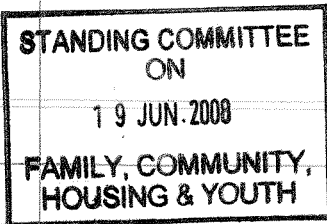


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16.6.08

Dear Sir/Madam,

I am pleased that the House of Representatives Standing Committee on Family, Community, Housing and Youth has announced a parliamentary inquiry to investigate how carers can be better supported in their vital role.

In April 2001 after 14 months in hospital as a result of a spinal abscess and hypoxic brain damage our 28 year old son returned home to a house that had been extensively modified (at our own expense) to accommodate his new electric wheel chair, commode and lifter and parents that would care for him 24/7.

Despite the constant care of feeding, washing etc during the period since April 2001 we have received very little respite.

In 2007 we applied for a short term break with "Community Connect Respite - Ageing Carers" a new flexible Respite Service providing respite packages for ageing parent carers of people with a disability in the Bankstown, Fairfield and Liverpool local Government areas. It is funded by DADHC.

However we were informed we did not meet the age criteria. We are 62 and 61 this year and our son is 36. Priority of access is given to carers aged 70 years or over who are caring for a son or daughter with a disability. A maximum of 4 packages (4 weeks) per year applies. The age needs lowering and based on need.

Currently my husband and I receive 5 hours once a fortnight respite from Homecare (the maximum allowed) while our son receives 5 hours once a fortnight respite from Community Connect Respite.

Constantly caring without short term breaks (overnight) has affected our physical health. Although our son receives 35 hours of care per week from Homecare as he is classified as a high needs client he actually receives $17\frac{1}{2}$ hours.

ie He is 6 feet 3 inches tall, weighs 105 kilos and has had leg spasms therefore his care is $17\frac{1}{2}$ hours \times 2 carers = 35 hours (per week).

This formula means the most vulnerable people receive only half the care they need placing more caring duties on the ageing parents (carers). (We do not have enough time to have our son put to bed on a weekend.)

Other areas of great concern to me as a carer are;

- the expenses associated with caring, for example, altering houses, equipment, medicines, special foods, special vehicles with lifters etc
- the need for improving and injecting more funds into the PADP and CASS Schemes
- the transport and parking problems
- the income and/or employment issues for carers.
- social isolation and family structures etc. for example, families are smaller today and often scattered.
- the need for more homecare workers in the

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community who are better trained and better paid so they remain in this form of employment, and finally, peace of mind to know that well resourced supported accommodation is available when parent carers can no longer care for their child in the home.

Yours faithfully,
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