

Submission No. 433

(Inq into better support for carers)

A.O.C. 2/7/08

30 JUN 2008

FAMILY, COMMUNITY,
HOUSING & YOUTH

Committee Secretary
Inquiry into Better Support for Carers
House of Representatives Standing Committee on Family,
Community, Housing and Youth
PO Box 6021
Parliament House
CANBERRA ACT 2600

Dear Secretary

I wish to make a submission to the House of Representatives Standing Committee on Family, Community, Housing and Youth's Inquiry into Better Support for Carers.

I am submitting to the Inquiry because...

Our elected parliamentary representatives seem to be unable to see the absolutely desperate need carers have to be able to continue their roles.

More information is attached on a separate sheet

1. The role and contribution of carers in society

As a carer, I feel that my role is...

To give my son the best possible life he can have, given the expected degeneration he faces with his disease — multiple sclerosis (secondary progressive type).

More information is attached on a separate sheet

2. The barriers to social and economic participation for carers

As a carer, I face the following problems ...

Living in a small country community —
① lack of personnel to allow the municipal/lshire Council to provide personal care assistance.
② lack of medical and nursing support. NOT the 24 hour availability of a Melbourne suburb.

More information is attached on a separate sheet

3. The practical measures required to better support carers

As a carer, I need help with ...

The provision of more respite centres, spread throughout the State, for closer access to carers' homes.

Speedier provision of nursing home type accommodation for young people. (cont)

More information is attached on a separate sheet

4. Strategies to assist carers to access opportunities and choices

I think the Government can better help carers by ...

A review of Centrelink regulations to give some flexibility to respite allowance where the carer requires hospitalization and/or rehabilitation. 60 days "time off" may be insufficient when an emergency arises.

More information is attached on a separate sheet

Thank you for taking my views into consideration as part of the Committee's Inquiry. I look forward to reviewing any recommendations you make to improve life for carers in Australia.

Yours sincerely

JUNIE

Print your name

THURSDAY, 26th JUNE, 2008

Date

Continuing: 2. Barriers to social and economic participation for carers.

③ HACC services provide minimal time of short respite periods. When the carer lives at a distance from recreational opportunities (theatres, etc), travel time severely reduces the possibility of any meaningful "respite".

④ Respite houses. When a carer has sole 24 hour responsibility for a person whose disability or disease makes it impossible for the carer to interact with ANYONE else, the mental health of that carer is at risk. Depression is only the first, and possibly, the least damaging mental illness to begin to expect.

"In home respite" is not a good answer. The carer needs some privacy in their own home for a recuperative period. The person for whom the care is given may also benefit from "time away" for socialization, as much as from new surroundings which give mental and emotional stimulus. These bring a benefit on returning home, in that there is a new field of topics of conversation, at the least.

Continuing: 3-practical measures required + better support covers.

Provision of places in nursing homes for young people may be achieved in various ways.

- (1) Where a new aged care facility is built, a specialized wing for young people may be included in the plan.
- (2) Restrictive regulations governing the size (ie number of beds) of group homes can be relaxed. When the expensive equipment needed to provide nursing home standard care is considered, restricting group homes to numbers less than ten is not cost effective.