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OUR VISION

To be a national leader in ageing research in Australia, producing work of international significance in order to improve the life and health of all older people.

OUR MISSION

To improve the health and wellbeing of older people through research and research translation into policy and practice.

OUR WORK

NARI conducts research into the major health issues that affect older people, and uses this research to shape health promotion, service provision and policy development concerning older people, recognising that Australia's older population is very diverse.

FROM THE PRESIDENT



I have been impressed by the increasing range and depth of ageing research undertaken by the Institute. This has incrementally grown as the increasingly complex aged care and ageing issues have come to the forefront of public and social awareness, including through the Royal Commission in Aged Care Quality and Safety which has drawn attention to the many deficits in the aged care system.

To date NARI has contributed to the Royal Commission through providing expert advice in such areas as falls, and issues pertinent to the culturally and linguistically diverse community (CALD) that makes up a significant portion of our social fabric.

NARI works closely with many health and aged care services and professionals to improve the implementation of evidence into care in order to support better outcomes. NARI looks forward to providing a leading role in this regard post the Royal Commission.

The Melbourne Ageing Research Collaboration (MARC) is a program is a possible and worthy model for consideration which is scalable and can be implemented more widely to provide a platform for this work.

This focus is but one aspect of ageing, the majority of older people do not move into care and continue to live in the community and to make productive and important contributions to their communities and families. Healthy ageing and promoting quality of life throughout the ageing trajectory is an important field of research for NARI.

I would like to thank my hardworking, voluntary board for their valuable contributions to the governance of NARI. I am grateful to them and their families for the gift of time and expertise to support NARI's important role. Similarly, I am appreciative of the work of our ambassadors, Dr Patricia Edgar and Dr Don Edgar for their advocacy and energy with thoughtful commentary, and leadership.

We are indebted to our patron, HE the Honourable Linda Dessau AC, Governor of Victoria for her patronage and leadership in the important field of ageing research and the contribution it seeks to make bringing *research to life*. I would also like to commend Associate Professor Briony Dow our CEO and her executive leadership team for their leadership and vision in continuing to grow NARI's profile and reputation and for their passionate advocacy for older people and their continued wellbeing.

A handwritten signature in black ink, appearing to read 'M. Murray'.

Associate Professor Michael Murray

BOARD OF DIRECTORS

President

Associate Professor Michael Murray AM

Vice President

Mr Derek McMillan

Treasurer

Mr Richard Gallina

Executive Director

Associate Professor Briony Dow

Members

Ms Maree McCabe

Mr John Waters

Professor Andrea Maier (*until 19 November 2018*)

Professor Danny Liew (*appointed May 2019*)

Senior Executive Staff

Debra O'Connor - *Deputy Director, Director MARC*

Dr Frances Batchelor - *Director, Clinical Gerontology and Program Manager MARC*

David Rischbieth - *Chief Financial Officer*

Associate Professor Bianca Brijnath - *Director Social Gerontology*

Board Meeting Attendances	Total Meetings 5
Associate Professor Michael Murray AM	5 out of 5
Mr Derek McMillan	5 out of 5
Mr Richard Gallina	5 out of 5
Associate Professor Briony Dow	5 out of 5
Ms Maree McCabe	2 out of 5
Mr John Waters	3 out of 5
Professor Andrea Maier (<i>until 19 November 2018</i>)	0 out of 3

Finance, Audit and Risk Management	Total Meetings 4
Associate Professor Michael Murray AM	4 out of 4
Mr Richard Gallina	4 out of 4
Mr Derek McMillan	4 out of 4
Associate Professor Briony Dow	3 out of 4
Mr John Waters	4 out of 4

FROM THE DIRECTOR

This past year can be characterised by important new initiatives, project completions and impact. We have seen new research collaborations formed enriching NARI's breadth and depth.

We are part of two new international collaborations through the International Longevity Centre (ILC) Global Alliance, one on long term care and the other on the positive aspects of caregiving. We have new partnerships in India and China with The National Institute of Mental Health and Neuro-Sciences (NIMHANS) and Peking University Institution of Mental Health and have strengthened our ties with University College London.

We are delighted to welcome a new board member in Professor Danny Liew, and we are also pleased to join the Melbourne Academic Centre for Health (MACH). The Melbourne Ageing Research Collaboration (MARC) has expanded and now includes 18 members including our first rural partner, Lyndoch Living.

We have completed several significant research and translation projects, including the Hospital Environments Audit Tool (HEAT), the Moving Pictures project, the older men and suicide study and the Pleasant Activities to promote Wellbeing in residential aged care (PAW) study, the latter both collaborations with the University of Melbourne.

These latter two studies have informed our submissions to the Victorian Government's Royal Commission into mental health, where we have raised the profile of older people's mental health needs, often poorly considered in mental health policy and services.

NARI staff have also made submissions to the Royal Commission into Aged Care Quality and Safety, particularly relating to our work in remote Aboriginal communities where Paulene Mackell was the key informant and in falls prevention in residential aged care with Dr Batchelor providing the evidence.

We are most proud when our work is taken up by policy makers and service providers. An example of this is our elder abuse ecological framework. This framework sets out on one page the factors associated with abuse at an individual, interpersonal, community and societal level. It has been taken up by the Attorney General's department as a framework for their report on "Insights into vulnerabilities of Aboriginal and Torres Strait Islander people aged 50 and over", and as part of a range of resources for health professionals

developed by Caxton Legal Service and by the Western Australian government.

I would like to thank the NARI Board for their continued commitment and support for NARI's work, notably our President, Associate Professor Michael Murray, AM, who was recently recognised for his tireless commitment to the care of older people with the awarding of Membership (AM) in the General Division of the Order of Australia for his service to geriatric medicine as a clinician and educator. I would also like to thank the Executive team, the researchers and the research support team, all of whom contribute to the achievement of NARI's aims and objectives.

In the year ahead, we will be developing a new strategic plan. We will seek input from our key partners and stakeholders in its development which will focus on **impact**. We want to see better usage of existing data and new research to inform health and aged care policy and practice and developing a platform to enable this to occur will be our principle aim.



Associate Professor Briony Dow



SIGNIFICANT ACHIEVEMENTS

RESEARCH PROJECTS



NARI has had a highly productive year conducting research on health reform, physical activity, falls prevention, pain, models of care, healthy ageing and technology:

- > Over **60** projects underway.
- > **2** NHMRC projects.
- > **5** major government projects through the Dementia and Aged Care Services Innovation program.

MARC



Melbourne Ageing Research Collaboration now has **18 members**.

MARC has established a Community Advisory Group as a sounding board for project development.

The Collaboration finalised five projects and is underway with five new projects.

Two seed funding projects are underway: a randomised controlled trial which includes a comprehensive geriatric assessment and interventions in older lung cancer patients, and tackling the impact of having a fall as a result of going to the toilet at night for older people in hospital.

EDUCATION



Four professional development workshops, attended by **117** aged care and health professionals across the community.

The “Seminars in Ageing” series, coordinated by NARI in conjunction with Melbourne Health and AUPOA (Academic Unit for Psychiatry of Old Age), University of Melbourne, continued to be well attended, with an average of 35 people attending each week.

NARI was commissioned to deliver workshops on Dementia in Diverse Populations by Dementia Training Australia, covering people from Culturally and Linguistically Diverse backgrounds, Veterans and Indigenous Australians. These workshops were delivered in Melbourne, Bendigo and Launceston.

NARI's 2018 Annual Seminar focused on Elder abuse: Innovation, research, policy and practice. Hosted by Australian Unity, there were over **100** researchers, policy makers and health professionals in attendance.

COLLABORATIONS



innovAGEING and NARI formed a knowledge alliance partnership program to link research with current industry practices.

NARI has become a member of MACH, a leading group of hospitals and medical research institutes.

NARI was welcomed as a member of the Sax Institute during the year. The Sax Institute is a national leader in promoting the use of research evidence in health policy to improving health and wellbeing of all Australians.

POLICY



Our elder abuse ecological framework has been taken up by the Attorney General's department for their report on "Insights into vulnerabilities of Aboriginal and Torres Strait Islander people aged 50 and over."

We urged the Victorian Royal Commission into Mental Health to treat older people's mental health needs as specific in its submission into the Terms of Reference.

NARI partnered with the NHMRC National Institute for Dementia Research (NNIDR) to develop an action plan for dementia research in CALD communities.

Throughout the year, NARI's Directors have met with Federal and State politicians from all parties to promote the need for research into ageing to develop best practice and a sound evidence base for policy.

INTERNATIONAL COLLABORATIONS



NARI has established collaborations with The National Institute of Mental Health and Neuro-Sciences (NIMHANS) in Bangalore and Maitreyi College, Delhi University in India, Peking University Institution of Mental Health in China, and the University of Copenhagen.

NARI has entered a Memorandum of Understanding with MEDTime Peking University Health Sciences Centre and Health Australasia Pty Ltd to deliver education and training programs in ageing and aged care in China.

MEDIA



NARI's media presence grew over the past year with over **120 articles** in national, state and specialist media including The Age and The Australian.

Researchers were interviewed for a range of Radio National shows such as Life Matters, The Health Report and The Big Idea.

NARI contributed to several media debates over the past year including welcoming the call for an Aged Care Centre for Growth and Translational Research outlined in A Matter of Care - Australia's aged care workforce strategy.

PUBLICATIONS



Over the past year NARI researchers and honoraries have published **87 peer-reviewed articles**, **6 book chapters** and **10 reports**.

ROYAL COMMISSION



Dr Frances Batchelor, NARI's Clinical Gerontology Director, gave evidence to the Royal Commission panel in Cairns about what could be done to prevent falls in residential care, especially for people living with dementia.

CLINICAL GERONTOLOGY



The Clinical Gerontology Division has had a productive year. Our work is centred on the themes of falls prevention and physical activity, health reform and models of care. We work to generate new evidence, translate evidence into practice, and aim to influence both policy and practice.

Our research is undertaken across different settings, including community, hospitals, and residential aged care. In the last year, we have focussed on several large projects funded by the Commonwealth Department of Health's Dementia and Aged Care Services (DACS) Innovation program. These included our work with remote Aboriginal art centres that is highlighting reciprocity between Aboriginal artists and art centres. Another DACS-funded project, also nearing completion is the Tapestry project. In partnership with Royal Freemasons, this project aims to implement and evaluate a model of care that involves a co-ordinated approach between staff, residents and their families. A major component of Clinical Gerontology's work is our comprehensive program of work developed with and for the Department of Health and Human Services.

Two new projects include the ENJOY project, which uses an innovative approach to increasing physical activity and social connection through outdoor exercise parks, and our work evaluating two different models of care for people who have experienced a minor stroke or transient ischaemic attack.

Other projects include an observational study examining the role of vitamin D in falls after stroke and the role of technology in language translation for community aged care. We have had an active involvement in delivering education to health professionals on issues such as falls prevention, pain, dementia, healthy ageing and physical activity. In total the division has been working on 18 projects with our multi-disciplinary team of 18 staff.

Highlights of the year include:

What Do Older People Want from their Health Care?

For many older Victorians health-related events such as acute illness, falls or cognitive issues have a detrimental effect on their independence and quality of life, both in the short and long term.

Health and well-being support for older people should be informed by overarching consumer expectations, needs and priorities, and adapted on a case by case basis to reflect person-centred practices. However, there is limited understanding of what older people in Victoria want or expect when seeking this support, or how these priorities may change at different points in the care continuum.

The 'What Do Older People Want from their Health Care?' project seeks to identify what older Victorians, aged 65 years and above, and their carers want from their health care using a combination of focus groups, social media discussion, hosted on Facebook, and an online survey.

This project will result in the development of an evidence base that will be used by the DHHS to support policy development regarding healthy ageing throughout the life course thereby ensuring that the future delivery of health care is responsive to the priorities of older people and informed by their needs and expectations.



The top five health and wellbeing needs, expectations and priorities of participants will be identified in relation to the following health-based scenarios associated with ageing: remaining healthy and active; supporting the management of multi-morbidity and/or frailty when living in the community, seeking healthcare in a crisis for sudden health issues, regaining independence after being unwell, needing specialist aged care support, and requiring end of life care.

Project Team: Jessica Cecil, Jessica Barry, Amy Parker, and Frances Batchelor (all from NARI).

The ENJOY trial - Exercise interveNtion outdoor proJect in the cOmmunitY

Age friendly Communities - Creating active outdoor spaces for seniors

The ENJOY (Exercise interveNtion outdoor proJect in the cOmmunitY) is an active ageing project in Victoria using a novel outdoor Seniors Exercise Park. The ENJOY project is led by the NARI in partnership with Whittlesea City Council, Wyndham City Council, Old Colonists' Association of Victoria and Gandel Philanthropy. Since the start of the ENJOY project in 2018, the outdoor Seniors Exercise Park has been installed in three locations in Victoria: Hoppers Crossing, Thomastown and St Helena. A formal launch of the program took place in 2018 and 2019, which involved the official opening of the site by the City Council Mayors. Over 70 inactive older people age 60 and over have taken part in the project so far.

Further funding to support the ENJOY project and build capacity in the community has been received from the Jack Brockhoff Foundation and the State Trustees Australia Foundation. The additional support will help

build capacity within the community, to design and deliver training workshops to allied health professionals and to develop information in several languages to accommodate multicultural residents within the participating municipalities. Training workshops were delivered earlier in 2019 with over 80 allied health professionals, council and community members taking part in the training.

Project team: Pazit Levinger (NARI), Maya Panisset (NARI), Jeremy Dunn (NARI), Keith Hill (Monash University), Terry Haines (Monash University), Briony Dow (NARI), Stuart Biddle (University of Southern Queensland), Gustavo Duque (Melbourne University, Western Health) and Frances Batchelor (NARI).

Tapestry

Tapestry is a new model of care for residential aged care services. Tapestry aims to facilitate a coordinated approach to care whilst promoting open and honest discussions between residents, families and staff.

Partnering with Royal Freemasons Ltd, this new model of care has been implemented at seven residential aged care facilities across Victoria as part of an evaluation study conducted by NARI. In total, 344 residents have so far enrolled in this study and 171 family members and 258 staff have participated in questionnaires about their experience communicating with each other.

While the final stage of data is collected, and analysed, the Tapestry team is also developing a step-by step implementation guide. This booklet is written for a clinical and aged care staff audience and introduces the concepts, tools and strategies to implement the Tapestry program. The guide is based on the experience gained, as well as the experience of care professionals, residents and family carers during face-to-face interviews. This step-by-step guide will be available at no cost for the residential aged care sector providers and facilities interested in implementing an innovative person-centred, holistic care approach.

Project team: Steven Savvas (NARI), Maho Omori (NARI), Jude Jayasuriya (NARI), Courtney Baker (NARI), Sam Scherer (Royal Freemasons), Briony Dow (NARI), Marie Vaughan (Royal Freemasons).



Art Centres: Supporting our Elders

There are around 90 Aboriginal and Torres Strait Islander controlled art centres across Australia, and most are located in remote communities. These predominantly social enterprises are important community hubs that provide opportunities to maintain, generate and transfer law and culture between generations, through facilitating a range of artistic practices.

This study, funded by the Department of Health's Dementia and Aged Care Innovation grant scheme, is exploring the ways in which art centres are supporting older people and those living with dementia in remote communities.

To date, the study has highlighted that art centres are valued by older and younger people, and arts and aged care workers, as critical to their communities. They facilitate social connection, cultural maintenance and intergenerational exchange, as well as provide advocacy, care and a valuable source of income for artists and their families. The study also highlights the vital role that older artists play in ensuring their art centres not only survive but thrive. We have learnt that many art centres are already working closely with their local aged care providers and are documenting the strengths of these collaborations in order to re-imagine what aged care services could be. The research team have also learnt how important participatory methodologies are in generating ongoing dialogue to inform the design of research, services, and policy.

We are currently working with our partners to develop an audio visual resource to showcase the work that art centres do to support their Elders. We anticipate this resource will be made available to art centres across Australia in 2020 and we hope this resource will generate further opportunities to sustain the vital work they do.

Project team: Paulene Mackell (NARI & RMIT), Briony Dow (NARI), Scott Fraser (NARI), Kathryn Squires (NARI), Jessica Cecil (NARI), Frances Batchelor (NARI), Roslyn Malay (University of Western Australia), Maree Meredith (Flinders University), Margaret Smith and Michelle Young (Tjanpi Desert Weavers), Douglas Multa and Chrischona Schmidt (Ikuntji Artists), Ngarralja Tommy May; Linley Nargoodah; and Belinda Cook (Mangkaja Arts Resource Agency), Ruth Crawford and Maxine Nixon (Kimberley Aged Care Services), Kim McCrae (Tjungu Aged Care and Disability team, NPYWC), Kate Smith (University of Western Australia), Dina LoGiudice (Melbourne Health & NARI).

The Pleasant Activities for Wellbeing (PAW) project

In the PAW project, NARI has used an innovative, non-pharmacological approach to reducing depression and improving well-being in residential aged care. High rates of depression in residential aged care are common in Australia and elsewhere. Major influences on depression include loneliness, disengagement and a lack of meaningful activity, all of which are common in residential aged care. However, traditional psychological services are often unavailable, and staff lack the skills or capacity to support older adults with depression. Medication is often the only treatment provided.

NARI partnered with The University of Melbourne and Benetas to investigate the feasibility and acceptability of an eight-week, volunteer-led behavioural activation programme, designed to improve the well-being of aged care residents. Behavioural activation is a brief structured treatment for depression that aims to increase a person's engagement in pleasurable activities by focussing on individualised problem-solving and planning.



We delivered specialist training sessions for carefully screened volunteers, who were then partnered with residents who met the selection criteria. Qualitative and quantitative data were collected from residents and volunteers at baseline, eight-weeks and three months. For residents, participation was associated with a large, statistically significant reduction in depressive symptoms. There were also trends towards reduced anxiety and increased positive well-being. Improvements in volunteer well-being and staff satisfaction were also indicated. Findings support the use of behavioural activation in residential aged care. Opportunities to improve the program were identified, which we hope to incorporate into a larger study of volunteer-led behavioural activation in community, residential and retirement living.

The Jack Brockhoff Foundation funded the study and the workshop.

Project team: Christina Bryant (University of Melbourne), Briony Dow (NARI), Frances Batchelor (NARI), Meg Polacsek (NARI), Hannah Capon (formerly NARI), Lydia Brown (University of Melbourne), Catherine Joyce (Benetas).

CARDIAC REHAB PLUS

Every year, tens of thousands of Australians experience a minor stroke or transient ischaemic attack (TIA). Transient attack and minor stroke (TIA/mS) are common cerebrovascular events. Treatment after hospital is usually limited to medical risk factor management, for example controlling blood pressure. Despite the appearance of neurological recovery, there is evidence that people with these conditions can have ongoing problems with thinking skills, fatigue, and walking and balance, and that there is an increased risk of further stroke. In addition to medical management, adequate follow up may involve rehabilitation including exercise and lifestyle management. Two NARI-led projects are investigating models of care providing rehabilitation for people following TIA or minor stroke. One model involves supervised exercise as part of a centre-based rehabilitation program; the other provides an individually tailored exercise program for people to do in their own home.

NARI and St Vincent's Hospital are conducting a research project investigating balance and walking for people following transient attack (TIA), minor stroke (mS) and cardiac events.

This project will determine the feasibility and acceptability of providing rehabilitation to people with TIA/mS stroke through existing cardiac rehabilitation, including balance and gait assessment in cardiac rehabilitation programs for both people with cardiac conditions and people with TIA/mS to identify any impairments, and determining whether balance training in cardiac rehabilitation improves gait and balance in both cardiac patients and people after TIA/mS.

The project team is being funded by the Heart Foundation (Vanguard) and the St Vincent's Hospital Melbourne Research Endowment Fund. Recruitment for the study commenced in late July 2019. Findings from the study will be available in mid-2020.

Project team: Frances Batchelor (NARI), Sue Williams (NARI), Claire Formby (St Vincent's), Cathy Said (Western Health), Lauren Sanders (St Vincent's), John Groves (St Vincent's), Kim Brock (St Vincent's), Belinda Cary (St Vincent's), Sophie Heywood (St Vincent's).

Exercise after minor stroke

The Exercise after Minor Stroke project is funded by the Angior Family Foundation and currently being conducted in collaboration with Western Health. We are testing whether an individually tailored home exercise program provided to people with transient ischaemic attack or minor stroke is effective in improving walking and balance and decreasing the risk of secondary stroke. We are also testing whether the program leads to improved outcomes in other aspects, for example falls risk, falls and quality of life. Recruitment for this study is ongoing and findings will be available in late 2020.

Project team: Frances Batchelor (NARI), Sue Williams (NARI), Marie-Louise Bird (University of British Columbia), Claire Formby (St Vincent's), Sandy Petty (St Vincent's), Tissa Wijeratne (Western Health), Cathy Said (Western Health), Lauren Sanders (St Vincent's).

SOCIAL GERONTOLOGY



It has been another busy year within Social Gerontology as we have expanded our research and policy portfolio, education delivery, and international links. With over 16 staff, we are currently undertaking several projects focused on dementia, elder abuse, mental health, and housing.

Our work with vulnerable communities, especially with culturally and linguistically diverse (CALD) Australians, is attracting significant national attention. For example, our *Moving Pictures Project*, which produced 15 films, five comics, and other resources in five languages was launched in February 2019 by the then Minister for Seniors and Aged Care, the Hon. Ken Wyatt AM. This research in conjunction with our policy work with the NHMRC National Institute for Dementia Research to develop a dementia research action plan for CALD communities, and our participation in numerous government workshops and meetings including the Aged Care Royal Commission Roundtable on cultural diversity, positions NARI at the forefront of research focused on cultural diversity and ageing in Australia. Much of this work would not be possible without the invaluable contribution of Betty Haralambous, whose pioneering work in this area has laid the foundations for many of our current successes.

NARI researchers are also leading the way in research on mental health with a suite of projects examining this complex topic, ranging from early identification to interventions to address elder abuse, reduce social isolation, and improve wellbeing. Diverse methods are used across all these projects including befriending, behaviour activation, and co-design, with outputs including films, volunteer programs, and closer engagement with community and residential aged care services.

Highlights of the year include:

E-interpreting and dementia

The “Improving Service Knowledge and Access among Older People from Culturally and Linguistically Diverse (CALD) backgrounds with Dementia” [Short title “Diagnosis and Access Through E-interpreting” (DATE)] study compared e-interpreting and face-to-face interpreting for home-based dementia assessments.

Over 100 clients participated in the study, which was conducted in collaboration with North West ACAS (Melbourne Health), Barwon South Western Region ACAS (Barwon Health) and Australian Multicultural Community Service (AMCS).

The study found minimal differences between the assessment scores of face-to-face and e-interpreting assessments. This indicates that e-interpreting is an effective alternative to face-to-face interpreting for these assessments.

The study also explored some of the technological and operational challenges associated with implementing e-interpreting for home based dementia assessments. Our findings have been made available in a protocol document which has been distributed to aged care assessment teams.

Project team: Betty Haralambous (NARI and RMIT University); Kerry Hwang (NARI); Santini Subramaniam (NARI); Courtney Baker (NARI); Andrew Simon Gilbert (NARI); Samantha Croy (NARI); Lindell Claff (NARI); Dina LoGiudice (Melbourne Health and NARI).



Elder abuse in the context of dementia

People with dementia are especially vulnerable to elder abuse, particularly from family members and carers. However, when confronted with instances of elder abuse, service providers often struggle to balance the carer's needs and the older person's rights. Without clear and consistent messaging and training, significant discrepancies can arise in provider responses to elder abuse in the context of dementia.

Addressing this gap, this project aims to co-produce with providers three short films exemplifying best-practice responses to cases of elder abuse in the context of dementia where the carer abuses the person with dementia; where the person with dementia abuses their carer; and where there is neglect related to advancing dementia.

The film scripts have been developed with older people, carers, and service providers across aged care and health services.

Project team: Bianca Brijnath (NARI);
Briony Dow (NARI); Josefine
Antoniades (NARI); Luke Gahan
(formerly NARI, now Red
Cross Blood Service).



Elder abuse: implementing the AUSI

The aim of this State Trustee funded project was to pilot the Australian Elder Abuse Screening Instrument (AuSI) within a hospital setting and test the instrument's functionality, feasibility, and fidelity. Piloted within social work and emergency department of a busy metropolitan hospital in Melbourne, the trial showed that the AuSI had no effect on the detection of elder abuse cases and no effect on staff knowledge of elder abuse, which was already high.

Data suggested that staff confidence in screening for elder abuse did improve because of using the tool, that the tool was straightforward to use, and helpful to frontline nurses and other medical staff who do not routinely screen for elder abuse as well as less experienced social workers. NARI researchers are making modifications to the tool and seek to test it in other settings.

Project team: Bianca Brijnath (NARI), Lisa Braddy (St Vincent's), Luke Gahan (formerly NARI, now Red Cross Blood Service), Briony Dow (NARI), Lyndal Hickey (St Vincent's), Carmel Italiano (St Vincent's), Melinda Collins (St Vincent's), Josefine Antoniades (NARI).

Seven-year trend analysis of elder abuse data

This study aims to improve understanding of the types and characteristics of elder abuse situations, which in turn will inform prevention efforts, especially those directed at perpetrators.

Seniors Rights Victoria (SRV) provides helpline, advocacy and legal services for people who are experiencing elder abuse. NARI, together with SRV, is analysing seven years of SRV Helpline data including information on follow-up advocacy and case work. This one-year project is funded by the State Trustees Australia Foundation.





BEFRIENDAS Study: The impact of befriending on depression, anxiety, social support and loneliness in older adults living in residential aged care facilities

Up to half of people living in residential aged care facilities (RACFs) have significant depression symptoms and a higher prevalence of older people in RACFs have major depression compared to those living in the community. Befriending is non-directive emotional and social support that is usually provided by a volunteer. Few studies have been conducted to evaluate befriending for older adults living in RACFs.

Funded by the NHMRC and beyondblue, the BEFRIENDAS study is a randomised control trial comparing a befriending intervention to treatment as usual. The four-month face-to-face course of befriending is being delivered by trained volunteers to primarily alleviate depressive symptoms and secondarily alleviate anxiety, improve social support and relieve loneliness. An economic evaluation will also be undertaken to examine the costs and benefits of the program. If successful, the befriending model could be translated to the wider aged care sector to support residents and reduce levels of depression, anxiety and loneliness and improve social support.

Project Team: Prof Colleen Doyle (NARI); Prof Sunil Bhar (Swinburne University); Assoc Prof Christina Bryant (University of Melbourne); Prof Briony Dow (NARI); Prof David Dunt (University of Melbourne); Dr George Mnatzaganian (La Trobe University); Prof Daniel O'Connor (Monash University); Prof Julie Ratcliffe (Flinders University); Marcia Fearn (NARI); Georgia Major (NARI); Robin Harper (NARI); Robyn Molyneux (Australian Catholic University); Judith McKay (Australian Catholic University); Sarah Samuel (Australian Catholic University) and Claudia Morando-Stokoe (La Trobe University).

Older men and suicide

NARI worked in partnership with the University of Melbourne on a project targeting older men who are at a greater risk of suicide than other population groups. The project aimed to understand why older men might want to commit suicide and whether this was to do with their ideas about masculinity.

We interviewed 43 men all aged over 80. Findings revealed that men believed that the loss of ability to contribute including working, providing for the family or acting as carers for their wives or the onset of severe illness or disability could contribute to risk of suicide. Both are linked to not wanting to be a burden on others.

The team is now working on ways to enable older men to continue to contribute and to engage in activities that are meaningful to them in later life, even after admission to residential care.

Project team: Kylie King (University of Melbourne), Briony Dow (NARI), Peter Feldman (NARI)

MOVING PICTURES: RAISING DEMENTIA AWARENESS IN CALD COMMUNITIES

As many CALD Australians reach old age they will require treatment and care for aged-related conditions such as dementia. However, lack of awareness about dementia and supportive services is a major public health concern facing Australia's CALD populations.

Moving Pictures, funded through the Federal Government Department of Health's Dementia and Aged Care Services Research and Innovation grants, uses multimedia to address these barriers. Our research team from the National Ageing Research Institute (NARI) and Curtin University has developed short, in-language videos, as well as comics and a website, targeted to specific CALD communities to address issues around the diagnosis of dementia, the sources of treatment and support, and the personal journeys of carers for people with dementia.

In the first phase of the project, we developed resources in the Arabic, Cantonese, Mandarin, Hindi and Tamil languages, as these are some of the fastest growing migrant communities in Australia today.

We interviewed 57 carers in total, as well as 19 key service providers, across three major cities - Melbourne, Sydney, and Perth.

We designed 15 storyboards in total, three for each language, with the themes of 'Detection and Diagnosis', 'Navigating Care', and 'Carer's Journey'. The first theme addresses the signs and symptoms of dementia, and underlines the importance of obtaining an early diagnosis from a doctor. The second theme addresses the services and resources available to CALD people living with dementia and their carers, and the pathways through which they can access them. The third theme addresses the first-hand experience of being a carer, and the importance of seeking outside help to reduce the burden and stress.

The Moving Pictures films, website, comics and other resources were officially launched in Melbourne in February 2019 by the then Minister for Aged Care and Indigenous Health, Ken Wyatt AM. Since then we have also launched the project in Sydney, Perth, and Adelaide.

www.movingpictures.org.au



ROYAL COMMISSION INTO AGED CARE QUALITY AND SAFETY



In September 2018, NARI welcomed the announcement of a Royal Commission into Aged Care Quality and Safety saying it would shine a much-needed spotlight onto the quality of life and quality of care that all older Australians deserve.

Since then, NARI has submitted several papers to the Royal Commission, and is currently compiling a comprehensive research-based submission to support and enable strategies and solutions as the Commission team works through the evidence it has gathered.

Two papers submitted last year were centred on falls and balances, and our work with Aboriginal and Torres Strait Islander peoples. Dr Frances Batchelor, NARI's Clinical Gerontology Director, gave evidence to the panel in Cairns about what could be done to prevent falls in residential care, especially for people living with dementia.

Falls and older people

Our submission at a glance

Falls are a major problem for older people receiving aged care, particularly for those in residential aged care. However, falls are not an inevitable part of normal ageing.

On average, 50% of aged care residents fall once or more in any year, while people with stroke, Parkinson's disease or dementia are three times more likely to fall in aged care than at home. Part of the reason for the discrepancy is that older people in aged care are frailer.

There are many risk factors that are associated with falls, such as reduced muscle strength, low levels of physical activity, low body mass index and taking medications.

Unfortunately, there is limited evidence about effective falls prevention interventions for residential aged care. Where studies have been undertaken in aged care, the results have been mixed or inconclusive. Using the best available evidence, the intervention that is most effective is vitamin D supplementation (particularly for those with low vitamin D).

FIVE RECOMMENDATIONS OFFERED TO THE COMMISSION

1. Further high quality research on falls prevention is needed in both community and residential aged care settings, particularly in understanding how interventions that are effective in other settings can be adapted to be effective in aged care settings.
2. There is a need for a better understanding of how and why people fall, and to have a system for real-time data collection, monitoring and analysis to inform local falls prevention actions
3. There is a need for training on falls prevention for all in aged care
4. While increasing staff levels will not prevent all falls, current levels limit aged care staff's ability to attend to multiple residents at risk of falling at the same time. Evaluation of the impact of increased staffing levels needs to be undertaken.
5. Without robust studies, NARI has recommended that technological solutions are adopted with caution.

"We hope this research will challenge the many ways of thinking, doing and being that implicitly inform the mainstream aged care system."

- Paulene Mackell

Aboriginal and Torres Strait Islander Peoples

Our submission at a glance

NARI is currently leading a collaborative study exploring the ways in which three Aboriginal controlled art centres, which operate in remote locations of WA, NT and South Australia, support older artists and those living with dementia.

Art centres provide solutions to aged care challenges

Many lessons have significant implications for re-considering the existing design of models of aged care for Aboriginal and Torres Strait Islander peoples. These include that

the art centres are community owned, controlled, and governed which makes them culturally safe places. They recruit and retain a local workforce, which also promotes cultural safety and comfort. They operate from the Indigenous concept of reciprocity, which means that while the art centres support older artists, the older artists (many of whom are considered super stars in their communities) are central to ensuring the art centres survive and thrive.

Art centres are community hubs, all people are welcome and intergenerational exchange, as an opportunity for teaching and learning, is a priority for both older and

younger artists. Art centres welcome collaboration with aged care providers, particularly if these collaborations do not involve time-consuming compliance requirements and they can be informed by the preferences of older artists and their families.

Emerging findings

Emerging findings from this study have demonstrated the enormous potential to fund the development of evidence bases that focus on creating:

- Collaborative models of aged care that facilitate partnerships between aged care providers and their local art centres for Aboriginal and Torres Strait Islander peoples.
- Models of care which are driven by local needs and preferences, embed cultural relevance and priorities, as well as intergenerational and broader community connections.
- Aged care policies, funding, and models of care that are designed, implemented and evaluated with the participation of older Aboriginal and Torres Strait Islander peoples and their families and communities.



POLICY



NARI has drawn on its deep repository of ageing research to make submissions into crucial areas of government policy, comment in the media on issues affecting older people, and to support election platforms for both the Victorian and Federal elections.

The Institute has also brought together older people to learn more about their concerns to drive research and policy directions.

Throughout the year, NARI's Directors have met with Federal and State politicians from all parties to promote the need for research into ageing to develop best practice and a sound evidence base for policy.

Ensuring older people's mental health needs are heard

NARI urged the Victorian Royal Commission into Mental Health to specifically consider older people's mental health needs in its submission into the Terms of Reference. Our submission warned that targeted support and resources for older adults is lacking, and that there is a serious gap in data and services for older adults with mental illness.

Working with consumers

In 2018, 55 NARI research participants attended the annual Thank You Day forum which provides the opportunity for volunteers to contribute to future research directions for the Institute.

The forum identified five priority areas including more research into promoting a better sense of well-being, both physical and mental. Of importance to the group was to understand better the gradual or sudden changes in health that can occur in older age, and how individuals can be well-prepared for these with the appropriate interventions and support in place.

The four other priorities included more research into how to reduce social isolation; how to transition from home into residential aged care better; combating ageism in employment; and an evaluation into the Voluntary Assisted Dying Act and its implementation into the Victorian healthcare system.

Dementia and its profound impact on the individual and their family remains an issue for participants who called for greater research investment and improved community and professional education.



Developing national action plans

In 2018, NARI partnered with the NHMRC National Institute for Dementia Research (NNIDR) to develop an action plan for dementia research in CALD communities. Co-Chaired by Associate Professor Bianca Brijnath and Stephanie Ellis from NNIDR, the action plan identified CALD dementia research priorities and will serve as a guide for researchers and funders on how research can best address the dementia-related needs of Australia's CALD communities.

The plan is underpinned by principles of co-design with communities and a commitment to developing the necessary research infrastructure needed to support this work. The development of the action plan has involved an extensive process of consultation with communities and stakeholders across Australia, which was undertaken by a joint NARI-NNIDR appointee, Dr Samantha Croy.

Two stakeholder consultation workshops were held in Melbourne in November 2018 and Hobart in June 2019, 19 CALD community consultations in six capital cities, and a survey of service providers and researchers. Once the priorities for CALD dementia research were identified and refined, key stakeholders were invited to participate in a Delphi survey to rank the priorities.

Pain on the agenda in Parliament

The importance of managing pain in residential aged care was highlighted in a House of Representatives Inquiry into Quality of Care report. The Inquiry's report has drawn from The Australian Pain Society's resource *Pain in Residential Aged Care Facilities: Management Strategies*. One of the authors was NARI researcher Dr Steve Savvas.

Federal and Victorian election platforms

NARI joined forces with the Council of the Ageing (COTA-Vic) and the Australian Association of Medical Research Institutes in the lead-up to the Federal and Victorian elections to promote the need for more funding for ageing

research and to ensure the voices of older people were heard and respected.

Through its membership of the Australian Association of Medical Research Institutes, NARI called for a commitment to three priorities: to stick to the 2018-19 Budget commitments and deliver a fully funded \$20 billion Medical Research Future Fund by 2020-21 so that Australia's medical research discoveries can be translated into improved health outcomes more quickly and efficiently; to provide continued strong support for new discoveries through the National Health and Medical Research Council; and to attract and retain the best medical researchers by developing sustainable and rewarding career pathways.



MEDIA

NARI contributed to several media debates over the past year. These included welcoming the call for an **Aged Care Centre for Growth and Translational Research** outlined in *A Matter of Care - Australia's aged care workforce strategy*.

The proposed Centre, which has the backing of the Coalition Government, will address barriers to the development and uptake of new ideas within the sector aimed at improving aged care service delivery and the skills of the workforce. NARI said that the initiative would enable aged care researchers to engage more effectively with the expanding export market for aged care skills, knowledge and technologies.

NARI supported in principle all 14 strategic actions areas for Australia's current and future aged care workforce outlined in the report. These include

better reflecting the value and contribution of personal care workers and nurses by improving their pay, identifying the appropriate skills mix of staff in a facility, and developing new career paths so workers can stay within the sector throughout their working life.

The establishment of a \$185 million medical research package focused on ageing, aged care and dementia was pleasing to hear. The ten-year program **Dementia, Ageing and Aged Care Mission** is funded through the Medical Research Future Fund (MRFF). Its focus includes dementia (diagnosis, treatment and prevention); fall prevention and avoidable hospitalisations; and assistive technology to support independence.

The Institute also welcomed the latest strategy supporting carers. *Recognising and supporting Victoria's carers: Victorian carer strategy 2018-22* is the first whole-of- government

strategy to support carers. Over the years, NARI has researched the support, health and training needs of older carers; the research indicates that carers want support for better health and wellbeing. Victoria has 736,600 carers who give their time, effort and love to caring for a family member or friend who needs them. Of these carers, 25 per cent are over 55 years old and more than 162,000 carers are aged 65 years or older.

NARI's media presence grew over the past year with over 120 articles in national, state and specialist media including *The Age* and *The Australian*. Researchers were also interviewed for a range of Radio National shows such as *Life Matters*, *The Health Report* and *The Big Idea*.

"We believe that this new funding will do much to transform existing models of care, tailor preventive approaches, and reshape health and aged care systems to best meet the changing population profile as an urgent priority."

- Debra O'Connor

PUBLICATIONS

NARI researchers continued to have the findings of their work published in internationally and nationally renowned publications, including *Medical Journal of Australia*, *Journal of Family Studies*, and *Australian Health Review*.

In all, NARI's work was featured in 87 peer-reviewed articles, ten reports and six book chapters.

In addition to being published in external publications, NARI is now publishing findings from roundtables and think tanks that it hosts through the year. These publications become a focus for NARI's policy work through the year.

What Makes A Good Old Age? published in 2018, sets out the findings of a roundtable of aged care industry leaders who came together to rethink how and what aged care should be in Australia.

The discussion paper covers a range of issues including the current aged care system, policy context and demographics, and likely demands and drivers into the future. The paper provides answers to the three questions

posed at the roundtable: what should a future aged care system look like in response to changing demographics and the current and future policy environment? What will be required to design the next generation of aged care services to meet this future? and How can data help?

What Makes A Good Old Age? highlights several areas for action including the need to understand better what good ageing and a good death looks like, how to improve home care packages, dementia care, the need to define what is meant by quality, and how to use data better.

The publication provides an interesting insight into current thinking among industry aged care leaders, and especially the need for a future aged

PUBLICATIONS

10
Reports

87
Peer-reviewed articles

6
Chapters

care system to reflect a life course approach to ageing rather than being a last resort to be turned to when the older person and their family can no longer manage.

www.nari.net.au/policy/what-makes-good-old-age

EDUCATION



Over the past year, NARI has continued to deliver professional development to aged care professionals both at its headquarters in Parkville as well as at organisations' sites.

Professional development workshops

NARI hosted four professional development workshops, attended by 117 aged care and health professionals across the community, residential care and hospital settings. Two of these were our popular workshops: 'Assessment, Care Planning and CDC' and 'Advanced Topics in Falls Prevention', with the facilitators delivering up to date evidence and research findings. The other two workshops were new to the

NARI range of workshops, 'Thinking about thinking: Assessment of cognition in older people' and 'More than 'just the blues': recognising and responding to depression and anxiety in older adults'.

NARI Annual Seminar – Elder Abuse: Innovation, research, policy and practice

NARI's 2018 Annual Seminar focused on Elder abuse: Innovation, research, policy and practice. Hosted by Australian Unity, there were over 100 researchers, policy makers and health professionals in attendance.

The day started with a presentation from Trischia Ritchie from the Aged Rights Advocacy Service who spoke about how the service was working with Aboriginal communities to prevent elder abuse. The service uses an intergenerational approach through its Mentoring Camps. Elder abuse in the CALD community was discussed, and current research in

elder abuse, both within Australia and internationally was shared. The day concluded with a summary from Dr Kay Patterson AO, Australia's Age Discrimination Commissioner.

NARI Seminar Series

The "Seminars in Ageing" series, coordinated by NARI in conjunction with Melbourne Health and AUPOA (Academic Unit for Psychiatry of Old Age), University of Melbourne, continued to be well attended, with an average of 35 people attending each week.

There were a broad range of topics presented in the seminar series, from both researchers and health professionals. NARI staff gave several presentations, including Briony Dow, who spoke about suicide among older men; Social Gerontology researcher Meg Polacsek who reported on findings of a study looking at self-management of depression in older adults; and Kathryn Squires from Clinical Gerontology who shared the recently completed Hospital Environment Audit Tool (HEAT). NARI also hosted guest presenters, including Brenda Appleton from Transgender Victoria who spoke about a guide to help LGBTI people to plan an end of life of their choice, *Safeguarding the end of the rainbow*.





Delivering training about dementia

Following on from successfully working with Dementia Training Australia in previous years, NARI once again delivered three two-hour workshops on Dementia in Diverse Populations, covering people from Culturally and Linguistically Diverse backgrounds, Veterans and Indigenous Australians. These workshops were delivered in Melbourne, Bendigo and Launceston.

Community and sector presentations

NARI also provides regular seminars, presentations and forums to aged care and health professionals as well as older people. These have included a webinar on falls prevention to the community care sector through the Victorian Community Care Education and Training Service; falls prevention information for residents and relatives in aged care at Australian Unity; healthy ageing presentations to Rotary Club members and the Commonwealth Superannuants Association; an "Ageing Well at home with broadband" presentation to the Property Council of Australia Retirement Outlook; and presentations around elder abuse to audiologists and the Country Women's Association at their respective conferences.

Dr Meg Polacsek presented as the keynote and facilitated discussion at the Older Tasmanians Suicide Risk and Prevention Workshop, hosted by COTA Tasmania. Meg spoke about suicide facts and figures, mental health, depression and anxiety, and isolation and loneliness in older adults, reducing suicide risk and self-care for aged care workers.

Aged sector presentations

NARI's research was showcased at the 2018 Australian Association of Gerontology annual conference. NARI Director Associate Professor Briony Dow was one of the elder abuse plenary speakers alongside Professor Rosalind Croucher AM (President of Australian Human Rights Commission), the Hon Dr Kay Patterson AO (Australia's Age Discrimination Commissioner), and Gerard Mansour (Commissioner for Seniors Victoria).

Other NARI researchers presented on a range of projects, highlighting both the breadth and depth of the Institute's research portfolio, and the different approaches taken to drive research findings. They included presentations on end of life care, advance care planning in aged care, what works

for screening for elder abuse, using translational technology for older CALD people, and sexual preferences in end of life planning.

International meetings

In August 2018, Dr Susan Malta and Associate Professor Briony Dow attended the International Federation of Ageing Conference in Toronto, Canada. A/Prof Dow presented the findings of two studies, one on the development of an Australian definition of elder abuse, which was a collaboration with the Australian Institute of Family Studies (AIFS) and the other was the study of older men's perceptions of suicide, which was a collaboration with the University of Melbourne.

Mentoring and supervising students

Throughout the year, NARI mentored and supervised over 30 students across a range of disciplines.

COLLABORATIONS WITHIN AUSTRALIA AND INTERNATIONALLY



Over the past year NARI has partnered with new organisations in Australia, and cemented existing international collaborations. All partnerships focus on translating research into innovation and best practice. In Australia, NARI partnered with:

innovAGEING

The aged care innovation network innovAGEING and NARI formed a knowledge alliance partnership program to link research with current industry practices. The alliance's goal is to highlight the importance and impact of innovation in aged care and share NARI's research findings with the innovAGEING network.

Melbourne Academic Centre for Health (MACH)

NARI has become a member of MACH, a leading group of hospitals and medical research institutes. Its membership

reflects the growing importance of ageing both within the MACH network and as a growing national priority. The MACH's existing Ageing and Aged Care Subcommittee, made up of some of Australia's pre-eminent researchers, is expected to greatly benefit from NARI's contribution, not least ensuring that older people are respected and included as partners in their care.

Sax Institute

NARI was welcomed as a member of the Sax Institute during the year. The Sax Institute is a national leader in promoting the use of research evidence in health policy to improving health and wellbeing of all Australians.

International collaborations

Over the past 12 months NARI has established collaborations with The National Institute of Mental Health and Neuro-Sciences (NIMHANS) in Bangalore and Maitreyi College, Delhi University in India, Peking University Institution of Mental Health in China, and the University of Copenhagen.

Over the past 12 months, the International Longevity Centre Global Alliance partners have been working on two new international projects that NARI staff are actively involved in. Both studies were selected as priority areas for the Global Alliance at a meeting in Singapore in May 2018.

The first is a study of the positive aspects of caregiving. The aims of the study are to gain a better understanding of the indicators that may create positive experiences of caring.

The second is a study of long term care involving ten ILC alliance partners and aims to develop an international framework for describing and classifying Long Term Care systems in different countries according to their ability to meet the needs of older people. The Australian lead for this study is Professor Julie Byles from the University of Newcastle.

MOU underway to deliver education and training in China

NARI has entered a Memorandum of Understanding with MEDTime Peking University Health Sciences Centre and Health Australasia Pty Ltd to deliver education and training programs in ageing and aged care in China.



MELBOURNE AGEING RESEARCH COLLABORATION (MARC)



Melbourne
Ageing Research
Collaboration

The Melbourne Ageing Research Collaboration (MARC) has grown significantly this past year. The collaboration now has 18 members, has established a Community Advisory Group, finalised five projects and is underway with five new projects.

Research is currently funded by financial contributions from the partner organisations, philanthropy, donations and the Victorian Government. MARC is managed by NARI, a centre of excellence in ageing research. We are particularly grateful to the JO & JR Wicking Trust for agreeing to support this Collaboration over a five-year period.

Members

MARC is led by the National Ageing Research Institute (NARI) and consists of Austin Health, Australian Unity, Carers Vic, COTA Victoria, Deakin University, Dementia Australia, Federation University, Lyndoch Living, Mercy Health, Monash University, North Western Melbourne Primary Care Network, Northern Health, RMIT University, St Vincent's Health, The Royal Melbourne Hospital, The University of Melbourne, and Western Health.

Community Advisory Group

An advisory group of eight community representatives was set up during the year as a sounding board for project development. The group is chaired by Rhonda Day and members are: Andrew McCallum, Brian Hardiman, Dr Primrose White, Wanda Dopierala, and Kay Bodna Mehmet Varol.

Two seed funding projects are underway

Dr Claire Maddison is being funded to conduct a randomised controlled trial which includes a comprehensive geriatric assessment and interventions in older lung cancer patients.

A/Prof Wendy Bower will tackle the impact of having a fall as a result of going to the toilet at night for older

people in hospital. Despite over 75% of men and women over 70 years waking to go to the toilet, the impact on falls risk is under-recognised. Associate Professor Bower will consider the economics from both an individual and healthcare provider perspective.

Completed projects

End of Life Care services - a pilot study

This project focused on understanding the specific gaps and specific areas of concern in end of life care to develop ways to improve the care provided. The project analysed the health records of people aged 75 years and over who had died, conducted interviews with older people towards the end of their lives, and bereaved family members.

The research showed, among others, that care preferences are poorly documented, accessing appropriate services at the appropriate time is complex, adverse events are common, and families' vulnerability impacts on communication. Specialist palliative care services are more likely for those with a cancer-related death than other causes of death.

Recommendations emerging from the research included the need to integrate informal carers into the system, prepare families and formal carers for the

likelihood that care preferences may change rapidly towards the end of life, and pain management was essential for those living in the community.

Collaborators: NARI, Mercy Heath, North Western Melbourne Primary Health Network, Northern Health, Western Health, North West Metropolitan Palliative Care Consortium.

A pragmatic approach to developing falls prevention interventions in a hospital setting

This project developed and trialed a context specific falls prevention model to extract local data and select and implement interventions based on this data.

Findings emerging from the research showed that patients do not think they are at risk of falling whilst in hospital because nurses will keep them safe; a roadmap for use in complex systems can achieve falls reduction in the hospital setting; staff can be engaged in collecting local data and in selecting and implementing strategies for their unit/ward based on that local data; and falls prevention should be considered cyclical and ongoing in line with the local context.

Next steps include publishing the results, streamlining the data collection process, and consideration of a Randomised Control Trial.

Collaborators: NARI, Austin Health, Melbourne Health.

Preventing avoidable hospital admissions for people with dementia

This project conducted a retrospective audit of 150 emergency department records of people with dementia living in the community across three Melbourne hospitals. Researchers also surveyed 24 staff from two Melbourne hospitals about practices and attitudes towards people with dementia and their carers who attended emergency departments, and conducted a systematic review of the effectiveness of carer interventions in reducing avoidable hospitalisations for people with dementia.

Findings from the research showed that people with dementia and carers could have avoided being admitted to hospital had they sought treatment earlier. Pain and falls are the most common reasons for presenting at emergency departments, and emergency department records do not contain clear information about dementia status.

Collaborators: Austin Health, Dementia Australia, DHHS, NARI, Northern Health, North Western Melbourne PHN, Melbourne Health, University of Melbourne.

Strategies for Relatives (START) online

This project aimed to pilot the START program in Australia using video-conferencing to allow relative carers to access the program in their own homes. Being a carer for a person living with dementia can be challenging and programs are needed to provide carers with support.

In Australia, findings showed that START online was effective at improving carers' coping skills and reducing conflict and that online delivery was acceptable to carers. However, many carers felt the program was too structured, preferring it to be more flexible, personalised and adaptable to their needs and goals.

The findings of this study will be used to inform the development and delivery of support programs. This includes suitable ways to modify the START program to make it more flexible to individual carers' needs.

Collaborators: NARI, Melbourne Health, Dementia Australia, The University of Melbourne, Department of Health and Human Services.

Keeping wisdom at work: creating conditions for a thriving workforce - a pilot study

Focusing on nurses, the largest and fastest ageing cohort in the health workforce, this project investigated the benefits and challenges nurses (aged 45+ years) face when working in the public health system. The objectives of the study were to develop recommendations for individual nurses and organisations on how older nurses should be recognised for their experience and skills, and how age discrimination for nurses working in the public health system can be addressed.

Findings showed that hidden discrimination and fear of discrimination seems to exist with substantial numbers of nurses preferring not to say what groups they belong to. For example, 17.4% of nurses preferred not to say what their sexual orientation was and 3% preferred not to say whether they were Aboriginal or Torres Strait Islander. CALD nurses showed more satisfaction and engagement with their jobs than NON-CALD nurses. Nurses between 25-35 years old experience the highest levels of stress then, closely followed by the nurses between aged 35-55.

The project found that organisations needed to do more to avoid or diminish discrimination.

Collaborators: NARI, VPSC, DHHS, University of Melbourne, Melbourne Health, Northern Health, Austin Health, St. Vincent's Health.

New projects

Providing care for people with dementia in hospital

It has been well established that presenting to an emergency department can be a disorientating, overwhelming and distressing experience for a person living with dementia. Despite this a person living with dementia has a 20% higher probability of visiting an emergency department than someone without dementia. Extensive evidence also suggests there is a lack of gerontology skills and understanding of dementia in emergency departments, and that staff feel challenged by the need for additional time and resources.

This two-phased project will follow a co-design approach with emergency department staff. The first phase will involve focus groups to explore staff's experiences of working with dementia. Given the growing knowledge about

dementia friendly wards, the project will synthesise the current evidence to generate discussion about what may be feasible at a local level. The second stage will involve the co-design of a study based on Stage 1 findings.

Collaborators: NARI, Dementia Australia, St Vincent's Health, Federation University, Melbourne Health, Austin Health, and Western Health.

Avoidable hospitalisation for people living with dementia: identifying patterns and barriers

The factors leading to potentially avoidable hospitalisation for people living with dementia are currently unknown, which means that interventions cannot be appropriately developed and implemented. Barriers to accessing primary health care are considered a major contributor to avoidable hospitalisations. These can include geographic, financial, cultural and health service system barriers. However, other factors are likely to play a part for older people and people living with dementia, including reduced physical health and reduced help-seeking behaviour through diminished recognition of symptoms or ability to communicate symptoms.

The study aims to examine avoidable hospitalisation for people living with dementia throughout Victoria and to identify patterns of avoidable hospitalisation and barriers to accessing primary care. The results will inform service delivery and the development of evidence-based interventions to improve care for people living with dementia.

Collaborators: NARI and Deakin University.

Innovations to prevent falls through mobility

Going into hospital can lead to functional decline for older people, increasing the risk of falls after discharge, leading to injuries, readmissions and poor health outcomes. If risk factors for falls and functional decline are addressed during the stay in hospital, it is possible that this could decrease falls after they leave. Immobility is predictive of both functional decline and falls. Immobility can result in reduced muscle mass and decreased muscle strength. Insufficient physical activity during hospitalization can lead to multiple functional and decline related problems such as falls, frailty, and complex hospital to home transitions.

This study aims to determine the feasibility and impacts of promoting mobility for older inpatients during and after their hospital stay.

Local study sites have been confirmed at two sites, and protocol development continues based on discussions held at local sites.

Collaborators: NARI, St Vincent's Health, Western Health, Deakin University.

Recognition of dying

The first end-of-life project identified gaps in the documentation of older people's care preferences towards the end of life. Safe and high-quality end-of-life care guidelines are available but it is unclear whether these guidelines are sufficiently implemented and used to support staff in the timely recognition of dying.

This project seeks to identify whether gaps exist in the implementation of such guidelines, whether palliative care referrals could be made earlier in the care process and whether staff needs to be further supported in the recognition of dying.

Collaborators: NARI, Melbourne Health, Western Health, Northern Health, St Vincent's Health, Deakin University, Monash University, Dementia Australia.

Mental health – Grief in older people

Grief is a common experience after loss. Older adults are likely to encounter challenging life events like the loss of a loved one, the loss of their home, independence or aspects of their identity more often than other age groups. Acute grief normally evolves over time into integrated grief but for some, grief may be prolonged, severe and impairing. Complicated grief can be associated with higher rates of depression and suicidal thoughts. It is, therefore, pivotal to identify individuals at risk of developing complicated grief, and offer support to older people at important points of transition.

This project seeks to examine the support needs of older people after they have experienced a loss and assess how medical staff identify and respond to grief in older people.

Collaborators: NARI, RMIT, Department of Health and Human Services, Federation University, Deakin University, University of Melbourne, Eastern Health, North Western Primary Health Network.

Education

Several education events were held during the year. These included:

MARC's Annual Symposium:

"Critical Themes in Ageing" at Deakin Downtown focussed on the critical themes in ageing - mental health, delirium and frailty. Attendees had the opportunity to hear from leaders in these fields: Mental Health - Professor Nicola Lautenschlager and Dr Eleanor Curran (both from the University of Melbourne and the North Western Mental Health), Delirium - Professor Peteris Darzins, Ms Penelope Casey (both of Eastern Health and Monash University) and Ms Stephanie Lomax (Safer Care Victoria), and Frailty - Dr

Kate Gregorevic (Royal Melbourne Hospital and Northern Health).

MARC's Dementia Forum:

The Royal Melbourne Hospital hosted 'A Road to Transforming Dementia Care' with keynote presentations by Dr Maree Farrow, Dr Helen Courtney Pratt, and Dr Lyn Goldberg from the University of Tasmania Wicking Dementia Research and Education Centre.

They covered areas in understanding dementia and preventing dementia through massive open online courses (MOOCs), leveraging existing strengths to build dementia friendly communities, and improving the lives of people with dementia through oral health care screening, and qualifying Aboriginal Health workers.

Dr Imogen Clark, a Music Therapist from the University of Melbourne also provided a detailed background on the importance of utilising music therapy for people with dementia and how it can improve and support the quality of their relationships. Dr Anita Panayiotou, NARI Research Fellow, presented

the results from MARC's Preventing Avoidable Hospital Admissions project. Joanne Tropea, Program Manager Melbourne EpiCentre, shared the results of MARC's pilot study START.

'Mind the Gap:'

This Policy Translation Workshop 2019 with the Department of Health and Human Services focussed on the challenging issue of translating evidence into practice and policy. Researchers want the evidence they generate to have impact and policy-makers want their policies to be evidence-based.

Facilitated by Sian Rudge from the Sax Institute, the workshop covered the challenges of designing, developing and translating research into meaningful policy.

The main message to emerge was that knowledge translation is critical to the success of evidence informed policy and practice. Researchers and policy makers need to work more collaboratively to ensure that findings can be effectively applied to policy and practice, and co-designing and co-producing research may result in more meaningful results.



PEOPLE



New Board member

Professor Danny Liew was appointed to the NARI Board in May 2019. Professor Liew is the Chair of Clinical Outcomes Research, Head of the Division of Clinical Epidemiology and Co-Director of the Centre for Cardiovascular Research and Education at Monash University's School of Public Health and Preventive Medicine (SPHPM). He is also a consultant physician at the Alfred Hospital in General Medicine and Clinical Pharmacology.

Honoured for work

Associate Professor Michael Murray

NARI's current Chair Associate Professor Michael Murray received an AM in the 2019 Queen's Birthday Honours for significant service to geriatric medicine as a clinician and educator.



Brenda Appleton

NARI nominee Brenda Appleton received a 2018 Senior Achiever Award for her advocacy, education and research participation on care services for older members of the LGBTI community, particularly transgender people. The Transgender Victoria volunteer was a crucial partner in the development of *Safeguarding the End of Rainbow*, a guide done in conjunction with COTA and Transgender Victoria, with research by NARI researcher Dr Sue Malta. The publication was aimed at LGBTI people plan an end of life of their choice based on their life experiences.

Robert Helme Research Award

NARI research fellow Dr Anita Goh was awarded the annual Professor Robert Helme Research Award through NARI. She was honoured for her outstanding research across several fields including her work with Dr Anita Panayiotou in developing and successfully delivering a new half-day training program about assessment and management of cognitive decline - Thinking about Thinking.

The Rob Helme award for outstanding research goes to a NARI researcher who has shown academic excellence, as demonstrated in their project work, in academic publications, contribution to teaching and broader impact.



Derek Prinsley Award

Carol Pestinger was the 2018 recipient of the Derek Prinsley Award. She has a range of roles and responsibilities, including administrative support to the executive, secretarial support to the Board, support and mentoring to the administrative team, support to fundraising and more recently support to HR in recruitment. Carol also contributes to NARI in a voluntary capacity, providing administrative support to the Australian Ageing Research Foundation - NARI's fundraising arm. She is also consumer representative on the University of Melbourne's Human Research Ethics Committee (HREC).

AAG Lifetime Achievement Award

Associate Professor Briony Dow received a lifetime achievement award for her contribution to the Australian Association of Gerontology.

Vale Professor Derek Prinsley

NARI sadly farewellled Professor Derek Prinsley, the Institute's first director who died in April 2019 aged 97. Derek was a pioneer geriatrician. His career spanned medical practice in three continents and over 50 years of active clinical practice. He and his family came to Australia in 1976. Soon after Derek became the first Professor of Geriatric Medicine at the University of Melbourne on the initiative of the then Dean David Penington and the medical administrator John Shepherd, and established a research institute at Mt Royal Hospital: originally called the National Research Institute for Gerontology and Geriatric Medicine - now NARI.

One-stop shop book aims to improve pain management in aged care

NARI's pain researcher Dr Steven Savvas is one of the authors of a revised and expanded book and additional resources for pain management in residential aged care homes. The book aims to be a "one-stop shop" to help improve care and minimise pain among residents, and help Australia's aged care workforce to identify, assess and manage pain felt by people in their care. Produced by the Australian Pain Society, the book is user friendly and includes new supporting resources.

Moving into Residential Care: A Practical Guide for Older People and Their Families

NARI researcher Professor Colleen Doyle co-authored *Moving into Residential Care: A Practical Guide for Older People and Their Families* with Gail Roberts during the year. The book has been written for people making the move in to a care home, or the families and staff about to assist them. The book is an antidote to the psychological stress that this transition can have on older people. It provides essential tips to guide people along the way.

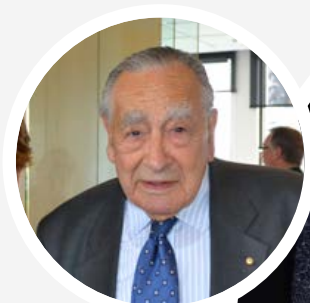
The authors based material from interviews with a wide sample of people who had recently moved into care and a review of existing literature about the process to produce a guide that follows the whole journey from considering a move into care, making the move and settling in, offering advice on each step of the way.

NARI shared the findings of its round table *What Makes A Good Old Age?* with Australia's Shadow Prime Minister Bill Shorten, Shadow Minister for Ageing and Mental Health Julie Collins and Assistant Shadow Minister for Ageing Senator Helen Polley at a think tank in Melbourne. The discussion focused on residential aged care, the workforce, access to home care packages, sustainable funding, and dementia.

Tall Poppy Award

Dr Bianca Brijnath, NARI's director of social gerontology, received a prestigious Tall Poppy Awards in Victoria for her work in mental health and culture.

The Tall Poppy Campaign was created in 1998 by the Australian Institute of Policy and Science (AIPS).



THE AUSTRALIAN AGEING RESEARCH FOUNDATION



The past year has been productive for the Australian Ageing Research Foundation with several major events held attracting new supporters and welcoming back existing friends. Funds raised at each event were directed to research into mental health and dementia.

Seeing from within

NARI supporters were treated to two special private screenings of *Seeing from Within*, an extraordinary film that explores the life of Barbara Blackman, the former wife of celebrated artist Charles Blackman. Although, legally blind, Barbara Blackman views her blindness as “different way of seeing.” The film screening included a champagne reception, private screening and Q&A with the film’s director, John Swindells.

Annual gala dinner

The annual gala dinner was a night to remember with an enthralling insight into the life and career of Sir John Monash, a distinguished Australian, beautiful operatic performances, and the chance to learn much more about NARI’s work. Over 100 NARI supporters were entertained by Michael Bennett who shared stories of his great grandfather, Sir John’s career and life as an engineer and military man, his social life and ability to solve problems. Operatic performances by soprano Lee Abrahamsen and tenor Michael Lapina with accompanist Konrad Olszewski set off the evening which was emceed by Greg Hocking AM.

Guests included the Hon Kay Patterson AO, Australia’s Age Discrimination Commissioner, the Hon Mary Wooldridge, Victorian Shadow Minister of Ageing and former federal Senator the Hon Rod Kemp.

Opera in Melba’s Garden at Coombe

Opera in Melba’s Garden at Coombe has become a regular in the NARI fundraising calendar. In March 2019, NARI was honoured that its patron, the Honourable Linda Dessau AC, Victoria’s first female Governor of Victoria, spoke at this annual event.

End of year tax appeal

Fay Brassington, a long-time volunteer for NARI, was the face of the 2019 end of year tax appeal. Fay first became involved with NARI 20 years ago, and continues to support the organisation as a research participant.

Since being ‘introduced’ to NARI, she has been involved in many focus groups, including a recent one looking at elder abuse. She took part in the INDIGO study which looked at whether a home-based physical activity program supported by goals and a mentor improved levels of fitness.

Now, at 86-years-old, she is volunteering with BeFriendas, where volunteers are matched with an aged care resident to have conversations about everyday topics and events in a friendly way without discussing health problems or emotions.



END OF YEAR TAX APPEAL



GOVERNMENT

- National Health & Medical Research Council
- Australian Institute of Family Studies
- Commonwealth Department of Health Dementia and Aged Care Services Fund
- Dept of Health & Human Service (Vic)
- Respect Victoria
- Northern Health

PHILANTHROPIC

- Alzheimer's Australian Dementia
- The Angior Family Foundation
- COTA Victoria
- Dementia Australia
- Erica Foundation Pty Ltd
- Gandel Philanthropy
- Jack Brockhoff Foundation
- JO & JR Wicking Trust
- Lord Mayor's Charitable Fund
- National Heart Foundation of Australia
- Research Foundation
- The Samuel Nissan Foundation
- State Trustees Australia Foundation

NATIONAL AGEING RESEARCH INSTITUTE

- Christopher and Jane Johnson
- Barbara Watson
- Dorothy Birch
- Nelva Griffiths
- Gary Croci
- Patricia and Don Edgar

AUSTRALIAN AGEING RESEARCH FOUNDATION

- Alan Castleman
- Anagha C Khedkar
- Barbara Woodward
- Barrie Winzar
- Barry Johnson
- Carola M Marley
- Debra O'Connor
- Derek McMillan
- Dr Bernadette Taylor
- Dr Kylie Staggard
- Eamonn Kelly
- Elaine Quin
- Findex
- Frances Briony Dow
- Geoffrey & Jane Harris
- Graeme Blackman
- Iris A Leslie
- J. Cowie
- John Waters

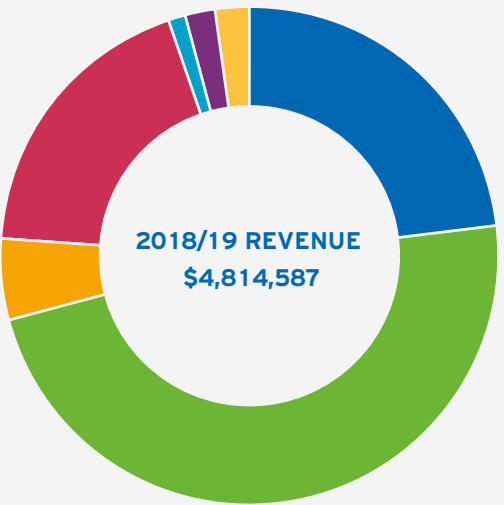
- Josephine and Roy Ranzenhofer
- June Gleeson
- Kay Patterson
- Mandy Gabb
- Margot Melzak
- Marilyn Piccard
- Mary Gilder
- Mary Yessam
- Merran Samuel
- Michael Barron
- Michael Fleming
- Michael Murray
- Miki Brotzler
- Mrs A Rodrigues
- Nadia Taylor
- Pam Hocking
- Peter Reilly
- Ray Harvey
- Rodski
- Stephen Mason
- Susan Lo
- Suzanne Hasthorpe
- Tom and Ruth O'Dea
- Valma Allaway
- Verona Edith Lea
- Victorian Private Geriatric Hospitals (VPGH Ltd)
- Yvonne Sartori

Donations to NARI can be made online at any time at www.nari.net.au/foundation/donate. A donation of \$2 and over is tax-deductible.

FINANCES

Statement of Comprehensive Income for the year ended 30 June 2019

	2019	2018
REVENUE		
State government grants and contracts	\$1,118,426	\$1,114,399
Federal government grants and contracts	\$2,295,744	\$1,391,882
Other contract research	\$253,558	\$397,950
Philanthropic grants and contracts	\$898,604	\$769,637
Education and training	\$52,750	\$52,370
Interest and Miscellaneous	\$100,952	\$71,560
Donations	\$94,553	\$79,414
Total Revenue	\$4,814,587	\$3,877,212
EXPENDITURE		
Employee Benefits	\$3,116,537	\$2,654,627
Project costs	\$872,658	\$463,387
Research support	\$261,955	\$242,813
Other expenses	\$395,003	\$327,123
Total Expenditure	\$4,646,153	\$3,687,950
Surplus for the year	\$168,434	\$189,262

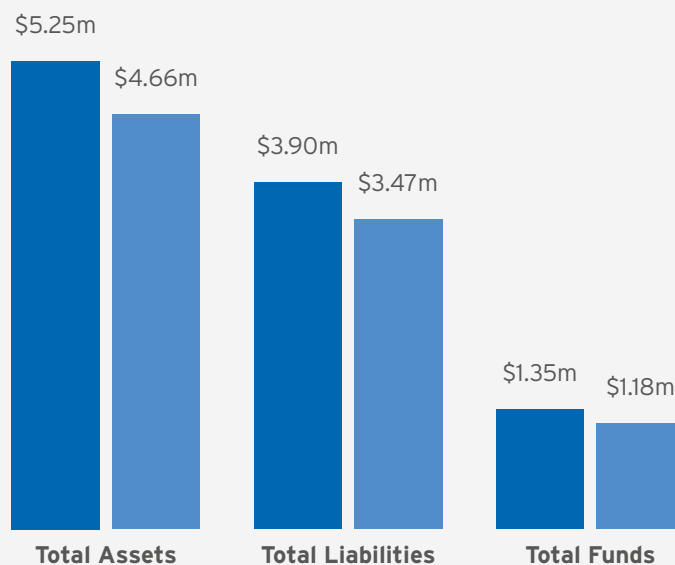


REVENUE BREAKDOWN

- State government grants and contracts
- Federal government grants and contracts
- Other contract research
- Philanthropic grants and contracts
- Education and training
- Interest
- Donations and miscellaneous

Balance Sheet as at 30 June 2019

	2019	2018
ASSETS		
Current assets	\$4,969,276	\$4,389,600
Non-current assets	\$286,053	\$274,718
Total Assets	\$5,255,329	\$4,664,318
LIABILITIES		
Total current liabilities	\$3,765,749	\$3,330,385
Total non-current liabilities	\$136,392	\$149,179
Total Liabilities	\$3,902,141	\$3,479,564
Net assets	\$1,353,188	\$1,184,754
Reserves	\$132,354	\$74,097
Retained earnings	\$1,220,834	\$1,110,657
Total Funds	\$1,353,188	\$1,184,754



Full audited financial statements are available at www.nari.net.au

HOW YOU CAN HELP

Australia will have six million people over the age of 65 by the year 2050 and they will comprise 25 per cent of the population.

Growing older is a positive experience for many people but it also brings worries about health and living with chronic disease. With your compassion and generosity, NARI can continue its research to improve the health and wellbeing of older people. There are many ways you can get involved and make a difference.

For further information about how you can support NARI, please call 03 8387 2305 or email us at info@nari.edu.au



MAKE A DONATION



Your donation, no matter how large or small, will help us fund important research into ageing or buy vital equipment. Donate online at www.nari.net.au/australian-ageing-research-foundation/donate

BE A VOLUNTEER



NARI's research program relies on the support and interest of older people participating as volunteers. We are always recruiting people for our projects.

Alternatively, you can volunteer your skills to help in the office. If you are interested in becoming a NARI volunteer please go to: www.nari.net.au/about-us/volunteer-general

LEAVE A BEQUEST



Leaving a bequest to NARI is a special way of leaving a gift for generations to come. It also allows us to plan for the long-term future with more certainty. www.nari.net.au/support-us/bequest

INVITE US TO SPEAK



Invite us to speak to your group and learn more about the vital work of NARI and how it brings research to life.

INVITE US TO TRAIN



Invite us to train your staff. Our researchers deliver workshops, seminars and forums on a broad range of areas from dementia through to falls, from consumer care through to caring for carers.

FOLLOW US OR LIKE US



If you are on social media, why not like us on Facebook or follow us on Twitter:

Facebook: National Ageing Research Institute

Twitter: @NAgeingRI

NARI is a national leader in ageing research, producing work of international significance to apply to real lives, particularly in falls and balance, pain, dementia, physical activity, healthy ageing, psychosocial and mental health, and health systems evaluation.



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