PUBLIC ACCOUNTS AND ESTIMATES COMMITTEE

Inquiry into the 2025–26 Budget Estimates

 $Melbourne-Thursday\ 12\ June\ 2025$

MEMBERS

Sarah Connolly – Chair

Nicholas McGowan – Deputy Chair

Jade Benham

Meng Heang Tak

Michael Galea

Richard Welch

Mathew Hilakari

WITNESSES

Ingrid Stitt MLC, Minister for Ageing;

Jenny Atta, Secretary,

Naomi Bromley, Acting Deputy Secretary, Hospitals and Health Services,

Janelle Hearn, Executive Director Performance and Commissioning, and

Professor Zoe Wainer, Deputy Secretary, Community and Public Health, Department of Health;

Priscilla Radice, Chief Executive Officer, Victorian Health Building Authority, Victorian Infrastructure Delivery Authority; and

Argiri Alisandratos, Deputy Secretary, Disability, Fairness and Emergency Management, and

Michael West, Director, Seniors Policy, Equality and Elder Abuse Reform, Department of Families, Fairness and Housing.

The CHAIR: I declare open this hearing of the Public Accounts and Estimates Committee.

I ask that mobile telephones please be turned to silent.

On behalf of the Parliament, the committee is conducting this Inquiry into the 2025–26 Budget Estimates. The committee's aim is to scrutinise public administration and finance to improve outcomes for the Victorian community.

I advise that all evidence taken by the committee today is protected by parliamentary privilege. However, any comments repeated outside of this hearing may not be protected by this privilege.

All evidence given today is being recorded by Hansard and is broadcast live on the Parliament's website. The broadcast includes automated captioning. Members and witnesses should be aware that all microphones are live during hearings and anything said may be picked up and captioned, even if said quietly.

As Chair I expect that committee members will be respectful towards witnesses, the Victorian community joining the hearing via the live stream and other committee members.

Witnesses will be provided with a proof version of the transcript to check. Verified transcripts, presentations and handouts will be placed on the committee's website.

I welcome the Minister for Ageing the Honourable Ingrid Stitt as well as officials from the Department of Health and DFFH. Minister, I invite you to make an opening statement or presentation of no more than 5 minutes, after which time members will ask you some questions. Your time starts now.

Ingrid STITT: Thank you, Chair. I begin by acknowledging the traditional custodians of the lands on which we meet today, the Wurundjeri people of the Kulin nation, and I pay my respects to elders past and present and to any Aboriginal and Torres Strait Islander people who are here with us today.

Visual presentation.

Ingrid STITT: Victoria's population is ageing. In 2021 there were almost 1.5 million Victorians aged 60 years or older, which is 22 per cent of the total population. By 2046 that number is expected to increase by around 60 per cent to more than 2.3 million people. That is why the 2025–26 budget invests \$34.6 million to support our nation-leading public sector residential aged care services. This includes funding to continue providing high-quality care through nurse-to-resident ratios and delivering beds at the new Kingston aged care facility and Hesse Rural Health.

\$22 million will maintain funding for our home and community care program for younger people, HACC PYP, while we consider and continue to work with the Commonwealth through the NDIS review. \$2.7 million will

boost the Victorian aids and equipment program, \$7.6 million will strengthen medication practices in residential aged care and \$7.5 million will deliver a minor capital renewal program to improve physical infrastructure in our PSRACS in line with changing Commonwealth standards.

Investments in this year's budget continue our government's strong record in supporting aged care services. Later this year I look forward to opening a new 150-bed public aged care facility in Kingston, which will mark the completion of stage 3 of our modernisation of metropolitan public sector residential aged care strategy. This follows the completion of the new 90-bed Berengarra facility in Kew and the 120-bed Murrenda facility in Wantirna. In addition, we are delivering new facilities across regional Victoria, including in Camperdown, Mansfield, Rutherglen, Maffra, Numurkah, Cobram and Orbost. I am proud that Victoria has the largest public sector residential aged care footprint in the country. While many other states rely on private providers, our government continues to prioritise the needs of older Victorians, particularly in regional Victoria, and we know there are also benefits to our broader health system, as demonstrated by the fact that Victoria has the lowest number of hospital bed days used by people waiting on residential aged care, with older Victorians to be discharged in a more timely way from hospital when compared to other states. We know that the quality of our PSRACS is due in large part to the dedicated staff who provide an outstanding level of care. This is evidenced by the average star rating of 4.56 out of 5, compared to the national average of 3.14.

We are also continuing to deliver the ageing well action plan, implementing initiatives to prevent and address elder abuse, supported by the 2023–24 state budget investment of \$6 million over four years. This includes Seniors Rights Victoria and the statewide elder abuse helpline, which provides free information and referrals, legal advice, advocacy and educational matters specifically related to elder abuse. We have established the new Senior Victorians Advisory Committee, chaired by Dr Suzanne Harrison, and the committee comprises a very diverse group of senior Victorians who are providing advice directly to government on the needs and experiences of older Victorians.

I am also really pleased to note that the 2025–26 budget delivers free weekend public transport for seniors card holders from 1 January 2026, helping our seniors remain connected to their family and their communities. The seniors card program, seniors festival and Victorian Senior of the Year Awards celebrate and support senior Victorians to engage in their local communities. There are over 1.4 million Victorian seniors card members, with around 1500 new cardholders joining the program each week. The 2024 Victorian Seniors Festival delivered 3750 free or low-cost events to more than 150,000 older Victorians. In addition, we recognise the contribution of older Victorians through the senior of the year awards and, together with the Premier and the Lieutenant-Governor Professor James Angus AO, I presented awards to 15 senior Victorians, including Professor Manjula Datta O'Connor, who received the Premier's senior of the year award. Thank you, Chair, and I look forward to answering questions from the committee.

The CHAIR: Thank you very much, Minister. We are going to go to Mr Welch.

Richard WELCH: Thank you, Chair. Thank you, Minister. Thank you, officials, and good morning. Minister, just on the matter of elder abuse, there were a number of changes to the integrated model of care last year, and you referenced that in the introduction there. Are there elder abuse prevention workers based in Traralgon, as there were before the changes?

Ingrid STITT: Thank you for the question. Obviously, it goes without saying that everybody deserves to live free from abuse, no matter what their age. We know that elder abuse is a hideous and insidious situation. The Royal Commission into Family Violence certainly recognised elder abuse as a form of family violence experienced by older people. The 2025–26 state budget, outside of my direct responsibility, provides \$123.2 million over four years to prevent and respond to family and sexual violence.

Richard WELCH: Just specifically in Traralgon, Minister. Traralgon?

Ingrid STITT: What I can take you to is the elder abuse work that sits within my portfolio, but there are a number of programs that are not within my direct responsibility that are delivered by the Minister for Prevention of Family Violence.

Richard WELCH: So the elder abuse prevention workers are not under your purview?

Ingrid STITT: What I can take you to is the initiatives that address elder abuse that are funded through DFFH.

Richard WELCH: No. 'Are there any elder abuse prevention workers in Traralgon?' is the question.

Ingrid STITT: There are eight elder abuse prevention networks across the state which my portfolio supports. I am not sure whether that is the same group that you are asking about, but I have provided –

Richard WELCH: In Translagon there is very, very high demand, and there was a waiting list there. This is why the interest in Translagon in particular. There was a very long waiting list, and there was high demand for this service. I just wanted to clarify if there are any of these officers now in Translagon.

Ingrid STITT: What I can clarify for you is the eight networks that are supported through my portfolio, which are those in Peninsula Health, Eastern Community Legal Centre –

Richard WELCH: But I am not interested in the broader –

Ingrid STITT: But I am helping you understand the delineation between my portfolio and others.

Richard WELCH: What I need to understand is the answer to my question, which is: is there anyone in Traralgon?

Ingrid STITT: The answer to your question is you are asking the wrong minister. You need to ask the Minister for Prevention of Family Violence that direct question. I have programs that are delivered –

Richard WELCH: It is not in your purview?

Ingrid STITT: No. I have programs that are delivered through the seniors programs, including some initiatives that I work with the Minister for Prevention of Family Violence on in relation to those networks, but also a training program that helps support workers within the Orange Door identify and respond to examples of elder abuse that might come for them.

Richard WELCH: Thank you, Minister, I will move on. What is your department doing to ensure there are localised services in locations such as Traralgon regarding elder abuse?

Ingrid STITT: Again, I think that there are different responsibilities under my seniors and ageing portfolio, and the specific -

Richard WELCH: Relevant to the ones that are, though – if we could just go to those.

Ingrid STITT: Okay. Well, I am happy to take you to the specific programs that my portfolio supports around elder abuse. There is a combination of programs, so in the 2023–24 state budget there was an allocation of \$6 million over four years. The seniors programs and participation output also contributes to some of the initiatives within my portfolio.

Richard WELCH: What does that pay for?

Ingrid STITT: It continues to deliver eight elder abuse prevention networks across the state, which is what I was attempting to take you to earlier. It also supports Seniors Rights Victoria to provide services, including their statewide elder abuse helpline. We have recently also announced a program that will support the Orange Door workforce to have specialised training around identifying and acting on any instances of elder abuse that they see come before them. I would also point to the national plan to end —

Richard WELCH: That is not helping me in regard to Traralgon at all. The integrated model of care – was that under your purview?

Ingrid STITT: I am sorry, Mr Welch, I think you are confusing my responsibilities with the responsibilities of other portfolio ministers.

Richard WELCH: Right. Okay. So that is not under your purview?

Ingrid STITT: I have taken you to the specific initiatives that we have in DFFH which go directly to an elder abuse response. I would also indicate to you that we have recently – I think I mentioned this in my presentation to the committee – established the seniors ministerial advisory committee. One of their key focuses that they have told me they want to do further work on and provide advice to government around is how to address elder abuse. Obviously this is a significant concern amongst older Victorians, and we are seeing, sadly, an increase in not just physical and mental abuse but also financial abuse. I know that committee will be looking closely at initiatives they want the government to address.

Richard WELCH: Which network covers Traralgon?

Ingrid STITT: Well, I can take you to where those elder abuse prevention networks are located. They are Peninsula Health, Eastern Community Legal Centre, Ballarat Community Health, Better Place Australia, Barwon Community Legal Service, Mpower and Holstep Health. So there is a network –

Richard WELCH: Which one covers Traralgon?

Ingrid STITT: Better Place Australia covers Traralgon.

Richard WELCH: Okay. The former commissioner for senior Victorians provided advice to the government. When he retired, Mr Mansour was replaced by a committee. Mr Mansour undertook regular research and surveys to understand the needs of senior Victorians. Who is doing that kind of work now?

Ingrid STITT: Thank you. At the outset I want to acknowledge and thank Mr Mansour for the incredible amount of work that he did. He was in the position for 10 years, which is a significant innings, and I have got nothing but respect for him and the work that he undertook over that period of time. Under our Victorian government appointment and remuneration guidelines, 10 years is the maximum that a —

Richard WELCH: Minister, could you please just – who is doing -

The CHAIR: Thank you, Mr Welch. We are going to go to Mr Tak.

Meng Heang TAK: Thank you, Chair. Minister, Secretary and officials, I refer to budget paper 3, page 49. Can you please explain how the \$34.6 million investment allocation under the 'Aged and home care' initiative for 2025–26 will strengthen public sector residential aged care services?

Ingrid STITT: Thank you. Obviously this is a key area of the portfolio. It is important to begin by recognising, though, that the Commonwealth government is the primary funder and regulator of residential aged care services nationally. However, we do have a very strong network of public sector residential aged care services in Victoria. We are proudly the largest public sector aged care provider in the country. Our PSRACS network provides really vital social safety nets for older Victorians, particularly those who live in rural and regional areas, those with complex health and social needs and those who, without that kind of support in their local community, would face much longer stays in hospital or be forced to relocate out of their communities and away from their loved ones to a facility not in their own home town.

The \$34.6 million that has been allocated in the 2025–26 financial year represents a very important investment in the resilience, the sustainability and the quality of our public aged care system. It builds on our government's longstanding commitment to ensuring that PSRACS can continue to deliver that care, which exceeds national benchmarks in both quality and accessibility, by providing that supplementary funding. Currently there are over 700 residential aged care facilities in Victoria – that is across the whole system, private and not-for-profit – and 164 of those are operated by public sector residential aged care services. Whilst that represents just 9 per cent of the total bed capacity, these services are absolutely essential. Ninety per cent of them are located in rural and regional Victoria, and in 52 of those communities, the PSRACS is the only residential aged care facility in the town. And they are not just critical health assets, they are also significant local employers in many instances of our fabulous health workforce.

We have got PSRACS that are integrated within a number of our public hospitals, and they are supported by an additional four non-government providers. Co-location is an important issue because, within public health services, it is a strategic strength, particularly when some of these facilities are in regional areas. The facilities are a continuum of care. They strengthen patient flow across the health system, and they reduce unnecessary

hospital admissions by enabling older people to transition more quickly into residential aged care in their local area. The integration is not only of clinical benefit, but it is also economically responsible because by lining up our aged care capacity with our hospital infrastructure we are delivering a cost-effective care model and ensuring that our smaller rural health services remain viable, because they have got both the health service and the aged care facility operating out of the same location.

Our investment in the 2025–26 financial year will help ensure PSRACS continue to meet their legislated nurse-to-resident ratio across the system. It is no coincidence here that the success and the strength of that model means that Victoria has one of the highest star ratings compared to the national average. That is all because of the fact that we have legislated nurse-to-resident ratios, and we have fantastic nursing staff right across our PSRACS. Further, the funding supports that specialised high-acuity care for residents with complex medical needs, including wound care, enteral feeding, diabetes management and palliative care, and conditions such as chronic kidney failure, multiple sclerosis and motor neurone disease. Increasingly, as Victorians age in place more they are entering our residential aged care facilities older and often with much more complex care needs. PSRACS are equipped to deal with these high-care aged care residents. Not all of the private providers are able to do so, so we do play a significantly important role. We are also leading the way with aged person mental health services within our aged care facilities, providing specialist residential care for older people with a mental illness who cannot live at home or cannot live in mainstream aged care residential settings.

It is also important to acknowledge that the investment is not just about services and staffing. It is about giving older people that dignity and that agency as they age and the ability to age in place within the communities that they have often grown up in around their loved ones and their broader friendship circles. Particularly when you go to some of the more remote rural services, you can really feel that. It does feel like a home, and they are within their own community. I met a group of women at a PSRACS in regional Victoria recently who had all gone to school together and had kind of grown up together, lived in the same community all their lives and then had all ended up in the public sector residential aged care service in their community. It made a huge difference to the quality of their lives. Whilst we are really proud of the care models and the service systems we have in Victoria, I am particularly proud that we also provide that dignity of care later in life.

Meng Heang TAK: Minister, on that dignity of care for our older people, I could not help but say that Kingston aged care is a wonderful place where when you step into the front door it says 'welcome' in many languages. You have been to the place to do a sod turn. Minister, with funding support for the development at Kingston, can you tell me about that project a little bit more, please?

Ingrid STITT: Yes, and it was great to be able to go there with you with our hard hats and see the scale of that project. It will be amazing, and thank you for your advocacy on behalf of the local community. As I mentioned previously, we have included in this year's budget an additional \$34.6 million to support high-quality care and to operationalise additional beds that are coming on line, including those at the redeveloped Kingston Centre. The Victorian government has made a significant investment towards this project of \$139.6 million, and that will deliver a 150-bed public sector residential aged care facility at the Kingston Centre in Cheltenham. This replaces a number of outdated services, including the AG Eastwood Hostel. It consolidates the Allambee Nursing Home, the Yarraman Nursing Home and the Mooraleigh Hostel into this one site. It is designed, as we were able to see, for best practice care in an environment that promotes independence and privacy, and it includes dementia-friendly features. It is four storeys, and it comprises 11,688 square metres, which is a very big facility. It is part of the Kingston Centre, which is a community-focused campus that will be providing integrated health and wellbeing services for older Victorians.

Residents will be accommodated in single bedrooms with private ensuites, which might seem like a small thing, but let me tell you, it is a big deal for our public sector aged care residents to be able to have that privacy and that dignity of having their own room, not sharing a room, and having their own ensuite. The way in which the project has been designed, they will be grouped in small households so that they can maintain that homelike environment. The design maximises the natural light and offers a lot of indoor—outdoor opportunities for the residents, with terraces and landscaped gardens, and that will really foster that community connection and promote independence. As I mentioned earlier, it has all been designed in a dementia-friendly way. It is a fabulous example of what this kind of investment can deliver and the quality of care that that will provide people in the Kingston community, and I cannot wait to open it.

Meng Heang TAK: Thank you, Minister.

The CHAIR: Thank you very much, Minister. We are going to go to Mr Puglielli.

Aiv PUGLIELLI: Thank you, Chair. Good morning. I am just on budget paper 3, page 124. Minister, in my electorate I meet regularly with older community members of multicultural backgrounds, particularly of Chinese diaspora communities. They talk to me about the barriers that they experience, not only in being older people in the community but in the compounding effects they experience from language barriers and the need for targeted support so that they can fully engage with programs and services in the area. Minister, are there any dedicated services in this budget to support older folk who are culturally and linguistically diverse?

Ingrid STITT: Thank you. It is an excellent question, and it is something that we have to be particularly mindful of as we continue to plan for what the ever-increasing needs will be for an ageing population, and because Victoria is such a diverse community – I think we have half the population either born overseas or with a parent born overseas – it is going to be something that we need to constantly be vigilant around. I know that a lot of our PSRACS already do a power of work in making sure that they are culturally safe and that they are taking into consideration the diverse nature of the community. That goes to things like having bilingual workforces and thinking carefully about how people from different backgrounds are able to practise their culture and traditions and even simple things like the food that is served. I know this is something that our public sector residential aged care services already take a lot of time to think about and deliver.

We are in the process at the moment of assessing some expressions of interest around not-for-profit aged care providers that might be in a position to deliver to particular parts of our diverse community aged care facilities. The department is currently working through those processes and that evaluation and the expressions of interest, and the department will be making some recommendations and then in turn advising those applicants about the success or otherwise of their expressions of interest. But I must say that it is something that we need to continue to plan carefully for, making sure that we have services that are able to provide that unique support for communities who are from particularly the larger diasporas, who I know have got a real interest in making sure their older people are cared for appropriately.

Aiv PUGLIELLI: Thank you.

The CHAIR: Thank you very much, Minister and Mr Puglielli. Minister and officials, thank you very much for taking the time to appear before the committee today. The committee will follow up on any questions taken on notice in writing, and responses are required within five working days of the committee's request.

The committee is going to take a short break before beginning consideration of the multicultural affairs portfolio at 10:35 am. I declare this hearing adjourned.

Witnesses withdrew.