

# Community Service as a Lived Experience: The Consumer View – Adam Johnston





1. High need  
Homecare client  
since 1987

2. Morning and  
evening support  
(2 hrs per day)  
relieves Mum of  
some of my  
heaviest/most  
complex care  
needs

3. It works!



# Government is not a business

Home Care Service of NSW  
ABN:40 572 876 701



## STATEMENT Community Support Program For the Period 1/07/15 to 30/10/15

Chatswood HCS

Enquiries:  
02 8424 2500

Statement Date:  
December 2, 2015

Annual Funding: \$37,525.18

Statement Number: CSP100158-1

### Section 1: Service Details

Opening Balance: \$12,610.92

Dates	Personal Care	Domestic Assistance	Respite Hours	Social Support	Other	Total Hours	Total Cost
01/07/15 – 24/07/15	48.00					48.00	\$3,429.48
25/07/15 – 21/08/15	56.00					56.00	\$4,001.07
22/08/15 – 18/09/15	56.00					56.00	\$4,001.07
19/09/15 – 30/10/15	84.25					84.25	\$6,019.46

Total Service Costs: \$17,451.08

### Section 2: Purchase Details

Purchases as negotiated \$ 0.00

### Section 3: Adjustments

Carry Forward Balance 2014-15 \$ 0.00

### Section 4: Summary

Service Costs for the Period: \$17,451.08

Purchase Costs for the Period: \$ 0.00

Adjustments for the Period: \$ 0.00

Total Costs for the Period: **\$17,451.08**

Period Closing Balance: **Overspend of \$-4,840.16**

Total Annual Funding Remaining \$20,074.10

Please note this statement is for your reference.

# Overspend \$-4840.16



# **Government has taken the language & structure of business**

**10 – 20 years ago**

**Government funded**

**Government run services**

**Clear legislative framework**

**Complaints: Ministers, Ombudsman,  
Parliament, service standards**

**Staff – female, English speaking, often  
Nursing students or women with  
school-aged children**

**Today**

**Government subsidised**

**Outsourced to charities/NGOs**

**Government procures services  
via commercial contract**

**Complaints: Ombudsman,  
NGO Provider, customer  
charter**

**Staff – male and female,  
immigrant, English as 2<sup>nd</sup> or  
3<sup>rd</sup> language, background?**



## **From citizen to contractor**

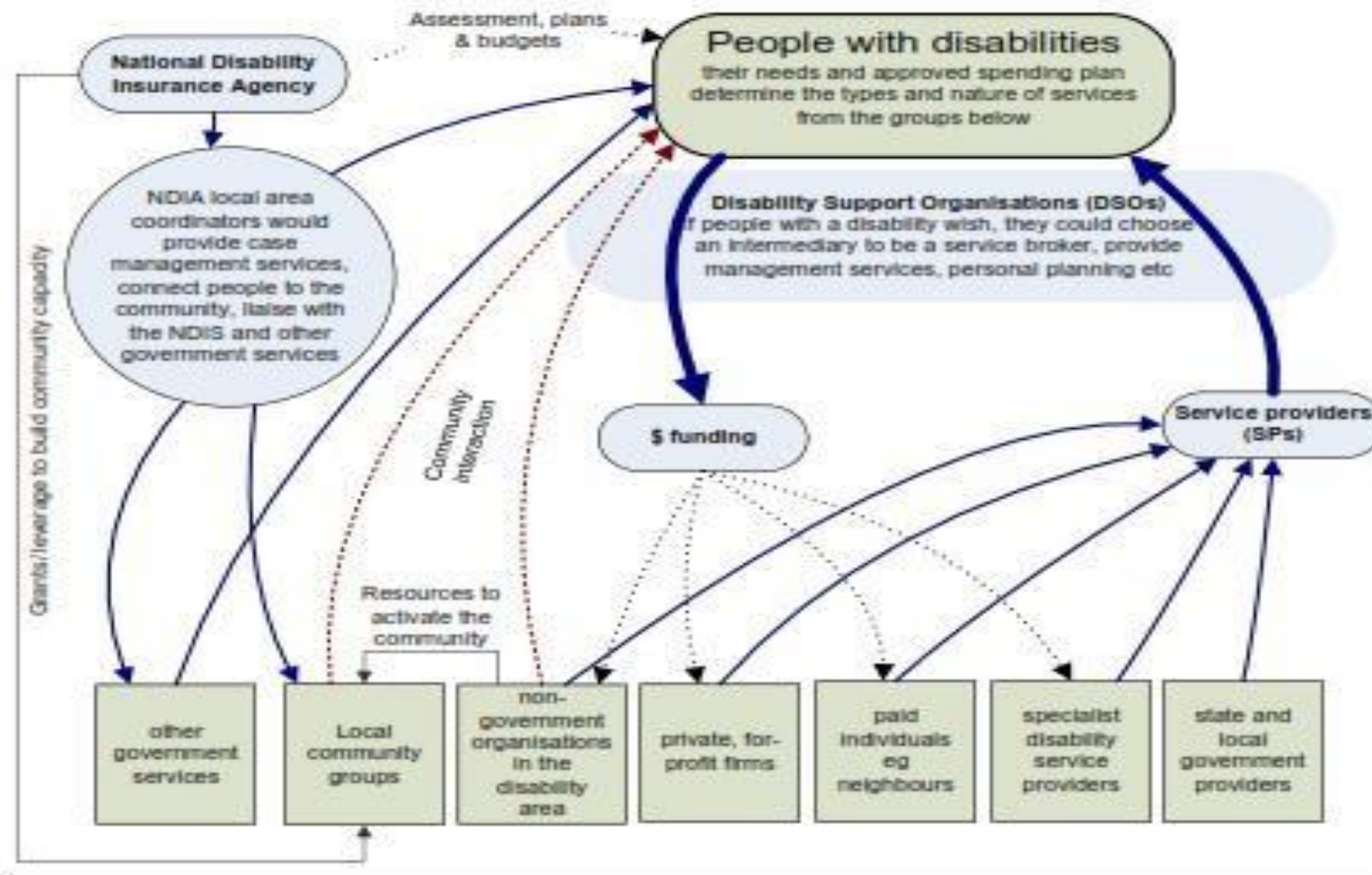
- 1. Loss of public assurance and service accountability (loss of Dept. of Ageing, Disability & Homecare)**
- 2. Financial sustainability? (Slide 2)**
- 3. Balancing the books/loss of service – suddenly it's my problem**

**ADHC was the back office, but now it's me**

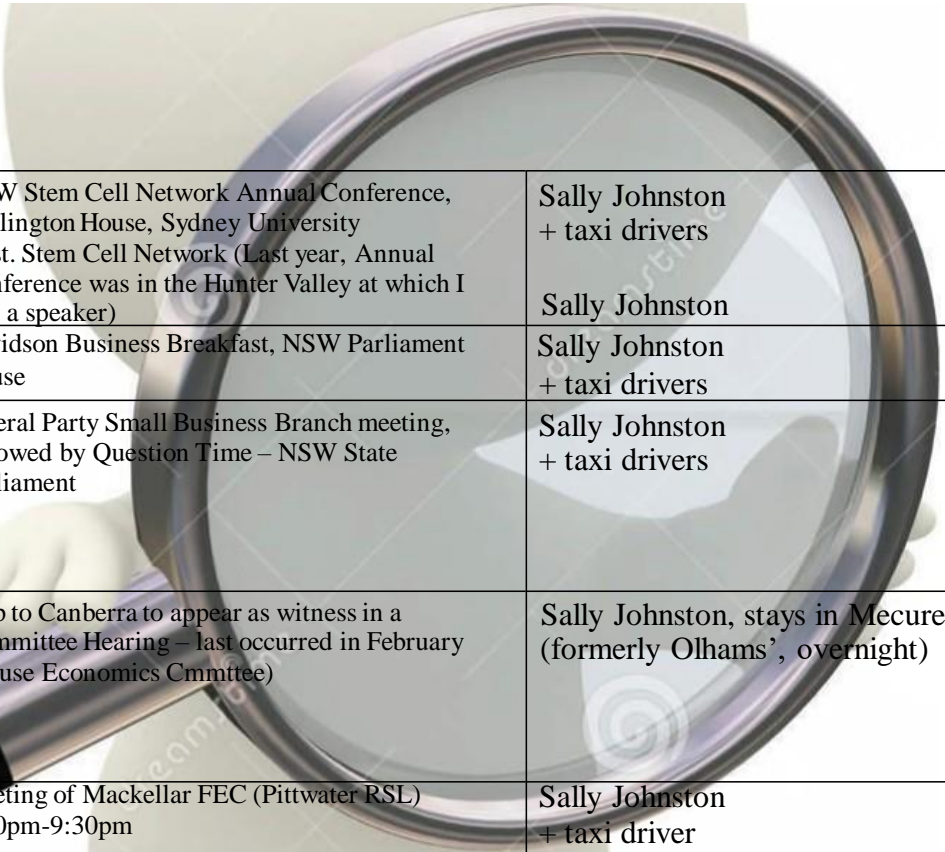


## A picture only an economist could love

Figure 3 From a consumer's perspective, the NDIS will give them the means to choose supports that best meet their needs







Various	NSW Stem Cell Network Annual Conference, Darlington House, Sydney University Aust. Stem Cell Network (Last year, Annual Conference was in the Hunter Valley at which I was a speaker)	Sally Johnston + taxi drivers  Sally Johnston	AGMs held annually, but there are other meetings I go to in the city, in the evening, on a fairly ad hoc basis
February/March	Davidson Business Breakfast, NSW Parliament House	Sally Johnston + taxi drivers	Once a year
Various	Liberal Party Small Business Branch meeting, followed by Question Time – NSW State Parliament	Sally Johnston + taxi drivers	About 4 times a year
Unknown	Trip to Canberra to appear as witness in a Committee Hearing – last occurred in February (House Economics Cmmttee)	Sally Johnston, stays in Mecure Canberra (formerly Olhams', overnight)	Once a year
Unknown	Meeting of Mackellar FEC (Pittwater RSL) 7:30pm-9:30pm	Sally Johnston + taxi driver	Quarterly

**1 page from my 26 page draft NDIS plan**  
**Should I have to disclose to this extent?**  
**Would any other group have to do this??**

## Solutions

### Japanese robot bear nurses soon to care for rapidly ageing population

Posted 24 Feb 2015, 7:00pm Tue 24 Feb 2015, 7:00pm – ABC NEWS WEBSITE



**Photo:** [The 140kg Robear can lift frail patients from a wheelchair to a bed or a bath. \(AFP: Jiji Press\)](#)

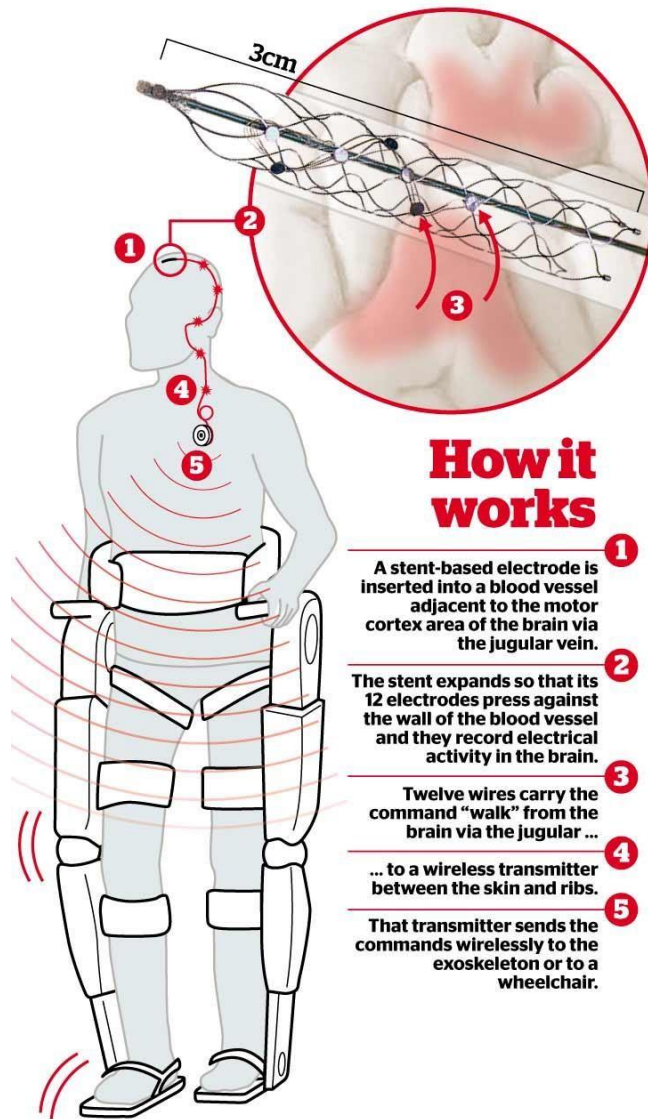
**Related Story:** [Japan 'needs immigration revolution' to boost dwindling workforce](#)

**Map:** [Japan](#)

Robotic nurses with cute bear faces developed by Japanese engineers could soon be the future carers of the nation's growing elderly population.

Japanese research institute Riken developed the Robear to support healthcare workers, with enough power to lift frail patients from bed and support unstable patients on their feet.





### How it works

- 1 A stent-based electrode is inserted into a blood vessel adjacent to the motor cortex area of the brain via the jugular vein.
- 2 The stent expands so that its 12 electrodes press against the wall of the blood vessel and they record electrical activity in the brain.
- 3 Twelve wires carry the command "walk" from the brain via the jugular ...
- 4 ... to a wireless transmitter between the skin and ribs.
- 5 That transmitter sends the commands wirelessly to the exoskeleton or to a wheelchair.

## *Human trials for Australian-made bionic spine to start next year - February 9, 2016*

– SMH - Patients left paralysed by injury or illness could be back on their feet again, thanks to a breakthrough by Melbourne researchers who have designed a revolutionary bionic spine. With human trials set for next year, the device implanted into the brain will enable patients with spinal cord injuries to control a robotic limb by harnessing the power of thought.

<http://www.smh.com.au/technology/sci-tech/human-trials-for-australianmade-bionic-spine-to-start-next-year-20160202-gmjgdj#ixzz3zik2ip00>

# Conclusions / Questions?

1. We need to distinguish NDIS hype from reality. Is the money really there?

2. Is there really a viable commercial industry?

3. Is there really a savvy customer base who have the social or economic power to exercise freedom of choice?

4. While we are rolling out NDIS, what are we NOT investing in? (Medical technology)

5. When an NDIS participant runs out of money, who is the "safety-net"?

