

Committee Secretary  
Senate Finance and Public Administration Committee  
Department of the Senate  
P.O. Box 6100  
Parliament House  
Canberra  
ACT 2600

Dear Sir,

I am a Registered Nurse with a Grad. Dip in Pharmacology and Drug Evaluation and have been employed by Norfolk Island Hospital for many years.  
Part of my role is Aged Care Coordinator for both in-patients and outpatients.

I have been aware of the increasing needs and demands of the Aged for many years and believe that current funding levels for Norfolk Island residents are insufficient to meet the expected quality service provision outcomes. Certain services readily available to the Aged in Australia are not provided on Norfolk Island.

There is also an inequity in user payments between different groups of Aged Care Consumers living here.

As you are aware Norfolk Island is an external territory under the control of Australia and has limited self-governing powers.

Norfolk Island provides its own Social Services System (pensions and healthcare related benefits) and its own Healthcare system as it is not eligible for Medicare or the Pharmaceutical Benefits Scheme.

There is no funding or infrastructure currently available to provide a "Homecare" service on Norfolk Island. DVA recipients residing in Australia are eligible to apply for homecare services ie. Basic house cleaning, shopping, washing, limited gardening. This service is not available to veterans living on Norfolk Island.

Those people receiving Australian or Norfolk Island pensions are also ineligible as there is no service despite an increasing need.

A community Nursing Service is available three days per week and funded by "The Emily Channer Trust". However there is insufficient funding to extend the service to 7 days/week or even 5 days/week.

I believe an extension of funding to establish a "Homecare Service" on Norfolk Island would free up the District nurse to be able to better utilise the 3 days per week she is

allocated. Basic shower assists could be handled by a Homecare nursing aide and not by the registered nurse. Essential services would be provided by the RN (monitoring health, medications, blood pressure, BSLs etc).

An efficient Homecare Service would help to keep Norfolk Island's aging population independent and in their own homes for as long as possible.

DVA recipients receive more benefits than their Australian and Norfolk Island counterparts with another example of inequality of service being the Rehabilitation and Continence Programs. Dept. Veteran Affairs offers a wide range of appliances, continence supplies, and home improvements. DVA recipients residing on Norfolk Island can be assessed and equipped with what is necessary to increase their safety, mobility and quality of life. These services are not available to ordinary Australian and Norfolk Island pensioners who have to hire or purchase their own rehabilitation needs. Again this is due to a lack of finance and infrastructure.

There is no hostel-type accommodation on Norfolk Island, nor is there Nursing Home Accommodation. The only Aged Care Facility on Norfolk Island is incorporated in Norfolk Island Hospital. All clients, long-term and respite care clients are well cared for but there are limited beds available and the population is aging.

The Norfolk Island Hospital does not have a secure area or room for dementia patients, violent patients or those with psychiatric problems. A new hospital is in the planning stages and it is hoped that this will be built in stages commencing with a functional and modern Aged Care facility. However there is insufficient funding for this to proceed in the near future.

As the population ages so do their medical and pharmaceutical needs increase.

Not all Australian pensioners residing on Norfolk Island receive medical and hospital benefits. DVA recipients receive the same medical and pharmaceutical benefits as those living on the mainland. Norfolk Island pensioners and those receiving an Australian benefit and who qualify for Norfolk Island healthcare benefits receive free hospital, medical and pharmaceuticals similar to the NHS system. At this stage there is no contributing payment for PBS drugs. However ineligible senior citizens have to pay the full costs.

Pharmaceuticals are not subsidized and freight to Norfolk Island is extremely expensive so that many of the essential drugs for the aged are very costly. As Norfolk Island is not eligible for the PBS the cost of \$100 drugs is very high as are asthma preventers, many of the cardiac, cholesterol lowering drugs and chemotherapy drugs etc. This can lead to poor compliance with medical regimes especially asthma programs and can therefore lead to deterioration in the client's condition.

Diabetic Senior Citizens are particularly disadvantaged as Diabetes Australia will not allow them membership and therefore they are unable to access cheaper insulin, glucometers, BSL strips etc. This can lead to reduction in BSL monitoring and a worsening of the Diabetes.



Norfolk Island residents are also excluded from joining The Ostomy Association and are also not permitted to purchase supplies through this association. This means greater cost, inconvenience and often difficulty in obtaining supplies.

There is no public transport on Norfolk Island.

When a senior citizen loses his or her license due to age and infirmity they lose their independence and their self-esteem. This leads to increased dependence on family, friends and the community. There is a part-time taxi service and DVA recipients can use this service for visits to the doctor, physiotherapist etc and claim this back from Dept Veteran Affairs. No such rebate /allowance is available to the rest of the community. There needs to be a limited bus service/pick up perhaps 2-3 times daily for shopping, banking, doctor's appointments, outings. There is no funding to provide a part-time driver for such a service yet such a service is provided and funded on the mainland of Australia.

There is also no funding for a "Carers" pension on Norfolk Island.

In Australia veterans and pensioners requiring part-time or continuous care in their own homes, can apply for funding to provide such care to enable them to remain at home.

A meals on Wheels service is provided (at a small cost) by Norfolk Island Hospital. However this service relies on volunteers or the District Nurse to deliver these meals as there is no funding for a designated driver or service provider.

Although at this stage there is no funding and infrastructure to support Homecare and ancillary services on Norfolk Island The Hon. Geoff Gardner, Minister for Tourism and Health has taken on the responsibility of developing a Homecare Service for the residents of Norfolk Island. A preliminary meeting was held in July 2008 to discuss this proposal but has not progressed further. Therefore an initial Commonwealth grant to kick start this service would be of great benefit to this isolated community.