

## Submission to the Inquiry into Care and management of younger and older Australians living with dementia and behavioural and psychiatric symptoms of dementia (BPSD)

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## **About Mission Australia**

Mission Australia is a large national, non-denominational Christian community service organisation that has been transforming the lives of Australians in need for more than 150 years. Our vision is to see a fairer Australia by eliminating disadvantage for vulnerable Australians. This aim is reflected in the breadth and diversity of our programs – from early learning and youth services, extensive family support and homelessness initiatives, employment and skills development, to provision of affordable housing.

In 2011-12 our 326 Community Services (including 28 Early Learning Services) assisted 110,389 individuals and 5,732 families. MA Housing also grew its housing management portfolio to 1,418 dwellings in the same year, substantially increasing the number of people we have been able to support into stable accommodation. Our Employment Solutions division, one of Australia's largest not-for-profit providers of government-funded employment services, offered ten programs that helped 165,000 individuals and assisted 15,850 people move into sustainable employment<sup>1</sup>.

## **Aged Care**

In NSW, Mission Australia operates two residential aged care facilities — Charles Chambers Court a 60 bed residential aged care facility in Surry Hills and Annie Green Court a 72 bed facility in Redfern. Both provide permanent accommodation for frail aged residents who were formerly homeless or at risk of homelessness. They also provide medication administration, general practitioners, psychogeriatricians, psychiatrists, nursing care, podiatry services, palliative care, pastoral care, recreational activities, financial management, nutrition, safety and security.

In both of these facilities we usually have two to three residents who exhibit the behavioural and psychiatric symptoms of dementia (BPSD). For these particular residents there is no personal insight into their psychosis or their delusions. Our experience indicates that BPSD residents require a lot of care, can often be very aggressive, regularly act out and also experience serious delusions. There are varying levels of symptoms and as a result we need to provide varying levels of care. These residents do take up an inordinate amount of resources which detracts from our general service. Even though detailed care is provided as much as possible, the residents often get sent back to hospital or to psychiatric wards which are often full and have long waiting lists.

In our view and experience, the strategy of integrating BPSD clients with other clients in aged care facilities poses significant issues and impacts on the overall delivery of service delivery. As a result Mission Australia believes that younger and older Australians living with behavioural and psychiatric symptoms of dementia (BPSD) need to have specialised care. There also needs to be more specialised training, better diagnosis, more psychiatric nurses and higher levels of funding for clients with BPSD to ensure there are adequate resources to provide the in-depth care they require. Further, there should be more fully or partially subsidised training to work with BPSD residents as there is currently enough training and a sufficient number of aged care facilities to deal with the less complex types of dementia.

<sup>&</sup>lt;sup>1</sup> Mission Australia (2012) Annual Report 2012. Mission Australia: Sydney.