Thank you for taking the time to read my concern with regard to Aged and Community Care.

I quit Nursing Home and Community Care working as an AIN, and am one of thousands of mature aged nursing staff over fifty who have given the game away. The obvious reasons are stretched stress levels and poor pay rates not reflective for the job and the endless on going training required to update on skills levels to best provide appropriate care needs to the elderly.

However, my reason for writing you is a recent news article I read in the Courier Mail. Doctors are now joining the chorus for the plight nurses and care staff are bailing, is the over sized administration cash drain, before the actual service providers, nurses and assistant staff get what's left, and expected to do the impossible with less numbers. it is a fact Community providers and Nursing Homes cut back on floor staff numbers, before the stick is waved at Admin, I attended a staff meeting in 07 with a provider who's manager made the following statement... "As you may not be aware, the Government did not increasing the funds allocated for us to operate this year and we may be forced to cut back on nursing numbers". the administration side of this provider grew with two new positions created within a few short month's of the meeting, three nurses had quit in the same period and not replaced.

My point is this. The Governments hand out a massive portion to provide extra care services to the Aged Care community. But this amount is small figures when you stop and think how much is spent on health, Australia wide. The perspective, nurses and clients in the system is... how much of the money will get pass administration to do any good for the intention?. The parent carers of a client once asked me how much money do I get an hour to come into their home to provide the service "respite" I said it was a ball park figure of twenty two dollars, the parent carer then asked what happens to the rest of the forty seven dollars the family are granted for extra care services to deliver on the respite in the first place, I was perplex and asked how the parent carer came up with the figure, the carer explained they have the financial EPA for the care of their son with both Federal and State Government allocations for funding, the figure was joined funding from both Federal and State bodies, I asked if they have any issues they wished to discuss is best taken up with the coordinator for the care service provider, the parent carer then explained they had tried on numerous occasions to speak to the coordinator and received "sorry the coordinator is out of the office, leave a message and the coordinator will call you back" the parent carer did and didn't get a response. I asked if they wish I can organise an advocate to take the matter up with the provider, They declined it was a waste of time. I did follow up with the coordinator why no respond, the reply "they are a nuisance, they do not understand the complexities with how the service is administrated" I replied, "if that's your opinion then either do I understand", the reply "if you keep asking questions like that you will find you have no roster here".

My question is this, Take 55% for administration, this leaves a ball park figure of around 45% for the intention to deliver in home and community care by those on the ground delivering the actual service to the clients. Why does this equation seem so wrong, how did the wheels fall off the system ?.

My conclusion is... The only chance to fix the system for the future needs of Baby Boomers is at the cost of those now in the system suffering a very lop sided ethic how things are done. To get it right and best prepare will require a rethink on the perspective, the one at present is disjointed, a classic example of the system at the moment is a TV series: Yes Minister, episode: Compassionate Society, the outcome may well be the same with compromise, for the sake of future Aged care.

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Lou Mullen.