



3<sup>rd</sup> August 2010

Disability Care and Support inquiry  
Productivity Commission,  
GPO Box 1428,  
Canberra ACT 2601

Dear Sir

## **RE: Disability and Support Inquiry**

Invacare Australia would like to provide the following submission to the Productivity Commission for deliberation and consideration in relation to the Disability and Support Inquiry.

Invacare is Global Company focused on the provision of products and services to the aged care and disabled health care market. Invacare is focused on ways of assisting those living with a disability to achieve the most they want to achieve and the Invacare motto, Yes You Can is part of this drive on behalf of our customers.

Specifically Invacare operates in more than 80 countries and has the largest distribution network in the industry. With this comes the responsibility to work with rehabilitation and home medical experts and clinicians to ensure that people with disabilities have access to new innovative and quality products that they need.

Invacare Australia look forward to working with the Productivity Commission to improve the lives of Australian's living with disabilities.

Yours sincerely

Hugh Davies  
Marketing Manager



**SUBMISSION TO THE PRODUCTIVITY COMMISSION  
DISABILITY AND SUPPORT INQUIRY**

**BY**

**INVACARE AUSTRALIA**



## **Overview**

The commission has highlighted in the white paper that there is a general view that the provision of disability services in Australia is inadequate and often varies significantly dependent upon the location in which an individual resides or the “cause” of the disability. This is a view that is shared by Invacare Australia who operates at the front line working with the clinical service providers to assist those living with a disability.

We welcome this inquiry and would hope that if there is only one outcome that the disparity between the services and support individuals receive can be minimised.

## **Introduction**

Individuals living with disabilities have the same desire to enhance their life as that shared by other Australians. However, this is limited by their ability to achieve personal goals by the impact of their personal circumstance. How each of these individuals manages with their disability is both individual and personal.

The challenge is then increased when they and their carer’s endeavour to manoeuvre through the usually complex and unforgiving process to obtain support. All too often there is a dependence upon the energy with which the individuals involved “battle” the system. This is neither fair nor equitable.

## **The Request**

Government per capita funding of equipment for people with a disability varies significantly across Australia – ranging from \$1.87 in South Australia to \$3.67 in Victoria. People with a disability, who after meeting the eligibility criteria for subsidised medical equipment and aids, should have the same access to this equipment regardless of where they live. These equipment and aids improve the quality of life for the people with disability by significantly contributing to their independence and lessening their reliance on more expensive health care alternatives.

An analysis of the numbers of assessed Australians with a disability in need of equipment, and the commercial data available to the industry, indicate that Australia-wide as few as 10% -15% of eligible people have the medical support equipment that they need.

Even after allowing for a loans system of equipment, which operates in many areas, this figure suggests that the data available to governments does not allow for a clear understanding of current needs, waiting lists and the overall effectiveness of government funded disability equipment schemes. In some States and Territories this service is called the Program of Appliances for Disabled People (PADP) which subsidises most of this equipment.

Therefore, it is proposed that the Federal government undertake to provide independent national funding of the met and unmet needs of equipment and services for disabled people, and to provide this funding regardless of the individuals cause of disability or state in which they reside.



This funding should be provided to the individual states on a per patient basis as assessed not as part of a consolidated revenue package. Although it may appear that a National Disability Insurance Scheme will require additional funding from the taxation base, it may not necessarily be as significant when current funding is considered and the potential cost savings from other sources, such as aged care and health care are evaluated.

An efficient and effective disabilities equipment program has potential for savings in the health sector, particularly in hospitalisation and other institutional care. For a relatively modest increase in expenditure the Commonwealth can ensure that all Australians have access to services in an equitable and fair manner.

### ***The rationale***

Timely and appropriate assistance with aids and equipment can have enormous benefits, not only for the lifestyle of the person requiring assistance but also for their family and carers. Conservative estimates show that carers save our economy \$16 billion annually. Carers are the major providers of community care services, delivering 74% of all services to people needing care and support.

The provision of appropriate equipment and aids benefits and supports an informal caring relationship. Personal carers who are supported in their role with the appropriate tools and aids can provide higher quality at-home care that in turn can lead to a reduction in expenditure on acute health care, residential aged care, supported accommodation for people with disabilities and other community care services.

One issue that carers have raised with the carers peak body – Carers Australia - is the delay in processing applications and receipt of equipment. This is particularly an issue where people are returning home from hospital but cannot receive government community services until appropriate equipment is in place. Without this access to equipment, the carer and their patient are heavily reliant on other community services and charities.

Inconsistent management of waiting lists and the types of medical equipment available between regions is also raised as an issue by carers. Again, limited access to equipment and aids means that personal, at-home carers are not able to perform their role and patients may be forced to rely on more expensive government health care.

The service provided by the disability equipment schemes effectively lessens the economic burden on Australia's health and aged care systems by contributing to the prevention of premature and inappropriate entry to institutional care and reliance on government health services.

In this regard the potential of such schemes is not maximised, there is incomplete coverage of the needs for services, disability aids and equipment. With the provision of one scheme nationally the government would be able to provide equivalent access and better provide practical assistance to Australians with a disability in the community.



## ***Disability Overview***

The Australian Institute of Health and Welfare (AIHW) estimates (Australia's Health 2006) that some form of disability affects one in five Australians.

A recent report commissioned by the NSW government – Review of the Program of Appliances for Disabled People, PriceWaterhouseCoopers, June 2006, includes a key finding that in the next ten years there will be a dramatic increase in the population prevalence of disability, driven by the general ageing of the population and the high prevalence of disability in older age groups.

Disability may be experienced in terms of impairments to body functions, activity limitations, or participation restrictions. It is not uncommon, for instance, for a person with long-term arthritis to have impaired mobility of joints; limitations in walking; moving and handling of objects; and restrictions in participation in domestic life and recreation. Support provided by equipment, mobility aids and personal assistance may all have critical effect on the persons overall level of ability to participate as an active and productive member of the community.

Statistically, disability can be measured along a continuum, and estimates of disability vary. However, the 2003 ABS Disability, Ageing and Carer's survey indicates that 3.96million Australians had reported a disability. This means that they reported at least one of a list of 'activity limitations, health conditions or impairments' for a period of at least six months.

Disability is not an inevitable part of experiencing ageing. It does, however become more common at older ages. In the above 2003 survey, almost one-quarter of older people reported a severe or profound activity limitation.

Informal care networks of family, friends and neighbours provided much of the help received by people with severe or profound activity limitations living in the community.

## ***About Disability Equipment***

The use of aids and equipment can substantially improve function and reduce or resolve difficulties in task performance. Compared to personal assistance, equipment use may be associated with feelings of autonomy and self sufficiency; may be adapted to specific functional problems; and may be more readily to hand when needed.

A total of 936,600 people with a disability aged between 5-64 years, used aids and equipment in 1998 (AIHW 1999). Medical aids were the most common form of aid or equipment used by 22.7% of people with disability. Communication aids such as mobile or cordless phones required due to a hearing condition were the second most commonly used aid, followed by crutches, walking aids and showering aids

People with profound disability are much higher users of aids for showering, toilet, eating aids and manual wheelchairs.



This submission relates to equipment subsidised under the various government funded disability schemes. These programs provide people with disabilities, including frail older people, with the equipment and aids they need.

The aims of these schemes include:

- Improved access to appropriate equipment and appliances based on persons needs
- Improved quality of life
- Improved capacity to participate in family and community activities
- Prevention of premature and inappropriate entry to institutional care
- Continuity of care.

It is well recognised that failure to provide aids and equipment in a timely manner means that people with disabilities experience greater difficulty, or may not be able to go about their daily activities such as work, school, leisure and shopping.

The most commonly supplied equipment provided through these schemes includes:

- Showering and toilet aids
- Wheelchairs
- Seating support systems
- Patient lifters
- Continence aids
- Communication devices
- Environmental control units
- Breast prosthesis

Long waiting lists for this equipment are a critical issue, with potential substantial cost implications. While waiting for equipment some people will be admitted to hospital because they have pressure sores that require specialist prolonged medical intervention. Deformities develop and are exacerbated, often leading to corrective surgery. Additional personal support is needed to alleviate the carer so that they can leave the house. Further, many people will experience additional pain as a result of unsuitable or lack of equipment. Some people relinquish their independence and withdraw from society, while others can be forced to leave their employment.



## ***Reviews of Disability Equipment Schemes***

State governments in the past have made attempts to measure the performance of these schemes, including the recurrent issue of lengthy waiting lists for equipment. In NSW PriceWaterhouseCoopers undertook a review of the PADP program.

The key findings of the report, dated June 2006, are:

- There are advantages in the establishment of a single administration for PADP. The administration could be streamlined and processed electronically
- Combining all equipment pools for greater efficiency
- Restrictions on the number of PADP lodgement centres in each Area Health Service
- Develop clearer eligibility criteria, including the application of the incomes test
- There are significant inequities in the operations of the program relating to spinal injuries
- There is a need for additional funds for equipment purchase
- The next ten years will see a dramatic increase in disability prevalence

Community and disability advocates continue to call on governments to develop an information system that can adequately collect waiting list data; and to grow the budget for disability equipment schemes to meet all current demands for equipment and devices.

## ***Outcomes***

Access to services is an important indicator of service or program outcome.

Should the Commonwealth Government agree to undertake the national PADP/disability equipment survey, outcomes would include:

- A clearer understanding of the practical day-to-day needs of Australians with a disability and direction to improve service delivery to this sector of the community
- Improved information available to governments about the performance of disability equipment schemes, including consumer satisfaction
- Better performance indicators and the development of standards of acceptable practices and timeliness of decisions on applications
- Demonstrate greater transparency through publishing annual reports on the operations of the schemes
- Improved governance, accountability and policy development



- National consistency on qualification and skills of prescribers
- Information to explain to people with disability and their carers, of both new applicants and existing clients, why they have been denied access or placed on a waiting list
- Resolve the indeterminate nature of equipment waiting lists
- Greater transparency on how the client co-payment works and the application of the incomes test
- Information about any special needs of Indigenous people in terms of information, access and utilisation
- Development of a transparent complaints handling system
- Better planning and allocation of funding
- Resolve the issue of inequitable access

### ***About Invacare***

Invacare is the global leader in the home medical product industry. It operates in more than 80 countries and has the largest distribution network in the industry. With this comes the responsibility to work with rehabilitation and home medical experts and clinicians to ensure that people with disabilities have access to new innovative and quality products that they need. Aids and equipment often require modifications to suit individual needs as inappropriate or ill-fitting equipment can cause serious medical complications. Invacare has a team of specially trained consultants to resolve such problems.

Invacare works closely with prescribers to assist them in better understanding the equipment so that it is the most appropriate for the person's needs, which also reduces the time prescribers currently spend in researching the equipment manufacturers and suppliers to get information on products.

Invacare's community responsibilities include a partnership with the Hunter Valley Pedestrian and Scooter Safety project, work with Wheelchair Sports NSW, and the company sponsors various occupational health education conferences.

Invacare is about to commence a program of meetings and discussions with the various disability organisations and carer groups in Australia to ensure better knowledge about the use of medical equipment and aids and to offer practical training in the use of equipment.

### ***Conclusion***

A lack of reliable figures on the number of Australians with a disability that require equipment and aids, and shortfalls in the provision of this equipment, means that some Australians are unable to enjoy the level of independence and quality of life that this practical support can provide.





Invacare urges the Commonwealth government to agree to fund a national disability equipment needs survey. The findings of this survey would result in the Government being well-placed to ensure equity across such schemes.

Information obtained from a national survey would also ensure a uniform approach to the allocation of equipment and aids. This in turn would strengthen the effectiveness of these schemes to better serve the disability needs of this sector of the Australian community.

Invacare will work with State governments and other organisations to ensure that people with physical disabilities are provided with the essential aids and equipment they need to achieve the quality and standard of living that makes it possible for people with disability to participate in family life and in the community as independent citizens.