

Following are my concern and questions.

We are a 20 bed, not for profit facility in rural Victoria offering low level care.

Our building was purpose built 20 years ago.

Bonds

We have managed very well until now.

Our present bond is \$171,500.00. We use the Pensioner Allowable Limit for Accommodation Bonds figure supplied by Dept Health and Ageing.

Concerns

Rural housing prices are considerably lower so a higher bond is not an option for us. Average house price in Nathalia \$230,000.00 at present.

Interest rates are low so returns from bond investments are low.

Loss of retention. This would mean the loss of well over \$40,000.00 per year

Cost of proposed bond insurance.

Changes to ACFI **has** cut our funding already and as new residents come in; unless adjustments are made we will be impacted even further.

Other concerns and points

Will we still be able to remain a low care facility? Our local hospital has recently built 20 high care beds, our facility was purpose built for low care. Both facilities are first class and complement each other in our small rural community.

Will we be compensated if we have to supply equipment, podiatry, medical dressings, continence aids etc etc etc?

What is “significantly refurbished”?

With the clawback of funds, how much per day will we lose?

The ANF wants a nurse on duty 24/7. Apart from not being able to acquire nurses we cannot to afford them.

Our regulation requirements are over the top now and all this points toward more red tape and administration costs.

Please remember the smaller rural facilities in all these proposed changes.

Unless funding matches the true cost of care or rural facilities receive a large supplement under the new legislation many will have to be shut down.

May I just finish by saying again, without alteration to the proposed changes, I am afraid our facility will have to close.

Kaye Bernhardt

Administrator

Barwo Homestead

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22/04/2013.