AOC 17/7108

Submission No. 898 (Inq into better support for carers)

Suzanne

¹ July, 2008

This is a submission by me as an individual although I do currently work for ARAFMI NSW. My comments to this inquiry are as follow:

RE the role and contribution of carers in our society and how this should be recognised

- Carers should have access to education and information on the systems that will effect them in their role following a diagnosis.
- GPs should include in their duty of care regular reviews of the support and impact of the role on the health of all carers.
- In order to make this realistic there must be a requirement of GPs to refer to appropriate support services and inclusion of a relevant box on the carer plan template..
- This could also be done by the Practice Nurse as a part of the recall system
- It may be necessary to have carer clinics as part of the Health System to undertake regular checks on carer health.
- Some financial acknowledgement of this in the duty of care requirement of the GP

The barriers to social and economic participation for carers with a focus on finding and retaining employment

 The knowledge and skills of carers should be utilised in organisations which provide a service to the particular disability which they are familiar with. These would mean creating job share positions in NGO'S and related government departments with flexible work place conditions.

The practical measures to support carers including key priorities for action

- When there is a mental illness a MH consumer needs to be granted accommodation close to the family in order to encourage family support
- Carers need to be handled by large government departments by fully trained and sympathetic workers. Dept of Housing and DOC's especially.
- Carers need to be informed of their rights when dealing with professionals

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Strategies to assist carers to access opportunities and be able to make choices the same as other community members

- Promote your recent funding and acknowledgement of the caring role by advertising campaigns informing the "silent" or "invisible" family members who are caring and advocating for a person who is unwell BUT do not call themselves carers – They do not access these services.
- Support organisations who are currently receiving financial support from the government by demanding that GPS, Psychologists and Psychiatrists refer to them appropriately – since they know the family and have a trusting relationship. We are not being utilised by any GP's since the recent funding
- Demand that Divisions of General Practice keep informed of the relevant funding and government decisions and changes for carer services
- Provide appropriate resourcing of Carers when there is a mental health issue when they present to Accident and Emergency wards of hospitals.
- Provide practices with information on carer services brochures
- Community care needs to be increased to reduce the waiting time for home care

Currently carers are being bombarded with surveys and consultative processes but there is a real need to gain feed back form NGO"s and other health services who are at the coalface.

Recent programs such as Respite Care and the Family and Carers Program need your support through advertising and promotion to medical professionals.

This has been completed very quickly and I apologise for its lateness

Yours sincerely

In

Suzanne