

Submission to the Productivity Commission Inquiry into Disability Care and Support

This submission is provided by the **Peninsula Health Disability Community Advisory Group**. Peninsula Health is a public health service in Victoria's Southern Metropolitan region. The Disability Community Advisory Group is a sub-committee of the Peninsula Health Community Advisory Committee and provides a vehicle for communicating with, and responding to, the needs of consumers who have a disability and their families within the catchment area of Peninsula Health.

The Disability Community Advisory Group welcomes the inquiry into disability care and support. This response focuses on issues relating to maintenance of wellness and access and engagement with healthcare services for people with a disability.

Who should be eligible?

Issues identified by the Community Advisory Group relating to eligibility, identification of recipients, equity of access include:

- Eligibility should be based on the person with a disability with any scheme ensuring respect for the individual and their circumstances
- Means testing may assist determination of eligibility
- Existing support (ie family, other informal support) should not be a consideration in eligibility especially given the context of an ageing population with many people with a disability cared for by ageing parents / significant others.
- Consideration needs to be given to those under 65 years with acquired, permanent disabilities whose immediate accommodation needs may be met (eg within supported residential facilities) but whose community engagement and activity / participation needs are unmet.
- Consideration needs to be given to those under 65 years who require high level care and are currently (or at risk of) residing inappropriately in aged care residential facilities due to an absence of age appropriate facilities / services.
- Consideration needs to be given to adequate support for people with disabilities who are ageing and experience the health issues associated with ageing sometimes at an earlier age and often with a very complex presentation.
- As our population ages, including people with disabilities, the appropriateness of linking eligibility for funding with attendance at day programs and similar must be reviewed to ensure support and programs offered are appropriate for the current needs of the recipient.
- Consideration must be given to those with dual diagnosis eg people with a disability with mental health issues. These people must be supported to have the same access to specialist services as those without a disability and any scheme must facilitate this.

Who gets the power?

Issues identified by the Community Advisory Group relating to control over funding and service choice, service coordination, early intervention and streamlining of systems include:

- Strong support for individualised funding.
- A need for increased community consultation at a strategic and local level regarding funding and services needed.
- The option of carer / family involvement and input into funding and service choice is seen as vital.
- Increased transparency regarding the full range of services / options available.
- Increased coordination between services and assistance to navigate the system including making initial linkages with services and ongoing assistance to meet a person's changing needs. (eg. Community Liaison Nurse position providing positive linkages between health and disability sector)
- Consideration needs to be given to identification and engagement of under-represented groups, those who require greater advocacy to ensure their needs are met adequately.
- Increased specific funding for crisis intervention particularly in the context of our ageing population with many carers experiencing health issues related to ageing impacting their capacity to continue these roles.
- There is a significant role for the Disability Sector in the education and training of health professionals at an undergraduate and post graduate level. This will go a long way towards improving the interface between health and disability and enhancing the experiences of people with a disability accessing and using health services.
- Opportunities for improvement are seen in the following service areas:
 - Appropriate residential services for younger people with disabilities especially those requiring high level support
 - Increased access to mainstream health services including accessible information, equity of access to specialist services eg podiatry, psychiatric services
 - Increased access to aged care services for people with an intellectual disability younger than 60 years who may have issues usually associated with the aged eg person with Downs Syndrome who has Alzheimer's disease.
 - Improved access to transport for accessing health services, employment, community participation
 - Increased capacity for services to be provided within the chosen environment of the person with a disability
 - Provision of short term care / respite flexible to specific needs eg restorative period post surgery with provision of increased support for areas such as personal care until person able to return to previous living arrangements. This provides an alternative to a person remaining in a hospital bed, with the associated risks.
 - Earlier screening for known complications of specific disabilities.
 - Early referral and support to access specialist support services for preventative programs eg podiatry, dietitian, dental services.

Contact Person:

Ms Jodie Jones

Executive Sponsor

Peninsula Health Disability Community Advisory Group