advocacy from the care finder rather than referral to a new service.

Implications for care finder in Kilcoy: While the care finder program will need to refer where possible to services with a reputation for high quality care and reduced waitlists, consideration will need to be given to ensure consumer choice as well as preventing unwarranted bias in referral networks. In addition, for services where there is limited choice, the care finder may need to play more of an advocacy role where they have limited ability to transfer consumers to another service provider.

Insight 20: The boundary intersection of Brisbane North, Darling Downs West Moreton and Country to Coast can cause service availability issues and can be frustrating to older people in the community.

Stakeholders noted that the wider region outside of Kilcoy is often underserviced due to the boundaries of the PHNs and Health and Hospital Services(HHSs), which limit service provision and care. For example, while Kilcoy is within the Brisbane North PHN boundary, neighbouring areas such as Esk are covered by the Darling Downs West Moreton PHN in the region to the west, and areas such as the Glasshouse Mountains are within the Country to Coast PHN border to the north.

Implications for care finder in Kilcoy: There is a reported black spot in service provision of health and aged care services in the wider region that encompasses both the Darling Downs West Moreton PHN and Country to Coast PHN boundary. In the immediate term, this may impact on the available services that can be provided to older persons based on their residential address and need to be considered by the care finder. There may also be opportunities for partnership arrangements with some service providers to service the larger region across these boundaries to meet the wider health and aged care needs.

Over the longer term, consideration may be given to expanding the Kilcoy care finder service to the wider neighbouring region given the similar challenges they also face, noting this would need to be done in partnership with other PHNs.

Insight 21: There is a need for longer term contracts that support consistency and continuity in service delivery.

All consumers engaged in focus groups noted that services in the area tend to be "ever changing", which makes access and awareness difficult. This was not only limited to turnover of staff on a regular basis but, according to consumers, also includes the process to access services, operating/service delivery times, and the specifics of the service offering. There were also various instances described where a perceived 'good' service was offered in the region but was often discontinued.

This contributes significantly to consumer fatigue and mistrust. Consumers also noted this was particularly challenging for residents living with dementia and their care givers. This mistrust and confusion from community results in service providers having difficulty establishing a strong client base in a short period of time. **Implications for care finder in Kilcoy**: There is some resentment in the community regarding short

term contracts for services in the region. For this reason, longer contract terms should be considered ine commissioning a care finder service for Kilcoy.

Supporting the needs and preferences of older people in the region

This sub-section of the report presents three key insights from conversations with older people in the Kilcoy region regarding their needs and preferences when it comes to accessing services and aged care, including difficulties they experience with the My Aged Care system.

Insight 22: There is a need to support older people with accessing health and aged care services, including Aged Care Assessments.

Service providers and stakeholders within the Kilcoy region have noted that they are being approached to assist residents with the online aged care needs assessment application and in completing application forms for equipment (e.g. through the Medical Aids Subsidy Scheme (MASS)) due to difficulty understanding the system.

Older people in the region described feeling vulnerable to being taken advantage of by service providers, as they knew they didn't understand the system but did not know who to go to in order to seek trustworthy third party advice.

Some stakeholders in the region also noted there is a need more broadly for health literacy in what is available to older people, particularly where it is provided at no cost, to assist older people in being able to receive the support they need. Older people in the region demonstrated a concern that they would be required to pay out of pocket for services covered by their aged care packages. Despite the reforms to the accessing My Aged Care, every stakeholder consulted discussed the significant delays in the assessment times and in the release of package funding, particularly for level 3 and 4 home care packages. They expressed an ongoing need for advocacy to prioritise needs where this becomes more urgent, and a need to get people assessed through My Aged Care earlier if possible so that they are not reaching a crisis point before they are even assessed for My Aged Care services in the home.

Implications for care finder in Kilcoy: The care finder will need to play a key role in supporting applications for health and aged care services, and, where possible, accelerate and advocate for their care finder clients to shorten the significant delays which are being experienced before home care services can be provided.

A care finder provider from across Brisbane North PHN noted that they also play a key role in helping to navigate to whatever support is available in the 'waiting period' between the assessment and receiving a package and funding (particularly for aged care packages where waits may be up to 12 months). Some examples may include: accessing the Aged Care Volunteer Visitor's Scheme (ACVVS); accessing the Transitional Care Program and other care coordination services (e.g. Team Care); and accessing transport services for medical specialist appointments, particularly as these specialist appointments are often in Caboolture, North Lakes or even further afield.

Insight 23: There is a need to address the asset considerations for My Aged Care as many live on properties that make them ineligible for funding support for health and aged care services.

Some stakeholders noted that some local residents,who are approved for My Aged Care, had to fund all or a majority of their health and aged care services due to the income testing arrangements, which are different for those who live on larger properties. Specific instances were raised where these people were financially poor (but may have assets) and that this was creating significant limitations in their ability to pay for the aged and home care services they needed.

As asset testing is applied differently to those on farms and larger properties, this was disadvantaging many in the local community. In many cases, an income or asset test may already have been applied through any application for the full or partial pension through Services Australia. When this application is made, they consider the assets of a farm or rural property differently to other homes, including the 'extended land use test' and the 'private land use test'. It was understood through consultation with local service providers and local residents that some older people being disadvantaged by living on acreage properties whilst facing financial hardship. Through desktop review it is understood some exemptions should apply to the means and asset testing and that there are some hardship provisions.

Implications for care finder in Kilcoy: The care finder will need to understand and help to navigate the income and asset testing for Kilcoy residents, including for those on larger properties. Specifically, this includesunderstanding how and when the extended land use test, private land use test and hardship exemptions operate to assist residents in navigating the system, and preventing them from having to pay for aged and health care services that they cannot financially afford.

Insight 24: Limited public transport and home care access specific to the region need to be considered.

Every local stakeholder engaged noted that the limitations in public transport are severely limiting access to services both within Kilcoy and to any service, including specialist appointments that are further afield.

Both GP practices in the region noted that they work with Anglicare and DVA as they provide transport or those who are linked with those services. Practices also work with the Queensland Health Patient Travel Subsidy Scheme to assist older people to attend appointments. However, this only assists clients with the cost of travel and does little to mitigate transport availability challenges. On some occasions the practices need to rely on the local ambulance transport to ensure older people have access to GP services. One of the GP practices run a home visiting service for those who are no longer able to leave their homes and requirepalliative care but this will become more limited as the GP who delivers this service is moving into semi-retirement.

Stakeholders noted there is one public local school bus service, which the community can access, and a bus service that is only available twice per day from Kilcoy to Caboolture. Residents often rely on the wider community to drive to appointments outside of Kilcoy but this may not always be reliable.Many service providers noted instances where appointments had to be moved due to transport availability and, in the case of specialist service providers, where residents of Kilcoy simply do not attend these if it requires travel outside of Kilcoy.

Some stakeholders also raised home access concerns, which are different in rural areas. These include the need for gardening services on acreage properties so that access is viable. In addition, some properties may provide further access difficulties, including driving through rivers or floodways with some older people unable to drive and, therefore, have very limited ability to access any services (including groceries and garbage collection, which may have negative impacts on nutrition and sanitisation). This may result in different priorities in terms of home care assistance needs and supports, and may require a four-wheel drive for access. One stakeholder noted that the houses outside of the township tend to be old and in need of repair, and mentioned that this can create safety issues in home visiting service provision, as well as exacerbating falls risks for older persons.

Implications for care finder in Kilcoy: The care finder will need to understand locally available transport options and seek to boost community capacity in supporting transport and access to aged and health care providers to best meet the needs of local residents. This may include, for example, exploring an on demand transport (ODT) trial and, when the new Aliria retirement village (which is planned for late 2025) is developed, organising wider older persons access for any bus services they provide for their residents.

Some of the home access considerations may be relevant to the care finder themselves in home visits that may be required for any within the cohort who are not mobile.

Insight 25: There is a need for digital literacy support for older people in the region.

While consulted consumers expressed an openness and appetite to using technology to access health and aged care services, a lack of confidence in using technology and a lack of digital literacy was also highlighted. Specifically, this included a need for support learn how to use new systems and build confidence accessing care in new ways. This aligns with the recently released 2025-2027 Brisbane North and Moreton Bay Joint Health Needs Assessment, where one of the specific needs identified by older people across the region is digital literacy in helping to support health navigation and service access. Consumers shared that they would have more of an appetite for digital services if it meant they were able to access more services or have more choice.

One aged care provider consulted shared that they had had success using online platforms to encourage social connection between older people while they waited for access to aged care packages. The service found that the key to the success of their program was providing initial set up support and ensuring consistency to encourage increase confidence in older people. The example given was that even though the rest of the service had moved their video calls to Microsoft Teams, the social program for older people had remained on Skype as this was the program that participants felt confident using.

Implications for care finder in Kilcoy: The care finder will need to play a key role in digital literacy support to assist older people to access services, like telehealth, and also enable social connection where appropriate.

Appendix I: List of stakeholders consulted

This section lists the stakeholders that contributed their valuable time to participate in a consultation. In total, the project team engaged 26 stakeholders across 22 organisations, as well as two focus groups with a total of 28 older people from Kilcoy and surrounds.

Organisation	Date Consulted
Service Navigation Provider	
Footprints Community	19 March 2025
Micah	17 March 2025
Team Care	13 March 2025
World Wellness Group	17 March 2025
Queensland Council for LGBTI Health	14 March 2025
Somerset Assist	12 March 2025
Health Service Provider	
Direct Chemist Outlet Kilcoy	24 March 2025
Kilcoy General Practice	25 March 2025
Kilcoy Hospital	24 March 2025
Kilcoy Meals on Wheels	25 March 2025
Kilcoy Medical Centre	25 March 2025
Aged Care Service Provider	
Sundale	25 March 2025
All About Living	28 March 2025
Anglicare	15 April 2025
Community Networking Contact	
Somerset Regional Council	26 February 2025
Kilcoy Library	24 March 2025
Somerset Health and Fitness	24 March 2025
RSL / Kilcoy Cancer Support Group	14 March 2025
Peak Bodies	
ADA Australia	28 March 2025
RADAR program, Caboolture Hospital	28 March 2025
Carers Queensland	1 April 2025
FRAIL Collaborative, Clinical Excellence Queensland	2 April 2025
Older People from Kilcoy and Surrounds	
Focus Group 1 – 10 participants	4 April 2025
Focus Group 2 – 18 participants	11 April 2025

Brisbane North PHN Care Finder in Kilcoy: Consultation and Scoping – Final Report

Appendix II: Data indicators and sources

This section lists the data indicators and sources that are referenced in Insights 3-8, relating to demographic information about the Kilcoy region.

Insight from Final Report	Data indicator	Source	area #	area %	Aguilar PHA #	Aguilar PHA %	Hinterland SA3 #	Hinterland SA3 %	Somerset LGA #	Somerset LGA %	major urban areas #	major urban areas %	(whole) #	(whole) %	Australia (whole) #	Australia (whole) %
					Kilcoy Region						Comparison Regions					
Insight 3	Total population	ABS, 2021 (Census, General Community Profile) and PHIDU, 2021 (Social Health Atlas)	4,467	100.0%	16,028	100.0%	14,897	100.0%	25,057	100.0%	1,827,168	100.0%	5,460,420	100.0%	26,648,878	100.0%
	People aged 65+ years	ABS, 2021 (Census, General Community Profile)	902	21.0%	-	-	-	-	-	-	315,279	18.5%	799,924	15.7%	4,037,333	15.9%
	People aged 60-65 years	ABS, 2021 (Census, General Community Profile)	293	6.6%	-	-	-	-	-	-	-	-	-	-	-	-
Insight 4	People aged 50 years and over who identified as Aboriginal and/or Torres Strait Islander	ABS, 2021 (Census, General Community Profile)	24	1.5%	-	-	-	-	-	-	19,336	2.8%	32,441	1.85%	124,012	1.35%
	People aged 65+ years born outside Australia	ABS, 2021 (Census, General Community Profile)	198	24.0%	-	-	-	-	-	-	-	-	-	-	-	-
	People aged 65+ years born overseas in predominantly non-English speaking countries	PHIDU, 2021 (Social Health Atlas)	-	-	11	4.8%	-	-	-	-	26,168	8.3%	83,192	10.4%	787,280	19.5%
	People aged 65+ years who were born overseas and reported poor proficiency in English	PHIDU, 2021 (Social Health Atlas)	-	-	4	0.2%	-	-	-	-	2,838	0.9%	14,399	1.8%	218,016	5.4%
	People born overseas in predominantly non-English speaking countries	PHIDU, 2021 (Social Health Atlas)	-	-	796	7.6%	-	-	-	-	-	-	-	-	-	-
	People at risk of, or who are experiencing, homelessness	ABS, 2021 (Census, General Community Profile)	-	-	-	-	51	0.3%	-	-	-	-	-	-	-	-
	Estimated number of people aged 65-74 years who identify as LGBTQIA+, as a proportion of their age group	ABS, 2022 (Estimates and characteristics of LGBTI+ populations in Australia)	-	-	-	-	-	-	-	-	-	-	-	-	39,500	1.9%
	Estimated number of people aged 74+ years who identify as LGBTQIA+, as a proportion of their age group	ABS, 2022 (Estimates and characteristics of LGBTI+ populations in Australia)	-	-	-	-	-	-	-	-	-	-	-	-	19,200	1.4%
	Estimated number of people aged 16-24 years who identify as LGBTQIA+, as a proportion of their age group	ABS, 2022 (Estimates and characteristics of LGBTI+ populations in Australia)	-	-	-	-	-	-	-	-	-	-	-	-	258,700	9.5%
Insight 5	People aged 65+ years on a low income	PHIDU, 2021 (Social Health Atlas)	-	-	1,120	48.8%	-	-	-	-	146,605	46.5%	370,365	46.3%	1,861,211	46.1%
	People under mortgage stress	PHIDU, 2021 (Social Health Atlas)	-	-	-	-	3,024	20.3%	-	-	-	-	-	-	-	-
	People who own their home outright residents owning their home outright	PHIDU, 2021 (Social Health Atlas)	-	-	-	-	5,974	40.1%	-	-	-	-	-	-	-	-
	People who have a mortgage	PHIDU, 2021 (Social Health Atlas)	-	-	-	-	5,199	34.9%	-	-	-	-	-	-	-	-
	SEIFA Index of Relative Socio-economic Disadvantage (IRSD)	PHIDU, 2021 (Social Health Atlas)	-	-	Index: -		Index:		Index:		Index: 981		Index: 997		Index: 1000	
Insight 6	People aged 65+ years who were living on their own	ABS, 2021 (Census, General Community Profile)	163	18.0%	-	-	-	-	-	-	72,829	23.1%	187,982	23.5%	1,001,259	24.8%
	People aged 65+ years living in 'triple jeopardy' (where residents are living alone, with disability and on a low income)	PHIDU, 2021 (Social Health Atlas)	-	-	53	1.7%	-	-	-	-	7,251	2.3%	19,198	2.4%	109,008	2.7%
	People aged 65+ years living without internet access in their home	PHIDU, 2021 (Social Health Atlas)	-	-	584	25.4%	-	-	-	-	76,928	24.4%	185,582	23.2%	1,041,632	25.8%
	People living without internet access in their home	PHIDU, 2021 (Social Health Atlas)	-	-	2,869	17.9%	-	-	-	-	-	-	-	-	-	-
Insight 7	People aged 65+ years with one or more long-term health conditions	ABS, 2021 (Census, General Community Profile)	535	64.0%	-	-	-	-	-	-	-	-	-	-	-	-
	People aged 65+ years who reported their health as good, very good or excellent	ABS, 2022 (National Health Survey)	-	-	-	-	-	-	-	-	-	-	-	-	2,987,626	74%
Insight 8	People aged 65+ years living with a disability	ABS, 2018 (Survey of Disability, Ageing and Carers)	-	-	-	-	-	-	-	-	-	-	-	-	2,018,667	50%
	People aged 65-69 years living with a disability	ABS, 2018 (Survey of Disability, Ageing and Carers)	-	-	-	-	-	-	-	-	-	-	-	-	1,453,440	36%
	People aged 90+ years living with a disability	ABS, 2018 (Survey of Disability, Ageing and Carers)	-	-	-	-	-	-	-	-	-	-	-	-	3,431,733	85%
	People aged 65+ years living with a profound or severe disability (including those living in long-term accommodation)	PHIDU, 2021 (Social Health Atlas)	-	-	389	18.0%	-	-	-	-	53,282	16.9%	139,187	17.4%	742,869	18.4%
	People aged 65+ years living with a profound or severe disability and living in the community	PHIDU, 2021 (Social Health Atlas)	-	-	288	13.3%	-	-	-	-	42,247	13.4%	111,189	13.9%	577,339	14.3%
	People aged 65+ years indicating a need for assistance with core activities	ABS, 2021 (Census, General Community Profile)	151	21.0%	-	-	-	-	-	-	-	-	-	-	-	-
	People aged 65+ years who provide unpaid assitance to a person with a disability, health condition or due to old age	ABS, 2021 (Census, General Community Profile)	100	11.1%	-	-	-	-	-	-	-	-	-	-	-	-