

Caboolture Shire Council

Making Lifestyle Really Count

www.caboolture.gld.gov.au

9 March 2006

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Committee Secretary Standing Committee on Health and Ageing House of Representatives Parliament House

CANBERRA ACT 2600

STANDING COMMITTEE

ON HEALTH AND AGEING

Dear Committee Secretary

Parliamentary Inquiry into Health Funding Re:

Caboolture Shire Council welcomes the Parliamentary Inquiry into Health Funding undertaken by the House of Representatives Standing Committee on Health and Ageing and appreciates the opportunity to comment.

Attached to this letter is a copy of Caboolture Shire Council's submission to the Inquiry that details the issues affecting the Shire's community in relation to health and ageing. Of particular interest to Council is the examination by the Inquiry of:

- The roles and responsibilities of the different levels of government (including local government) for health services and the funding arrangement for delivery of services:
- Maintaining community access to existing hospital services; and
- Provision of health services and infrastructure that meet the needs of the community and address the current issues related to aged care service provision and healthy ageing.

Council's submission provides a brief outline of the key issues affecting Caboolture Shire against the themes of the Committee's Report. The Committee is urged to give particular consideration to the recent 3 month closure of the Emergency Ward at the Caboolture Public Hospital, due to the State Government's inability to adequately resource medical services for our growing community. Recent advice of a 12 month moratorium on the closure is very welcome news, but long-term sustainability at a reasonable cost remains a concern. Other key issues affecting our community as a result of ageing are also raised for your consideration.

Covers the scope of activities for:







.../2

I trust that the information provided will assist with your Inquiry and thank you on behalf of the residents of Caboolture Shire Council for your deliberation on our issues. Enquiries regarding this submission can be directed to Council's Manager Community Development, Mrs Julie Bruynius on (07) 5420 0330.

Yours faithfully

ROB NOBLE

CHIEF EXECUTIVE OFFICER



CABOOLITURE SHIRE COUNCIL Caboolture Shire Council

Submission to the House of Representatives Standing Committee on Health and Ageing - Inquiry into Health Funding

March 2006

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2 Overview of the Caboolture Shire Council Context

Caboolture is recognised as one of the fastest growing local government areas in Queensland and in fact in Australia. The Shire already has a population of 130, 000 people and is expected to increase to 200, 000 by 2025. The Shire is located only 45 minutes north from Brisbane and includes rural and seaside townships and urbanised areas. Caboolture Shire experienced extremely high growth periods in 1991 – 1996, reflected in the above average annual growth rates of 7.3%. This high rate continued with some areas, including the communities of Narangba and Sandstone Point experiencing 8.6% per annum growth rates during 1996 – 2001.

The latest Housing Update for the 12 months to the end of September 2005 from the State Government's Population Information and Forecasting Unit has Caboolture (1423) ranked sixth in Queensland in terms of total dwelling approvals behind Brisbane (8450), Gold Coast (5995), Cairns (1793), Ipswich (1633), Pine Rivers (1580) and Maroochy (1564).

The most recent comprehensive release from PIFU on population trends: "Population Growth: Highlights and Trends - Queensland 2005" (which was released in May 2005) has Caboolture as the fastest growing LGA in South East Queensland for the Year Ended June 2004. The top five in SEQ in order (with annual growth rates to the year ended June 2004) were: Caboolture (4.5%), Caloundra (4.2%), Pine Rivers (4.0%), Maroochy (3.3%) and Beaudesert (3.2%).

In order to provide services that meet the needs of our Shire's rapidly growing community, Council must understand the composition of population and the implications of the population change on community dynamics and demands for services facilities. Some of the effects of ageing are already being acutely experienced in our Shire's communities.

For example, Bribie Island currently has 29% of the population aged 65years and over whilst Beachmere has 17% of the population in this age bracket. By way of comparison, the nation is anticipating that by 2021, all communities will have populations with 18% of people aged 65 years and over and by the year 2051 this will have risen to 26%. The Australian Local Government Association Population Ageing Action Plan states that "In 2019 the community with the oldest population in Australia is expected to be Bribie Island, with approximately 37% of the population aged 56 years and over (ALGA Population Ageing Action Plan 2004 – 2008). Additionally, our community has a high transiencey rate with over 25% of all our residents having lived in the Shire for five years or less.

This exceptionally strong growth rate, pronounced demographic ageing of the population and the arrival of new residents from many different cultures brings an enormous responsibility to Council. Increasingly, Council is expected to provide not just the basic services such as roads, water, sewerage and waste management but is increasingly expected to provide other critical services, which embrace social, economic and environmental issues.

The Shire's community also has a number of significant culturally and linguistically diverse (CALD) residents. The CALD communities with the highest numbers of persons aged over 60 include individuals from the Netherlands, Germany, Italy, Hungary, Poland, South Africa, Indonesia, India, Austria and the Philippines. In addition to these CALD communities the Caboolture Shire has a significant growing population of Samoan people with the Samoan language being the second most spoken language in the Shire.

Caboolture Private Hospital	44 beds. Gastroenterology, General Surgery, Oncology, Oral and Maxillofacial, Urology, General Medicine, Gynaecology, Orthopaedics, Plastics. Restricted Emergency ward operating hours.
Public Womens Health Service	Womens sexual health service.
Community Health Centre	Primary health and Extended care services. Oral therapy, Indigenous Health, family health, sexual assault and Podiatry and alcohol and drug related services.
General Practitioners	
General Practitioners	38 in Caboolture Shire. Medical centres, doctor surgeries, skin cancer clinics. Locations include; Bribie Island, Beachmere, Ningi, Caboolture, Morayfield, Burpengary, Woorim, Deception Bay, Narangba, Woodford, Woody Point, Wamuran.
Aged Care Accommodation Services	
Bribie Island	
- Bribie Island Retirement Village	102 beds
- Eden on Bribie	90 beds
Caboolture and surrounds	
- Abbey Gardens,	79 beds
- Burpengary Gardens,	92 beds
- St Pauls Lutheran Aged Care Village,	60 beds
- Regis Caboolture	66 beds
- RSL Care Caboolture	169 beds
- Sunnymeade Nursing Home	88 beds
Aged Care Services	
Aged Care Assessment Services (ACAS) Caboolture	Assessment, advice, referral for agenda and disabled. Provide assessment to enter nursing homes. ACAPS and EACH packages
Commonwealth Carer Respite Centre	Info service for carers, provide support and assistance, provide respite services for carers.
Golden Age Day Respite Centre	Day respite for aged, frail aged, younger people with disabilities. Carer support group.
Waminda Respite Centre	Domestic assistance, home maintenance, centre respite allied health, transport, community care packages, personal care. Focus on Indigenous community of Shire.
Blue Care Caboolture	In-home support to aged and their carers. Assistance with food services, social support, community transport, recreational activities, assessment and care planning.

Caboolture Shire Council: Submission to the House of Representatives Standing Committee on Health and Ageing - Inquiry into Health Funding

Other: St Lukes Caboolture RSL Care Caboolture OzCare Caboolture	Includes nursing services
Kilcoy Country Companions Kilcoy Hospital	Some Caboolture residents taken in for respite and after hospital care and rehabilitation

Despite this list of services Council is aware that the ageing needs of our community, especially in relation to aged care accommodation are not being met. The Redcliffe Bribie Caboolture Division of General Practice Report from 2004 / 05 documents that "there is currently a shortfall of 118 beds in Age Care Homes in the Caboolture Area" (pg 2). With the anticipated population growth of the Shire its is reasonable to expect that the demand for aged care beds will continue to rise and this shortfall will increase to a higher number.

Despite the level of services and infrastructure currently provided to the community, the pace of growth and demographic change in our Shire means the demand for aged services and health services and social infrastructure is outpacing the existing supply. The following section provides summarised details on issues experienced by the Caboolture Shire Community in relation to the key themes of the Inquiry.

4 Issues Regarding Age Friendly Communities

Council recognises that local government has a role to play in building and promoting communities that are tolerant, vibrant, and inclusive places to live for all residents. The Issues associated with creating age friendly communities and the Issues affecting our aged residents include:

- Newly arrived residents with limited social and familial networks resulting in social isolation of elderly residents;
- Limited funding programs for Council, community groups or local services to tap into to deliver community development programs and initiatives that encourage inclusive communities and extend the range of skills and abilities that older people have;
- Lack of accessible information about existing ageing services and facilities
- Need for culturally appropriate information and ageing services for the community;
- Limited resources and competing priorities for community development programs coordinated and lead by Council;
- Intergenerational issues and lack of tolerance and understanding between younger and older communities;
- Existing services, built environment and public infrastructure may require significant modifications and re-design to cope with demands and requirements of an ageing population;
- Recognition required for the positive contribution of older people to the community;
- Need to build public infrastructure including roads, pathways and facilities with the community users in mind. The mobility and access needs of elderly people need to be considered in the design and construction of public infrastructure.
- Older Australians from CALD communities may feel socially isolated due to communication
 problems which result in low levels of English language proficiency, loss of acquired English
 language skills and in some cases illiteracy in their own language; and

- Need for provision of community buses / car services that enable recreational opportunities for older people. Currently services only cater for medical and health related transport;
- Need to review existing bus routes to ensure they are accessible to local aged care accommodation centres and villages;
- Cost of taxi services is too expensive for elderly people and innovative solutions such as the \$2 taxi at Mackay City Council may need to be considered and brokered by the State Government;
- Transport services are not safe for elderly people to use due to poor internal furbishment and lack of security and monitoring;
- Planning processes need to ensure housing is located in close proximity to transport, health and social infrastructure and services to assist with ageing in place and may reduce social isolation:
- Diversity of housing needs for older people needs to be included in planning processes for communities;
- Dramatic increases in 'over 55' communities and resultant increase in new residents in the Shire who do not have social or familial support networks and connection places an additional burden on already overstretched community support services. Developers of these communities do not plan for the elder years of residents and the increase in needs and impacts on local services;
- Changes to State legislation and national building codes are required to ensure market take
 up of accessible and diverse age-friendly housing options. Federal Tax Incentives to
 accelerate this process may need to be considered if housing stock is keep pace with
 increasing demand and demographic changes expected as a result of ageing; and
- There is an urgent need to look at ways of coordinating and improving transport to Brisbane for hospital services / specialist services.

7 Issues Regarding Healthy Ageing

Healthy ageing is vital to the wellbeing of communities. In Caboolture Shire ageing communities experiences the following issues:

- Reduced life expectancy of Indigenous and CALD communities;
- Increasing need for active ageing programs and funding programs that support the delivery
 of these types of initiatives;
- Need for Improved communication with GPs and older people about information and advice regarding service availability;
- GP services are not available 52 weeks of the year and are subject to holidays, weekends and public holiday breaks. Ageing people require access to year round services;
- Personal safety and security in homes for older people is a key concerns and local support services provide a range of programs for this, however demand is outpacing supply and the programs require additional funding and resourcing;
- Falls prevention programs are required as illness often occurs in elderly people after a fall.
 This requires a collaborative approach between all services. Ideally, programs such as those run in Western Australia should be replicated in Queensland and require adequate levels of funding;
- Education and programs about healthy eating, healthy lifestyles and cooking are required for elderly communities. Health promotion programs need to be resourced and linked in to local support services and health service agencies;
- Many good local initiatives exist that encourage active ageing and social interaction, such as those run by Bribie Community Options and Active 60's and Better. These programs require funding so that they can meet the growing need for services;

constant. The failure of the State Government to provide funding and resources to operate this service beyond a 12 months term is a major issue affecting the community. Adequate staffing and a full range of services are required at our local hospital and it is anticipated that with the present growth rate the demand for the continuation of this service will only increase:

- Workforce Shortages of medical professionals including, doctors, nurses and general
 practitioners need to be addressed at a Federal and State level so that communities have
 access to appropriate service standards. These workforce shortages are having a direct
 impact on local services and community health. Local services are also reporting difficulties
 in recruiting trained and qualified staff to positions;
- The Caboolture Public Hospital also requires improvements to services for specialist and geriatric services;
- There is a strong need for improved availability and quality of care for people with dementia
 or mental health problems and for those needing respite or palliative care;
- There is an increasing need for availability, quality and viability of residential care and accommodation services;
- Hospital services need to be more flexible and better integrate with local service providers so as to better service the needs of the elderly community;
- Improved information and education about local aged care and health services is required and must be language and culturally appropriate for the community;
- The cost and limited availability of oral health services in the Shire is an issue that is directly
 affecting the health and wellbeing of older people in the community. Policy and funding
 arrangements for the provision of oral health services need to be urgently addressed at a
 Federal and State level;
- There is a clear need to streamline and reduce confusion in the care services sector regarding funding requirements, reporting arrangements and eligibility rules. The resultant confusion over inaccurate understanding of the different rules is considerable and frequently becomes a major barrier for people accessing support services;
- There is a disturbing trend for Government to fund only large social service agencies leaving the smaller existing services, with the local networks and knowledge, less able to effectively continue service delivery.
- Care services, health services and hospitals needs to be better integrated so that a case
 management style approach to aged care can be adopted. Adopting this type of system will
 also assist with effective monitoring of services and continuity of care for older people;
- There is a need for funding for volunteer groups who care for the aged. The aged sector is
 our greatest participant in our volunteer organisations and this volunteer work is of great
 benefit to the mental stimulation of many aged people. There needs to be recognition of the
 benefit of volunteers from a mental health and social wellbeing viewpoint and the value of
 these volunteer services needs to be factored into the health of the aging;
- There is a need to introduce a national regulatory environment for aged care services that
 ensure continuity of care, quality standards of service and regular performance monitoring.
 It is anticipated that this will also reduce confusion over eligibility, reporting and funding
 requirements for existing services;
- There is an increasing demand from older people who want flexible options to ageing in
 place and living independently. In-home care programs are currently in high demand and
 additional resources and funding for these programs is sought to enable the delivery of
 these programs to the community;

- The Inquiry supports Council and the community in maintaining community access to public hospital services including the long term operation of the Emergency Ward at Caboolture Public Hospital on a 7 day 24 hour basis;
- All levels of government adequately fund the provision of essential health services and infrastructure that meet the needs of the community, both paid and volunteer;
- Consideration is given to the development of funding programs and resources to support
 Local Government, community organisations and service providers in creating and planning
 socially inclusive communities that support aged populations from all backgrounds and are
 safe and secure places to live;
- All levels of Government and health service providers work collaboratively to improve information, education and awareness of the available health and ageing services and current issues faced by ageing populations;
- Local government receives support from State and Federal Governments in promoting and encouraging the benefits of ageing workforces, value and contribution of older people and importance of life long learning;
- The existing shortfall in aged care beds in the Caboolture area and concerns over the
 planning ratio; currency of the census information and annual planning cycle used to derive
 bed allocations be addressed by the Federal Government as a priority;
- Existing issues concerning affordability, frequency and accessibility of transport planning and delivery be addressed through consideration of innovative solutions to delivering more flexible models of transport that meets the changing needs of the community;
- Consideration be given to the introduction of a National improved regulatory environment for aged care services that ensures continuity of care, quality standards of service and regular performance monitoring is adopted;
- Existing workforce shortages in the health professionals are urgently addressed at a National level to ensure the long-term viability of the aged care and health service industry in Australia;
- Concerns regarding the existing shortfall in social infrastructure and Local Government's
 role and ability to provide capital funding for the delivery of infrastructure receive urgent
 attention. Federal and State Governments address the legislative constraints for
 Infrastructure Charges and the absence of capital funding programs for the delivery of social
 infrastructure; and
- All levels of Government encourage the private sector to ensure well planned urban and rural communities where aged care facilities and health services are located close to readily accessible public transport, supporting community infrastructure and essential health services.