

Submission to the Productivity Commissions – Caring for Older Australians and National Disability Insurance Scheme

From Barbara Lewis – Manager of a Carer Support program with many years experience across the spectrum of caring roles. Following the presentation by the Commissioners and a subsequent discussion with them, I am as requested, providing this submission.

I understand that each enquiry would have been given parameters for their reports, however I believe that we should have a report into Care in the Community for all those regardless of their age, illness or type of disability, and that care is for all Australians.

My concern is that the current system has definitions of those who are covered for funding and services, ie Care for Older Australians, and the other for disability which appears to focus on those with defined Disabilities.

This leaves the group of people who already miss out on care in the community, those with an illness missing out again - which leads to increased emotional and financial pressure on the family carer.

We know that Carers mainly need assistance to help them care for their family member - that is services to come in, and in some cases are needed over a 24/7 routine.

Those who miss out are the 55 year old Gio Blastoma, the 60 year old who has had a stroke, the 17 year old Neuro degenerative, the 52 yo with chronic lymphedema. We struggle to join the dots to get services, at best we may get Home care if we are lucky, for Personal care, and a couple of Respite shifts.

Each Government body, Federal, State and local govt believe that another government agency provides funding for care, no one does. For all these groups there is the added impact of grief and loss due to their illness, it is inhumane to witness and we must ensure they are included in one or other of the funding reports, to receive appropriate services for whatever timeframe they have, 6,9, 12 months or so.

If the broader definition of Disability is to be used, that is all those who are not able to function and do things for themselves, as a result of their illness, we also need to ensure the system is able to fast track those who need immediate assistance, and respond as they require higher levels of assistance.

A suggestion also would be to have Medicare allocations that can be drawn upon for Allied Health, Equipment etc (the recent Government changes have made a significant difference to some groups who are eligible) and should be available to all who are assessed by a Medical practitioner that would benefit. This would enable the parents of a child who has a brain tumour to have extra therapies provided to help with development and functioning.

I urge the Commissioners to think of all those who are not covered by these two papers and to make a recommendation that provides care for all those Australians who need it.

I believe the parameters of self directed or Case Management are well covered, I do believe that there are still issues regarding Education, employment support and housing that are not and may provide difficulties that drain the Case Management funding.