Mrs. Dianne Swarbrick 1Bligh Park NSW 2756

#### Attention – The Admin. Officer

## **CARING FOR OLDER AUSTRALIANS**

With regards to the above subject, please accept my submission, for Caring For Older Australians from an **extremely concerned person** who has been caring for them, for a long time now, namely:-

Our very dear close family friend Mr. Mark Noble, (a substitute father figure for my husband and a grandfather figure to our three sons) who suffered from not only age related illnesses but also from Dementia – died aged 92 years old in 2007 after a fall from his nursing home bed and suffered a fractured hip resulting in necessary surgery and was deemed not able to be rehabilitated due to his dementive state and was left to wait for his time to die, bed ridden till his last breath.

My mother, Mrs. Marjorie Whitelaw, who was a victim of Alzheimers and suffered various falls, which resulted in several hospital stays, at Nepean and Hawkesbury hospitals, much to her detriment, and once she was finally admitted to a Nursing Home, deteriorated very quickly and passed away in November, 2010, aged 83 years old, from a sudden and probable heart attack so I was informed. No notification as to her sudden decline in her condition.

My mother-in-law, Mrs. Marie Swarbrick, who is currently 89 and a half years old, and who is suffering from various conditions, such as Type 2 diabetes, Angina, and other heart problems, High Blood Pressure, to name a few, before she was diagnosed with Dementia and is now currently residing in a Nursing Home, slowly withering away and is now down to 44 kgs., and has had several falls which unfortunately made her a patient at various hospitals from Wyong, Gosford, Nepean and Hawkesbury. None of which seem to be any better suited to caring for patients with dementia related illnesses than any other. They all appear to be "dementia education deficient."

I have been dealing and caring for my loved ones suffering various illness and forms of dementia for about 15 years now, and I can't see ANY IMPROVEMENTS to the SYSTEM over that time.

#### There is still no respect shown or their dignity preserved

- eg: not covering them up or drawing curtains around them in wards or ED.
- eg: talking about them to other patients or staff, or NOT talking to them while tending to them
- eg: sending them to hospital in VERY INAPPROPRIATE underwear (or outerwear) and no change of clothes or toiletries etc.

# There is very little co-ordination and communication with family members especially the next of kin or person responsible

- eg: discharging them without any consultation with the family
- eg: arriving at a prognosis or diagnosis without proper consultation with family but they say they probably discussed it with the patient (the one with **dementia**)
- eg: questioning the family if the patient should really be there, or do they have dementia ??
- eg: **NOT** listening to the family when it comes to the care and needs of the patient, (as they know them well) but sometimes will listen to the patient, the one with **DEMENTIA**

eg: making external (after discharge) appointments without consultation or communication with family members

**NOT** feeding them when they are unable to not only choose the food, but it is beyond them to cut it up and feed themselves. Food left on bedside tables, out of reach, out of mind......

My mother once had a fall and broke her nose, a TEAM OF PLASTIC SURGEON SPECIALISTS, came to visit her to discuss reconstruction with her (she was in end stage **Alzheimers** – and she could breathe without any difficulty – her nose was not hanging off her chin or cheek etc., ) so it was lucky or should I say fortunate, that I was there to direct them to more urgent cases in need of their expertise. Now I ask you, how ridiculous ???????????

There have been times when I have had to explain to hospital doctors, that my mother did not understand what they were asking or explaining to her because she had **Alzheimers**. So they would ask me "Doesn't she speak English???????" I would say yes, but she has **Alzheimers**. Then they would start to speak to her very loudly, so again I would say, that she is NOT DEAF but she has **ALZHEIMERS** and DOESN'T UNDERSTAND THEM....... they just don't listen to family.

Many a hospitalisation stay I would have to stay with my mother from 7 am till after 8 pm to try and keep her contained in the bed, to stop from pulling drip tubes etc. out, to stop her from climbing over the side rails and getting caught in between them. And to feed her or give her fluids, as she would become dehydrated otherwise and the hospital stay would linger on for more days. Also it was to not only keep her safe, but to keep her away from the other patients and keep them safe.

I have written to the hospitals concerned and am waiting for some kind of satisfactory conclusions and also have sent copies of those letters to over 20 politicians, and am yet to receive something positive from ANY of them.

If it was their relative in this same situation, I wonder what kind of care they would be getting and I'm sure the answer to that question, is not the same as my family or indeed what I might need in 10 or 20 years from now. There have been a number of high profile people, such as Hazel Hawke, Jeannie Little, even my own Local Councillor's mother (just to mention a couple) who have become victims of Alzheimers, but they don't seem to go through the same processes of facilities or hospitals that "NORMAL" people have to endure, so their experiences are not quite the same as ordinary OLDER AUSTRALIANS.

It took over 18 months to get my mother in law into an Aged Care Facility near where I live. In that time we were travelling to the Central Coast on a regular basis waiting for a vacancy. Not to mention when she was sent to hospital. My own mother spent over 8 months in an Aged Care Facility on respite waiting for a suitable vacancy. She was no longer able to live by herself as she was a danger to herself. There are just not enough facilities for **OUR OLDER AUSTRALIANS** and no where enough facilities that specialise in Dementia Care for A VAST NUMBER OF OUR OLDER AUSTRALIANS.

The wages are minimal therefore uneducated and UNTRAINED staff are employed as they are the only ones that are attracted to this kind of employment. If the wages were better than you would attract a higher standard of employee. The ratio of staff to residents is appalling – preschools have a better ratio, and you can't justify this equation because the elderly need MORE CARE than a toddler. There only has to be ONE Registered Nurse on the premises, (not necessarily in the vicinity) and this could be for more than 60 residents plus.

Prisoners appear to have a higher standard of care and staff training than **OUR OLDER AUSTRALIANS** do these days.

Where are the extra aged care facilities being built or extended, to accommodate for the ever increasing ageing population and what is being done about the education of the staff to look after these **OLDER AUSTRALIANS** - especially as it is very well documented and publicised that **DEMENTIA** related conditions are also on the rise. **WHERE ARE THEY GOING TO GO** ????????????!! It might seem OK, to politicians to try and keep our elderly at home as long as they are able to, but it just doesn't apply to people with a form of **DEMENTIA**. They need the extra care and they need it now.

My mum was one of those elderly people who the government tried to keep at home longer, but she was over medicating herself, not attending to her personal hygiene tasks, going out at all hours of the day and night, was a victim of mugging on a train, definitely not able to handle her own finances, could not do her own washing, cleaning, shopping and don't get me started on cooking. It finally took a crisis before we could do something, because of her dementia, she got lost at midnight. She had caught 5 trains that day and was so disorientated she could barely remember her name.

Where will I go when it's my turn ????????????????

### Policy on paper will not look after OUR OLDER AUSTRALIANS.

I could go on and on with examples of situations that I have found myself confronted with over the past 15 years, amid the stress, tears and depression, and I would be only too happy to speak about these to someone who would like to really listen and then act for the betterment of our **OLDER AUSTRALIANS.** 

I am a member of QACAG and **I HAVE A VOICE** and I want to be heard before it's too late. Please listen and then act, we need YOUR help and desperately.

Yours truly,

Mrs. Dianne M. Swarbrick

Cc: QACAG