## Submitted by Vince Watson Chairman of the Aged and Nursing Home Committee.

I thank you for the opportunity of making this submission on behalf of our Branch.

The submission is prepared by our above Chairman who has researched and lobbied various political parties over the past five years. The observations made are from hands on experiences. over a five year period during which time his wife has been a resident of a high care extras home situated on the south side of Brisbane. During those five years he has visited the home six days of each week, been involved in Resident Committees, exposure to management changes ,and the day to day running of the home.

We would wish to bring before the Commission various matters raised in the current report or perhaps not raised in the report.

**STAFFING**. I have interviewed confidently several staff members with some 10 years each of service. They are adamant that they do no have sufficient trained staff, with hours being cut at all times. It is extremely strange that at time of certification inspection by the relative department, staff numbers were doubled for the show.

**ACCOMMODATION BONDS.** Presently nursing home providers are allowed to charge a Bond on low care and High Care Extras. A Bond cannot be demanded by the provider for High Care unless both parties agree. Differing from charges the current system is negotiated between the Provider and the proposed resident or their family. As reported in The Australian Newspaper the proposed resident or their family are babes in the woods compared with many current Nursing Home Providers. The system is being abused where proposed residents are selling their homes for say \$IM and the provider is taking the majority of the sale price, which is then not accountable for Centreline purposes. The resident then receives a full pension and with no assets or income and pays very little for charges. As reported in the Australian Newspaper, Government run nursing homes, Church run Nursing Homes and Private Run Nursing Homes Bonds vary from say \$120,000 to well in excess of \$1M. Amounts that are allowed to be charged for Bonds should be strictly controlled and made under law as are charges that are controlled by Department of Ageing. Many Providers need to be reigned in as they have abused the system for too long and will continue to do so if Bonds are to be allowed for ordinary High Care.

## TAXATION REBATE FOR MEDICAL AND NURSING HOME

**EXPENSES.** Rather than take away any taxation benefits by way of tax rebate of 20% after the first \$1500 (to increase to \$2000) Seniors Health Card is based on taxable income. As many self funded retirees are paying more than \$55,000 per annum, Nursing home fees plus medical and personal

taxes those who are not fortunate to have their affairs set up in allocated pensions are forced to sell capital items such as property or shares. Once their taxable income goes over \$50,000 for single and \$80,000 for couples they lose their seniors health card. Many are on 10 scripts a month and are forced to pay \$33.50 for each script. This does cut out after about five months. Surely these people who have worked hard, saved their money to provide for their old age and paid their taxes all their lives and are paying their way in Nursing Homes with little or no expense to the Government deserve better. I have been advised by the Shadow Federal Minister for Aged that there is about 3% of our population in Nursing Homes and the average stay is some 2/3 years. Noel Whittaker a well known financial writer and Advisor in Queensland has published a very interesting article in the Courier Mail that the average person in a Nursing Home pays more in the last 2/3 years of their life in medical and Nursing Home expenses than the whole of the rest of their lives.

<u>USER PAYS.</u> Published in the Australian are figures of increases of 20% each ten years for people over 80 years of ages up to 2050. Some of these people will still have 25 to 30 years of working life before they may require nursing home care. If it is going to be user pays perhaps a scheme could be considered to collect from these potential users on the way in rather than hit those who have already paid their taxes and have no further means.

THE LUCK OF THE DRAW. As previously stated only some 2/3% of the population will go into a Nursing Home. The worry to the now residents of Nursing Homes who have provided to look after their old age when they see their nest egg disappearing is enormous. They will die of financial worries rather than old age. It would appear that it would be like winning Lotto to fall off your perch at home rather than be faced with these expenses at the end of your life. Surely the proposed scheme is discretionary towards the few unfortunates who are faced with the end of their lives in the Nursing Home System.

This submission is made with sincerity from a very much hands on experience.

VINCE WATSON
Chairman AIR BRISBANE SOUTH AGED AND NURSING HOME
COMMITTEE.