

Submission to Senate Community Affairs References Committee inquiry into Aged Care.

I wish to submit the following comments. I write from my background as a worker in the aged care and disability industry. I am also a Board member of the local aged care facility.

Th terms of reference point B.

Accreditation and monitoring of standards has become an intolerable burden to the aged care industry I believe. It is a major financial cost to the industry. Registered nurses are not involved in the care of residents; their time is consumed in writing voluminous reports to justify funding requirements and standards. This is I believe an appalling waste of money. The people with the highest level skills in the facility are caught up in compliance paperwork. Residents therefore do not have the benefit of their expertise. Registered nurses who work in the facility with which I am involved complain bitterly about the recording requirements. The Minister has stated repeated that resident categories will be reduced and the paperwork burden eased but as yet this has not occurred.

Streamlining categories is essential I believe. Perhaps some simpler system of funding should also be investigated, for example an amount per bed per annum, no matter what the resident category is. Based on my 25 years experience in the industry, no one enters a Nursing home or Hostel who does not need to be there. The ACATS are the gatekeepers.

Reference point C.

Aged care facilities are not the place for younger people. There are increasing numbers of younger people surviving catastrophic accidents, special arrangements for accommodation are required for this group. There are insufficient resources available to provide adequate care at home for such young people. I understand the waiting list for the High Needs Pool of the Home Care Service of NSW is about 3 years.

Reference Point d.

In NSW and certainly on the Mid North Coast the Home and Community Care program cannot meet current demand, let alone the potential future demand, particularly for dementia care. Higher than average numbers of aged people reside all along the North Coast of NSW. Lots of these people in the Nambucca have no family support in the area. I believe this to be true for the Nth Coast in general. After the Sydney property boom there have also been increasing numbers of sea changers moving to the area.

The high numbers of older people impacts on transition from hospital back to home. Services just aren't available. Devolution of health dollars to community care supposedly to happen as a result of early discharge practices has not occurred. Hospital services are completely stretched. New hospitals have been built with fewer beds than the old ones; Coffs Harbour is a prime example. Older people are referred to as BED BLOCKERS. I believe this is totally unacceptable.

Perhaps a return the notion of convalescence is required. Many older people need a longer recuperation after an illness or surgery. They often do not need specialised nursing care as such, but a safe supervised place with meals provided and the ancillary services to get them back on their feet. There is a shortage of physiotherapy services and other ancillary health services. In our area there is a six-week wait for physiotherapy as an outpatient. Lack of such services is I believe a contributing factor in poor recovery for many of the older people with whom I have contact. People in my experience are often sent home from hospital too soon and then a rebound situation occurs. If there were an interim place to go for a few weeks outcomes may be better and perhaps placement may not be required.

Lack of transport infrastructure enhances the disadvantage of older people and people with disabilities. Specialist medical services are located in the major centres, I have known of cases where people do not attend follow up visits or cannot access services because of lack of transport.

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