

To: The Secretary,
Senate Finance and Public Administration Committee,
PO Box 6100,
Parliament House,
Canberra. ACT 2600

9th November, 2008.

Dear Committee Members,

Re: Submission to inquiry into residential and community aged care in Australia.

1. Funding levels: Totally inadequate to meet required needs (Quality comes after obtaining service!)

In Cairns, Far North Qld there are currently 150 people on the waiting lists for either CAP or EACH or EAHCD packages. Elderly people have been sent home from hospital with support only from over stretched HACC services. These people require greater care, ie more direct service e provision in care hours. Some have died while waiting for a package.

There are a further 50 people in the Cairns Base Hospital (an already stretched facility) waiting for placement in Nursing homes. Often these people are relocated to other smaller regional hospitals eg Mossman, Atherton, Mareeba. Innisfail as there is little hope for Nursing Home placement.

This dislocation away from family is damaging to all concerned. If there were more Community Care packages, with adequate hours, hospital beds whether in Cairns or regional centers, would not need to be used as surrogate Nursing Homes. I believe this practice is wide spread through out Australia.

Many people would like to worry about the quality of care they receive either Community Care or Residential care. Since they are getting nothing, this is not a matter of great importance to them.

Of the people lucky enough to have a Community care package, quality and quantity to meet needs becomes an issue. These are both often inadequate however, people are reluctant to complain as there is little or no choice ie Agency directed service provision only.

The current model used for allocating Nursing Home beds and Community Care packages does not take into account specific regional area needs eg Far North Queensland. On one hand I have been told by public servants that Cairns is an "anomaly" in the system. On the other that Cairns is approximately half way down the list of Australian cities in terms of the adequacy of service provision.

Either way, it is a very sad state of affairs!

2. Costs involved: The following suggestions are cost neutral!

Maximizing the dollar value into direct 'hands on' services needs to become a priority for Governments and consumers alike.

A form of Consumer Directed Funding where a larger proportion of the current funding (approx. \$45,000 per person on an EACH package) needs to be delivered to the elderly person, not to the agencies buildings, on costs, administrators salaries etc. Many families would be happy to follow the example of Mr George Vassilou in Melbourne and Care Manage there own package with the agency responsible for the wages to workers and meeting Government reporting regulations for a smaller fee than currently extracted.

Alternatively, a Voucher system (which would meet the needs of rural and remote Australians) needs to be explored.

3. Measures to be taken to address regional variation of costs of service.

See above.

A choice of service provision models eg Agency based Community care or Consumer Directed funding.

4. Inequity between user payments. I'm sure this exists.

5. Ration between community, high care & low care is appropriate.

See point 1.

As all Governments have pursued a policy **of not providing adequate numbers of Residential care places**, elderly people are required to stay at home. Obviously the amount of Community care places should be increased to meet this need.

All residential facilities funded by government need to be High care places to maximize the use of these facilities. Low care people could be cared for within the community eg family home or within Assisted living/supported accommodation facilities attached to Nursing Homes. This would cater for couples who may have one person in the Nursing Home and the other requiring less support or simply a secure place to live close to their loved one.

I have written several letters and had meetings with local members of Parliament and senators including Barnaby Joyce, Jan McLucas, Jim Tournour as well as public servants in the Dept of Health and Ageing and the myriad of sub departments encompassed within this department. Apart from Barnaby Joyce my suggestions for Consumer Directed funding models to be explored and become a choice for those Australians wishing to pursue this model appear to fall on deaf ears!

With out maximizing Community Care hours, more older Australians will be pushed into Nursing Homes as families are unable to cope on existing paltry services currently provided.

I look forward to some response to my submission.

Yours sincerely,

Australian Citizen