

21 March 2011

Caring for Older Australians Productivity Commission GPO Box 1428 Canberra City ACT 2601

Dear Commissioners,

As advised in our submission dated 10 August, Legacy Australia is a not-for-profit organisation which has been providing care, support and advocacy for families of deceased veterans since 1923.

The largest group of beneficiaries enrolled with the 49 clubs in Australia are widows of defence force personnel who served in World War 2. At March 2010 there were 99,194 widows aged over 65 of whom 82,908 were aged over 80. About a third of these widows do not have entitlements other than access to a service pension. Legacy therefore has an interest in the group that are entitled and the group who share the same experiences as the older pensioner population generally.

This submission, in response to the draft report on 'Caring for Older Australians', seeks to highlight matters in Legacy Australia's role as an advocate for its beneficiaries. Some of these issues have already been raised by Legacy's representative in meetings between the National Aged Care Alliance and the Commissioners and the Minister for Ageing.

The specific comments in this submission cover the following topics:-

- Interface between health care and aged care
- Role of ESOs in 'Gateways'
- Preference for single rooms
- Future costs of residential care
- Accepted proposals
- Safety of residents

Interface between aged care and health care

One area of confusion for recipients of aged care services, particularly in residential care, is access to health care services, what is the provider required to provide and what needs to be accessed by the resident using their health care entitlements.

It is suggested that the final report include clarification about this interface between aged care and health care for Medicare and Repatriation health care beneficiaries and the proposed increased flexibility for the provision of non-acute health services (sub-acute, post-acute, palliative care, including pain management, maintenance and end of life care) in both residential and community based care.

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Role of ESOs in Gateways

Ex-service organisations (ESOs) like Legacy have significant advocacy and welfare roles within their communities and it is suggested that this be recognised in the planning phase of 'Gateways' and, where appropriate, that ESOs have a visible presence within a 'Gateway', particularly in those towns and suburbs where there are significant numbers of veterans and widows. In particular, there is concern that the 'special needs' status of Veterans and their entitlements which are administered by the Department of Veterans' Affairs will be at risk if staff of 'Gateways' are not familiar with such matters.

Preference for single rooms

The use of a two bed room as a model to price fees and charges for residential aged care is not acceptable, the overwhelming preference is for a single room with en-suite bathroom.

Future costs of residential care

Whilst Legacy is primarily concerned about widows, it is suggested that the final report include some modelling comparing the current cost of residential care with a possible future cost to a partner when one remains in the family home and one enters residential care. Whilst it is noted that the proposed Australian Aged Care Regulation Commission (AACRC) will monitor and recommend a schedule of prices for subsidised services, there is apprehension about the potential for escalation of costs of care and accommodation, particularly the foreshadowed significantly increased labour costs, and some modelling would enable consumers and their families to plan care options.

Accepted proposals

The proposal to eliminate the high/low care distinction, greater flexibility of community based care to meet assessed needs as an entitlement and a single assessment tool with a single 'Gateway', together with a complaints management process which is at arms length from the Department of Health and Ageing are consistent with Legacy's previous submissions and are supported.

Safety of residents

The vulnerability of many residents in aged care because of their diminished capacity suggests that quality of care and safety are significant issues and possibly require a separate Commissioner in the proposed Australian Aged Care Regulation Commission. It is further suggested that consideration be given in the final report to a locally based system of 'official visitors' to advocate for residents. Whilst the Community Visitor's Scheme is successful in helping to meet the social needs of residents, not all residential aged care facilities participate in the scheme and CVS visitors do not have the same authority as formally appointed official visitors would have.

Legacy Australia Council is willing to discuss these matters with the Commissioners or their staff if required.

Yours sincerely,

Legatee John Pepperdine Chairman Legacy Australia Council