



**Budget Submission**

**to the**

**South Australian Government**

**2011-2012**

# **C o n t e n t s**

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# Summary of Commitments Sought

**COTA Seniors Voice calls on the South Australian Government:**

- 1. Whole of government Approach to Ageing**
  - 1.1 To capitalise on the “State of Ageing in SA” research findings to initiate a whole of government approach to population ageing which results in:**
    - a coherent, systemic, comprehensive and well-resourced response to population ageing developed for South Australia in consultation with all interested stakeholders;
    - individual Ministers taking carriage of ageing issues that fall within their portfolio responsibilities;
    - the Office for Disability, Ageing and Carers (DAC), Department for Families and Communities, coordinating this approach across Government in close collaboration with Cabinet Office, monitoring progress, reporting quarterly to government and community interests, and through legislation being accorded the necessary authority to act in this way; and
- 2. Concessions**
  - 2.1 As an interim measure to immediately:**
    - increase the maximum local government concession to \$250;
    - increase the minimum energy concession to 20% of the total energy bill (including electricity and gas), and the maximum to \$185 (ex GST);
    - increase the minimum water concession to \$150 for owner occupiers, and to \$90 for tenants
    - increase the ESL remission by 25% to make up for eroded value over time.
  - 2.2 To undertake a full Government review of the concessions system to ensure delivery of a concession system for older South Australians that is fair, sustainable and defensible and retains its real value over time.**
- 3. Essential Services**
  - 3.1 To retain derogations under the National Energy Retail Law in regard to retail price regulation, disconnections during heatwaves and guaranteed service levels.**
  - 3.2 To expand the Energy Industry Ombudsman of South Australia’s jurisdiction to include water and to ensure the adequate resourcing of this expanded role.**
  - 3.3 To develop a socially responsible water pricing policy to guide the Treasurer’s pricing orders to the water regulator.**
  - 3.4 To resource the provision of energy case management services to South Australian energy consumers in relation to the uptake of**

**solar photovoltaic systems as well as other more complex energy issues.**

**4. Transport**

- 4.1 To review the present transport system in SA, develop and implement a comprehensive State Transport Plan to meet the needs of all South Australians into the future, especially the needs of older people who have different transport requirements than school and paid employment, and who do not necessarily drive themselves.**
- 4.2 Introduce a scheme that benefits older people who live in rural and regional areas of the State to the extent that free daytime public transport benefits older people who live in metropolitan areas**
- 4.3 To develop effective and efficient public transport services for South Australians living in the areas identified in the “State of Ageing in SA” report as transport disadvantaged, especially meeting the needs of older people.**
- 4.4 To provide a comprehensive high quality and affordable system of localised community transport that incorporates innovative models and responds to the needs of older South Australians.**
- 4.5 To review the current HACC arrangements to improve transport funding and provision, via appropriate service providers, for older Aboriginal people to enhance their participation in important community events including funerals.**

**5. Health**

- 5.1 To resource the measures included in the Health Service Framework for Older People 2009–2016 to a level that can support its successful implementation and results in improved health services and experiences for older South Australians.**
- 5.2 To immediately invest in regional and country hospitals so they are resourced to meet the roles identified for them in the State Health Plan and the Health Service Framework for Older People 2009–2016.**
- 5.3 In particular, within the scope and context of 5.2, to commit to the full physical redevelopment of the Repatriation General Hospital within the next term of government.**
- 5.4 To modify the Patient Assistance Transport Scheme (PATS) to allow it to support older South Australians who live within 100kms of their medical specialist but outside metropolitan Adelaide, and to allow for upfront payment of costs for those with substantial and/or frequent travel costs.**
- 5.5 To immediately increase the accommodation allowance levels for PATS to ATO-defined levels.**
- 5.6 To adequately resource and facilitate, through the Health budget, transport for older people to travel to and from preventative, rehabilitative and acute health services, locally and remotely, in metropolitan and regional SA; and to provide these in conjunction with health services/professionals.**

- 5.7 To immediately commit State funding to implement the recommendations of the Social Development Committee Inquiry into Dental Health Services for Older Australians, without waiting for Commonwealth Government financial support.
  - 5.8 To immediately address waiting lists to access assistance via the SA Dental Service as a matter of urgency.
  - 5.9 To resource the prevention and treatment needs identified by current SA Dental Service research of people receiving care in the community and in residential care facilities.
  - 5.10 To provide specific investment in portable dental units to provide restorative and preventative dental services to older people in rural and remote communities, in residential care facilities and in the community.
6. End of Life Decisions - Advance Directives
    - 6.1 To further engage stakeholders on the implementation of the recommendations arising from the Review of South Australia's Advance Directives.
    - 6.2 To strengthen Advance Care Directives safeguards for older people by mandating independent financial monitoring and enshrining options for the alteration and revocation of Advance Care Directives under prescribed conditions.
7. Older Workers
    - 7.1 To develop and implement, in conjunction with Commonwealth and Local Governments, a comprehensive strategy (including labour market planning, education and training, immigration, addressing ageism etc) to create an employment climate where older South Australians choose to remain in the workforce for as long as they desire and where impediments to this are removed.
    - 7.2 To devise pathways for seniors to successfully re-enter the workforce after a period of retirement, including the provision of services that nurture self-esteem and skills of older people.
    - 7.3 To continue to actively recruit and retain older people as employees in the public sector workforce.
    - 7.4 To work with the Commonwealth Government, to increase public awareness of age discrimination and ageism and to combat negative perceptions about older workers.
    - 7.5 To abolish workers compensation age limits within South Australia .
    - 7.6 To enshrine older workers as a key focus in workforce planning for key growth industries, including through a target within the 100,000 training places policy.
  8. Housing and Home Maintenance
    - 8.1 To target provision of social housing and housing subsidies for older people, including a 'last home program' to assist low to middle income older people to adapt their existing housing or move to other housing in their areas that better meets their needs and capacities.

- 8.2 To introduce better protection for older people living in private rental settings, and to provide active support to ensure the energy efficiency of the dwellings they rent.**
- 8.3 To increase support to older people on low incomes to access value for money home maintenance services such as the COTA Home Maintenance Service.**
- 8.4 To adopt a target of 100% new housing to reach the Liveable Housing Design Guidelines gold standard by 2019.**
  
- 9. Information Technology**
  - 9.1 To continue to offer information on paper, face-to-face and by phone, not solely electronically.**
  - 9.2 To work with Local Government and other providers to ensure sufficient and low cost training is available to older South Australians, including in rural areas, to ensure that those who want to use personal computers can do so.**
  - 9.3 To foster access to affordable information technology hardware and software for low income older South Australians**
  - 9.4 To fund a PC Helpline to assist older South Australians.**

# Submission

## 1. Whole of Government Approach to Ageing

South Australia is facing a difficult social and economic transition due to its rapidly ageing population. We know that:

- by 2051 almost 31% of the State's population will be over 65 years and the over 85 population will have increased fourfold<sup>1</sup>;
- within 10 years the elderly dependent population will outnumber the number of children in SA for the first time in history; and
- the 'old-old' (85 years and over) segment will grow faster than the 'young-old' (65 – 84 years) due to increased longevity.

The growth of the 'old-old' population particularly will have considerable implications for service delivery as the 75 years and older population is by far the heaviest user of health, welfare and specialised housing services for the aged.<sup>2</sup>

Facing this magnitude of change South Australia needs to adopt a systemic and comprehensive approach to population ageing. The only way to plan adequately to take advantage of the opportunities this situation provides, as well as deal with the challenges, is to adopt a well-resourced whole of government approach.

The findings of the "State of Ageing in SA" research provide a basis for the development of a comprehensive and co-ordinated approach to population ageing in South Australia, and provide the opportunity for SA to again be socially proactive by taking advantage of the opportunities presented by this demographic reality.

Significantly, the "State of Ageing in SA" report highlights the deficiency of South Australia's Strategic Plan in the areas of ageing. The report states that the lack of targets focused on the older population is:

"... a significant gap, since they are already a substantial proportion of the population and will be close to a third of the population in a quarter of a century's time. It is important that ageing issues are given due recognition in the next revision of the Strategic Plan. This not only applies to maintaining the well-being of older South Australians, but also should include targets that relate to the positive role that older people can play in the state's movement towards greater prosperity and sustainability."<sup>3</sup>

<sup>1</sup> Population Projections: Australia 2002 – 2101 (2005) Australian Bureau of Statistics (as reported in the SA' Government's "Improving with Age – Our Ageing Plan for South Australia"

<sup>2</sup> "State of Ageing in South Australia", p22.

<sup>3</sup> Government of South Australia (2009) "State of Ageing in South Australia", p317

While the Government has included a developmental target in the SASP, COTA Seniors Voice (CSV) believes that the inclusion of a full target in the SASP will facilitate a whole-of-government approach to ageing.

Additionally, the development across Government of what has become known as Adding Life to Years was an initiative supported by CSV as a step towards a whole of Government approach to managing change associated with our ageing population. CSV calls on Government to review Adding Life to Years and its focus on a series of projects in order to establish a strategic response using its State of the Ageing in SA research.

CSV believes that the Office for Disability, Ageing and Carers (Department for Families and Communities) in collaboration with Cabinet and Policy Coordination (Department of the Premier and Cabinet), should be charged with the responsibility for co-ordinating this approach on behalf of the State Government, that individual Ministers should be responsible for initiatives within their portfolio, and that appropriate resources be assigned to implement this approach.

### **COTA Seniors Voice calls on the South Australian Government**

#### **1.1 To capitalise on the “State of Ageing in SA” research findings to initiate a whole of government approach to population ageing which results in:**

- **a coherent, systemic, comprehensive and well-resourced response to population ageing developed for South Australia in consultation with all interested stakeholders;**
- **individual Ministers taking carriage of ageing issues that fall within their portfolio responsibilities;**
- **the Office for Disability, Ageing and Carers (DAC), Department for Families and Communities, coordinating this approach across Government in close collaboration with Cabinet Office, monitoring progress, reporting quarterly to government and community interests, and through legislation being accorded the necessary authority to act in this way; and**

## 2. Concessions

Although many concession rates have recently been raised, CSV continues to seek that Government develop a rational, fair and sustainable concessions policy which addresses both maintenance of the real value of concessions and the longer term issues of equity and sustainability.

Recent rises to the costs of energy and water have not been offset by recent rises to concession rates and older South Australians, particularly those reliant on the Age Pension, will continue to suffer as costs continue to rise. For energy, while the recent changes to the energy concession have brought it into line with electricity pricing, rising gas prices have greatly eroded its value. While in theory it is available to the value of 20% of the electricity bill to a maximum of \$150, in practice even a low-consuming customer receives the maximum, highlighting its insufficiency in terms of current and projected energy prices.

Likewise the water concession has been eroded over time despite the recent rise. Moreover, while the Government touts the maximum rate, in practice a customer would need to use over double the average use (190kL) to become eligible for this. Thus while prior to 2008 the concession for owner-occupiers was 60% of the bill to a maximum of \$95, most average customers would have received the maximum. On 1 July 2010 the minimum water concession was increased to \$100, or an effective \$5 p.a. increase for most customers. At the same time annual costs were increased by \$84 p.a.

Additionally, increased property values have led to rises in local government rates, sewerage rates and the Emergency Services Levy (ESL). CSV understands that local government rates in particular have risen by 63% between 1998 and 2008. During the same period the maximum concession for local government rates has increased from \$150 to \$190 in 2001 and remained static ever since.

The net cost to Government of providing rational and defensible concessions is also questionable. CSV notes the recent SACOSS *Cost of Living Report*<sup>4</sup> argument that when GST revenue from increases in utility prices is factored in, the recent increases to energy and water concessions are effectively almost 'revenue neutral'. CSV therefore calls on Government to increase concessions further and to index them to the actual costs of the goods and services they aim to make more affordable.

While the Government has recently implicitly agreed with the principle of indexation through its February 2010 concessions announcement, CSV holds the view that indexation must be reflective of the real rises in costs to be effective. CSV reiterates its position that an Essential Services Index (ESI)

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<sup>4</sup> SACOSS (2010) "Cost of Living Biannual Update No. 4, November 2010", South Australian Council of Social Service.

should be used to ensure that the real value of such concessions to people on low and fixed incomes is maintained.

More broadly, a full review of the concessions system is still required. All State Government concessions need to be assessed against a range of criteria including their performance against key affordability and equity benchmarks. Until such a review has been undertaken concessions will continue to be used as a blunt political tool and fail to be effective in achieving equity within and across population groups in SA.

### **COTA Seniors Voice again calls on the South Australian Government**

#### **2.1 As an interim measure to immediately:**

- **increase the maximum local government concession to \$250;**
- **increase the minimum energy concession to 20% of the total energy bill (including electricity and gas), and the maximum to \$185 (ex GST);**
- **increase the minimum water concession to \$150 for owner occupiers, and to \$90 for tenants**
- **increase the ESL remission by 25% to make up for eroded value over time.**

#### **2.2 To undertake a full Government review of the concessions system to ensure delivery of a concessions system for older South Australians that is fair, sustainable and defensible and that retains its real value over time.**

### 3. Essential Services

Significant rises in the costs of essential services such as electricity, gas and water over recent years and the relative lack of movement on concessions have led to greater emphasis on access to these services. As regulatory oversight of energy issues has increasingly moved from a state to federal base, it is now more difficult to ensure that local knowledge and experience is taken into account by decision-makers.

CSV notes that the *National Energy Retail Law (South Australia) Bill* (NERL) has recently been introduced into State Parliament. As lead legislator for national energy reforms, South Australia is the first jurisdiction to table the NERL, which forms a significant part of the National Energy Customer Framework (NECF), which will replace most of the existing South Australian consumer protections. CSV remains concerned that some protections specific to SA may be lost and calls on the Government to retain rule-making power on issues such as retail price regulation, disconnections during heatwaves and guaranteed service levels (GSLs).

While energy policy continues to shift to the national level, CSV is pleased that the State Government has listened to ongoing concerns regarding the lack of independent and transparent oversight of the water supply industry. In its *Water Industry Bill 2010* Consultation Draft, the Government has laid the foundations for the Essential Services Commission of South Australia (ESCOSA) to take regulatory responsibility for this vital service. CSV welcomes this response to its 2010-2011 Budget Submission.

CSV notes that ESCOSA will have the authority to appoint an ombudsman scheme – this is an essential element in providing strong consumer protections in the water industry. As in its 2010-2011 Budget Submission, CSV calls on the Government to ensure appropriate resources are provided to the Energy Industry Ombudsman (EIOSA) to assume powers for water. EIOSA has flagged its in principle support for assuming this role, which would bring it into line with other jurisdictions such as NSW and Victoria.

Water pricing is also a significant issue for many older South Australians and in order to ensure their health and wellbeing needs are met, it is necessary to implement more progressive pricing structures. While CSV notes that the recent price rises have affected usage costs rather than fixed costs and that pricing reflects the National Water Initiative (NWI) Pricing Principles, the *Water Industry Bill* represents an opportunity to enact progressive and socially responsible water pricing policy.

CSV notes that section 36 of the draft *Water Industry Bill 2010* grants the power to regulate water pricing to ESCOSA with the important derogation that the Treasurer may dictate ‘pricing orders’ based on Government policy. CSV therefore calls on the State Government to develop a water pricing policy that clearly states as one of its objects to ensure a basic level of affordable

consumption to meet the health and wellbeing needs of older South Australians. Under the policy – and ultimately the ‘pricing order’ – additional costs requiring recovery (e.g. infrastructure projects, return on capital investment) can if approved be assigned to the second and third tiers of the pricing structure.

CSV believes that through independent regulation, an ombudsman scheme for water and progressive pricing structures based on sound policy, the State Government can ensure affordable access to our most essential resource.

### **COTA Seniors Voice again calls on the South Australian Government**

- 3.1 To retain derogations under the National Energy Retail Law in regard to retail price regulation, disconnections during heatwaves and guaranteed service levels.**
- 3.2 To expand the Energy Industry Ombudsman of South Australia’s jurisdiction to include water and to ensure the adequate resourcing of this expanded role.**
- 3.3 To develop a socially responsible water pricing policy to guide the Treasurer’s pricing orders to the water regulator.**

### **Solar Photovoltaic Systems**

It has been brought to the attention of CSV that many energy consumers find navigation of the systems and processes around the installation of solar photovoltaic (or PV) systems difficult. Moreover, many South Australians do not have access to the internet in their homes and so do not have easy access to the information provided on the Government website which seeks to explain these processes. When internet access is not an issue, the technical nature of much of the information presented is often difficult to understand.

CSV argues that if the SA Government is committed to more people taking up the solar energy option and returning energy to the electricity grid to meet State and Federal renewable energy targets, more should be done to engage people in the benefits and support them in the key steps to purchase and running a system. Steps include:

- Assisting with providing cost/benefit analyses of purchasing a solar system – including up-front capital and ongoing costs taking into account the power use of an individual household, likely time of occupancy, likely capacity and longevity of the solar panels installed and metering requirements.
- Assistance to locate reputable providers that meet certain quality standards.
- Arranging quotations from a number of providers.
- Comparing quotations – especially when there are different variables involved in each.
- Ensuring that providers lodge the necessary regulatory forms in a timely manner to ensure speedy payment of feed-in tariffs; and

- Maintaining and operating the system for maximum efficiency once installed.

CSV also acknowledges the work of the Energy Advisory Service (EAS) within Energy Division, Department of Transport, Energy and Infrastructure, which answers calls on energy issues during business hours. The EAS provides important information on a range of issues affecting energy use in the home, but this service does not extend to intensive case management.

CSV argues that it cannot be left to private companies who install solar PV systems to provide comprehensive case management for potential buyers. Companies which install solar PV systems and which also undertake energy audits or who are energy retailers cannot be considered to be impartial. By providing this support through an EAS with increased capacity, the Government can ensure that the information and case management needs of consumers are met and so assist in the fulfillment of key strategic aims of the Government.

### **COTA Seniors Voice therefore calls on the South Australian Government**

- 3.4 To resource the provision of energy case management services to South Australian energy consumers in relation to the uptake of solar photovoltaic systems as well as other more complex energy issues.**

## 4. Transport

### Public Transport – Planning and Delivery

Most recent work undertaken by Government in the area of transport has focussed on the planning and implementation of key road infrastructure. While State and Federal funding has also been made available for the improvement of heavy and light rail (train and tram) services in the metropolitan area, there has recently been little improvement in the overall public transport system.

The availability of a high quality public transport system is a critical issue for older people. Findings of the “Older Australians at a Glance” research shows that transport difficulties or distance from services was the main reason cited by over half (54%) of those people aged 85 years and over who have difficulty accessing service providers.<sup>5</sup>

In addition, when CSV conducted extensive community consultations in late 2007 on behalf of the now defunct Office for the Ageing (OFTA), we found that lack of appropriate, affordable and responsive transport was one of the key issues raised by older people across the State. Lack of transport was noted as having a major impact on older people’s ability to access services and to remain independent. Country participants were particularly disadvantaged, often having to drive themselves long distances for medical appointments and treatment.<sup>6</sup>

Additionally, older workers wishing to remain in the workforce can have their ability to utilise flexible work arrangements stymied by the lack of decent public transport. In the context of a rapidly ageing population, changed work arrangements and an outdated arterial, commuter-focussed public transport system, it is clearly the time to undertake a thorough review with a view to fundamental and forward-thinking reform.

CSV therefore calls on the State Government to develop and implement a comprehensive State Transport Plan to meet the needs of all South Australians, with a focus on older South Australians. The State Transport Plan should include transport provided by Local Government and be based on the methodology used in the Victorian “Accessible Public Transport in Victoria Action Plan 2006 – 2012”.

### **COTA Seniors Voice calls on the South Australian Government**

#### **4.1 To review the present transport system in SA, develop and implement a comprehensive State Transport Plan to meet the**

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<sup>5</sup> Older Australians at a Glance (2007) Australian Government Department of Health & Ageing and the Australian Institute of Health and Ageing; p17

<sup>6</sup> COTA SA (2008) Consultations on In-Home Services for Older people – Final Report to Office for the Ageing (OFTA) for 2008 – 2011 Home and Community Care Triennial Plan.

**needs of all South Australians into the future, especially the needs of older people who have different transport requirements than school and paid employment, and who do not necessarily drive themselves.**

CSV acknowledges the availability of free public transport for Seniors Card holders between 9:01am and 3pm on weekdays, and on weekends and public holidays. This measure has had a significant positive impact on older people's capacity to get out of their homes to participate in, and contribute to, their communities. It is also an important initiative in terms of helping older people to manage within often very constrained financial circumstances.

However, free public transport on the metropolitan public transport system has a serious limitation as it does not provide equity between all older South Australians across regional or even metropolitan areas.

CSV holds the view that older people living in regional areas who do not have access to public transport should share in the benefits provided to their metropolitan counterparts. To provide this assistance the Government should implement a voucher scheme such as that in Western Australia, which provides a monetary amount towards fuel that is deemed to be equivalent to the benefit of free public transport.

CSV also calls on the Government to address the barriers faced by older people living in under-served outer-metropolitan areas such as the beachside suburbs in the far south; the south-eastern foothills; parts of the Adelaide Hills; Gawler; and the suburbs south-west of the airport. These areas have all been identified in the "State of Ageing in SA" report as being poorly served by public transport<sup>7</sup> and require particular attention in the development of the State Transport Plan. In the interim additional transport support should be ensured for older people living in these areas.

### **COTA Seniors Voice calls on the South Australian Government**

**4.2 To introduce a scheme that benefits older people who live in rural and regional areas of the State to the extent that free daytime public transport benefits older people who live in metropolitan areas**

**4.3 To develop effective and efficient public transport services for South Australians living in the areas identified in the "State of Ageing in SA" report as transport disadvantaged, especially meeting the needs of older people.**

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<sup>7</sup> Government of South Australia (2009) "State of Ageing in South Australia", p147.

## **Community Transport**

While an efficient, reliable and comprehensive public transport system is vital for the health, wellbeing and social participation of older people, localised community transport that responds to the immediate day-to-day needs of this group is also critical. Many older South Australians with mobility issues rely on community transport services provided by Local Governments to allow them to attend medical and other appointments, and even to do their regular shopping.

However, as CSV has consistently maintained, these services are not and cannot be consistent across Local Governments under current arrangements. A strategic rethink of how these services are funded is required in order to engender consistency and efficiency within these services.

Under current arrangements community transport is commonly funded through the Home and Community Care (HACC) program. While the intention is to provide funding to support people to live independently in their communities, CSV is aware that the bulk of the funding supports people to get to medical appointments. As discussed elsewhere in this submission, any service that supports older people to attend health care is important. Nevertheless, transport for health care should be funded from the Health budget, allowing community support funding to enable people to continue to lead active lives in their communities.

Due to its importance in maintaining older people's connectedness with their communities, community transport needs to be enhanced to the point where a 'community transport system' forms an important part of an overall State Transport Plan. This will require innovative thinking as well as learning from other jurisdictions such as the Brisbane Council Cabs<sup>8</sup> model (as described in the CSV 2010-2011 Budget Submission).

### **COTA Seniors Voice calls on the South Australian Government**

#### **4.4 To provide a comprehensive high quality, affordable and comprehensive system of localised community transport that incorporates innovative models and responds to the needs of older South Australians.**

### **Transport for Aboriginal Elders to Attend Community Events**

SA has relatively small numbers of Aboriginal people<sup>9</sup>. In 2006, 25,555 people in SA identified themselves as indigenous (ABS 2006 Census). Of these only 907 (3.55%) were aged 65+. However Aboriginal people, particularly those in remote and very remote communities, face significant transport barriers compared to most other South Australians. Lower levels of

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<sup>8</sup> Government of South Australia (2009) "State of Ageing in South Australia", p147; Brisbane City Council website – [www.brisbane.qld.gov.au](http://www.brisbane.qld.gov.au) .

<sup>9</sup> The term 'Aboriginal' in this document also refers where appropriate to people from the Torres Strait Islands.

private vehicle ownership, a more dispersed population and higher rates of chronic health issues all combine to make transport a significant barrier to attaining health, wellbeing and social and cultural participation.

As well as travel for health reasons, Aboriginal people also face significant challenges in relation to travelling to and from important community events such as funerals for family or community members. The prevalence of chronic health conditions means that Aboriginal Australians experience the effects of 'old age' at much earlier ages than non-Indigenous Australians and due to a range of other factors many funerals are experienced by people each year. Sorry business is a substantial and important activity for Aboriginal South Australians and much grief is experienced at this time.

These circumstances are often made even more difficult by the distances required to be travelled to attend funerals, which can often be held some distance away from a person's home. Family members in many cases simply cannot afford to travel to these events and this is a source of considerable anxiety and shame for them. In some cases Elders have been known to harm themselves in their grief at not being able to attend the funerals of family members.

CSV has consulted with Aboriginal service providers and the Council of Aboriginal Elders of South Australia and believes the provision of transport through the current HACC arrangements needs to be reviewed so as to improve access for older Aboriginal people, and in particular to fund transport to funerals.

### **COTA Seniors Voice again calls on the South Australian Government**

- 4.5 To review the current HACC arrangements to improve transport funding and provision, via appropriate service providers, for older Aboriginal people to enhance their participation in important community events including funerals.**

## 5. Health

South Australia is experiencing growth in its older population and this presents challenges for our health system. While many people remain healthy for a long time, ageing brings with it changes in physical and mental abilities as well as an increased risk of developing chronic diseases and other age related diseases. South Australia's health system will need to be re-engineered to meet the needs of its ageing population.

In its 2010-2011 Budget Submission CSV noted the Government's recognition of the health needs of South Australia's ageing population through its development of the Health Service Framework for Older People 2009–2016. The Framework heralds:

- a greater focus on preventative health measures, early intervention and restoring health quickly following illness or hospitalisation;
- improved hospital care for older people;
- use of interdisciplinary teams to work with older people and their families to ensure that the right care is delivered in a timely fashion by the right professionals in the right location; and
- that workforce strategies are employed to ensure that there are appropriately skilled and knowledgeable staff working in a range of health settings across the state, and there are adequate numbers to achieve prompt, quality health care as and when needed.

However, there has yet to be a financial commitment to implementing the Framework despite two budgets having been handed down since its completion in May 2009. CSV believes that once implemented the Framework can make a real difference for older South Australians in their contact with the health system.

### **COTA Seniors Voice again calls on the South Australian Government**

#### **5.1 To resource the measures included in the Health Service Framework for Older People 2009–2016 to a level that can support its successful implementation and results in improved health services and experiences for older South Australians.**

The Health Service Framework for Older People 2009–2016 links with South Australia's Health Care Plan 2007-2016 and includes an integrated service model for older people that spans the continuum of care. It references major hospitals, special purpose and general hospitals, country community hospitals and the array of other health services and supports available to individuals experiencing a health event.

In this model, hospitals such as the Modbury, the Queen Elizabeth Hospital (QEH), Noarlunga Hospital, Hampstead, and the Repatriation General Hospital (RGH) have important roles to play in the evaluation, care and rehabilitation of older people. In order to successfully fulfil these roles these hospitals will require enhancement of their capacities to meet the challenges of an ageing population.

Of these, Modbury and the QEH will be – or are in the process of being – redeveloped. However the RGH, which has been earmarked for minor redevelopment only, operates from premises that as a whole are well out of date, inefficient to operate and not user friendly.

In addition, the budget for ‘Improving Care for Older Patients in Public Hospitals’ has been discontinued in 2010-11 after being underspent by around \$1.1 million in 2009-10.<sup>10</sup>

### **COTA Seniors Voice calls on the South Australian Government**

**5.2 To invest now in regional and country hospitals so they are resourced to meet the roles identified for them in the State Health Plan and the Health Service Framework for Older People 2009–2016.**

**5.3 In particular, within the scope and context of 5.2, to commit to the full physical redevelopment of the Repatriation General Hospital within the next term of government.**

### **Travelling Distances to Access Health Care Services**

The Patient Assistance Transport Scheme (PATS) aims to make specialist medical services more accessible to rural South Australians by assisting with the cost of transport and accommodation expenses. It does this by partial reimbursement to eligible patients on the production of original receipts for relevant expenses.

The scheme is restricted to patients who are required to travel more than 100 km (one way) to their nearest medical specialist. PATS therefore discriminates against people who are nearer than 100km from a medical specialist but who live outside metropolitan Adelaide and for whom public transport is either not accessible or not affordable.

The level of assistance provided is also insufficient to meet the needs of patients. The 16 cents per kilometre vehicle allowance has not been changed since 2001-02 and does not accurately reflect current fuel costs. The maximum \$30 per night accommodation allowance has not been changed since 1987 and is also well below the ATO’s reasonable accommodation cost ruling of \$157 per night in Adelaide.<sup>11</sup>

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<sup>10</sup> State Budget Papers

<sup>11</sup> ATO, Tax Determination TD 2009/15

Furthermore, having to find the money to pay for the transport and accommodation upfront and to bear the difference in allowances and total costs causes financial hardship for many older people, especially those solely reliant on the Age Pension and those who have to make frequent trips to their specialist because of their medical condition.

### **COTA Seniors Voice calls on the South Australian Government**

**5.4 To modify the Patient Assistance Transport Scheme (PATS) to allow it to support older South Australians who live within 100kms of their medical specialist but outside metropolitan Adelaide, and to allow for upfront payment of costs for those with substantial and/or frequent travel costs.**

**5.5 To immediately increase the accommodation allowance levels for PATS to ATO-defined levels.**

### **Transport to Maintain the Health of Older People**

Access to appropriate transport is inextricably linked to older people's capacity to get the health care they need. There is a considerable body of overseas research and understanding in Australia that the current lack of transport is a barrier to good health. CSV conducted a survey of members in April/May 2008 and in response to the open-ended question "what could be improved or changed to give you better health care?" transport was raised by a number of respondents.<sup>12</sup> This finding backs up previous work by the Australian House of Representatives Standing Committee on Health and Ageing which concluded that appropriate transport for older people to access health care is 'not optional but essential'.<sup>13</sup>

Older people often cannot get to or from both local and distant health services. It is difficult for people who do not drive themselves to get to General Practitioners, to allied health services, to diagnostic services and pathology services for one-off tests and for management of chronic disease. Often older people fail to use routine and preventative health care services because they cannot afford or gain access to appropriate transport. Additionally, over and above the cost of the service, many older people do not go to dentists because transport is an additional problem for them.

CSV understands that the DNAs ('did not attend') recorded in the state's health system in relation to medical appointments is now approximately 40%. Lack of reliable and timely transport is a significant contributing factor to this statistic. This is a significant inefficiency and cost to a health system already struggling to meet the demands placed upon it. Many older people defer seeking medical assistance and then become so ill that they are transported

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<sup>12</sup> COTA SA (2008) Health Survey in *myCOTA* magazine.

<sup>13</sup> House of Representatives Standing Committee on Health and Ageing Inquiry Into Long Term Strategies to Address the Ageing of the Australian Population over the next 40 years, March 2005

by ambulance to an acute care facility, a cost that would be offset by investment in transport to health care early in the illness.

Assistance is available disparately for people to travel for acute and specialist care from rural and remote areas, and in some cases for people living within metropolitan areas. Specific transport is provided for veterans and for people with disabilities to travel locally. Various programs offer taxi subsidies, access to public transport, and community transport options for older people and their carers.

Work by the National Aged Care Alliance<sup>14</sup> documents the shortcomings of existing programs and assistance for older people seeking transport to get to and from health care services, as well as the increased demand for such transport that is resulting from changes to health care policy and service delivery.

The Alliance proposes that:

- Resources for transport be factored into the delivery of all components of the health care system to older people including primary health care, rehabilitative care, community care and acute care services; and
- Public and community transport services, and programs provided through the private sector, require reorganisation so that transport is available for people to get to health care.

This may include the provision of taxi vouchers to older people expected to attend medical appointments. GP's or other health professionals could provide these to older people at the same time as issuing a referral to a specialist or writing a pathology request form.

## **COTA Seniors Voice calls on the South Australian Government**

**5.6 To adequately resource and facilitate, through the Health budget, transport for older people to travel to and from preventative, rehabilitative and acute health services, locally and remotely, in metropolitan and regional SA; and to provide these in conjunction with health services/professionals.**

## **Dental Health Services**

CSV understands that while ongoing budget pressures are felt across government services, the dental health budget will continue to be under pressure within the wider health budget. While no specific recommendations were made regarding dental health by the Sustainable Budget Commission, CSV remains concerned that without focused attention the South Australian Dental Service (SADS) funding for services for older people will suffer, and CSV will continue to monitor the funding position of SADS.

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<sup>14</sup> National Aged Care Alliance (2007) "*Transport and Access to Health Services for Older Australians - A Position Paper Prepared by the National Aged Care Alliance*".

CSV made a submission<sup>15</sup> to the 2009 Social Development Committee of the SA Parliament Inquiry into Dental Services for Older South Australians, in which direct feedback from CSV members featured heavily. CSV made this submission as a reflection of the absolute priority it sees in improving the dental health services available to older South Australians.

A number of the recommendations made in CSV's submission to the Inquiry and the Inquiry's Final Report will, if implemented, add value to current services offered to older South Australians both within aged care facilities and in the community. In his response to the report, the Minister for Health 'supported in principle' many of the key recommendations, subject to Commonwealth funding.

CSV maintains that the oral health needs of older South Australians transcend State/Commonwealth financial ambiguities and require an ongoing and dedicated State funding stream. Moreover, the recommendations referring to oral health assessment programs for older people require that additional funding be made available for follow-up treatment.

The recommendations made by CSV in its submission are reflected below, and these have been augmented by those made by the Social Development Committee in its final report.

### **COTA Seniors Voice calls on the South Australian Government**

- 5.7 To immediately commit State funding to implement the recommendations of the Social Development Committee Inquiry into Dental Services for Older South Australians, without waiting for Commonwealth Government financial support.**
- 5.8 To immediately address waiting lists to access assistance via the SA Dental Service as a matter of urgency.**
- 5.9 To resource the prevention and treatment needs identified by current SA Dental Service research of people receiving care in the community and in residential care facilities.**
- 5.10 To provide specific investment in portable dental units to provide restorative and preventative dental services to older people in rural and remote areas; in residential care facilities; and in the community.**

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[http://www.seniorsvoice.org.au/cms\\_resources/Documents/submissions/Dental\\_Services\\_Submission.pdf](http://www.seniorsvoice.org.au/cms_resources/Documents/submissions/Dental_Services_Submission.pdf)

## 6. End of Life Decisions - Advance Directives

CSV remains concerned about the prevalence of the most common form of abuse of older people: financial abuse. Financial abuse often occurs when an older person has granted Powers of Attorney to another person well in advance of the need. While it is understandable that such matters are settled prior to incapacitation, the donation of power to act on one's own behalf is intended to cover circumstances where a person loses the capacity to be accountable for their decisions. However, current legislative regimes provide that power to another person without any structure for accountability or for the revocation of powers granted.

The publicly released reports of the Government Review of Advance Directives, initiated by the Rann Government when first elected, include a number of recommendations around Advance Care Directives which have not yet been responded to by the Government. While many of the recommendations in the two reports are welcomed by CSV, there remains a lack of movement on the core issues of the revocation of powers and basic accountability.

It is appropriate that, where a person is granted decision-making power through an Advance Care Directive, some form of reporting should occur. Despite the administrative difficulties involved, the principle of accountability should not be overridden for the sake of expediency and CSV again calls on the Government to implement monitoring and reporting by people exercising such powers. CSV holds the view that a strengthening of recommendation 25 of the second report of the Advance Directives Review<sup>16</sup> – which allows for a person to appoint a financial monitor – to mandate financial monitoring would allow for greater certainty and transparency, as well as having a deterrent effect for financial mismanagement.

Just as important is the ability of individuals to reinstate their autonomy or to alter directives under prescribed circumstances. While the appropriateness of early decisions about Advance Care Directives and the appointment of agents are recognised, safeguards need to be put in place to ensure ease of revocation. CSV notes that under the current regime even the retrieval of relevant documentation can be a significant barrier to an older person's ability alter or revoke their directives. The Advance Directives Review reports have not addressed these fundamental concerns.

CSV believes that the current Commonwealth work towards a National Framework for Advanced Care Directives represents an opportunity for the State Government to show some national leadership by modernising and strengthening provisions for advance care directives in SA.

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<sup>16</sup> [http://www.agd.sa.gov.au/news/pdfs/2009/Stage\\_2\\_report\\_final.pdf](http://www.agd.sa.gov.au/news/pdfs/2009/Stage_2_report_final.pdf)

**COTA Seniors Voice calls on the State Government**

- 6.1 To further engage stakeholders on the implementation of the recommendations of the Review of South Australia's Advance Directives.**
- 6.2 To strengthen Advance Care Directives safeguards for older people by mandating financial monitoring and enshrining options for the alteration and revocation of Advance Care Directives under prescribed conditions.**

## 7. Older Workers

South Australia has a rapidly ageing population and it is clear that further investment is required to ensure that older workers are provided with opportunities and support to continue to contribute to the economy. The private sector recognises the importance of the 55+ age bracket in planning for the future and is choosing to hire older workers more than was the case 30 years ago.<sup>17</sup> This is in part due to the relative size of this age group as a proportion of the population and in part to increased lifestyle expectations and desire to have larger retirement incomes.

Despite successes in raising the participation rates of older South Australians, additional Government policy actions are required to ensure that older workers can contribute more fully. The range of policy options that require consideration and funding includes:

- attitudinal change and de-stigmatisation campaigns to raise awareness of the benefits of retaining older workers and addressing ageism;
- tailoring training to the needs of older workers and ensuring training opportunities are available throughout their working lives as part of a 'lifelong learning' approach;
- facilitating promotion and internal job changes within firms and organisations
- offering a wide range of flexible working practices (hours of work) such as ensuring workers maintain some control over start and finish times
- increasing the focus on workplace design and health promotion (such as ergonomics) and designing jobs and workplaces to retain experienced staff and attract older workers
- developing specific programs to facilitate employment exit and the transition to retirement, such as the timing and nature of retirement and gradual or phased retirement.

Additionally, growth in key industries in South Australia provides opportunities for older workers across the economy. To ensure that older workers are provided with the employment opportunities they desire, the State Government should – through DFEEST and the Training and Skills Commission – monitor industry needs and work to match existing skills and experience among older South Australians with these needs.

Older workers who want to contribute in an area different from their skills and experience base will require further training and education. An important element of this should be a sub-target in the 100,000 new training places policy for older workers seeking to re-skill or up-skill to meet the needs of the growing and increasingly diverse economy.

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<sup>17</sup> Government of South Australia (2009) "State of Ageing in South Australia", p175

**COTA Seniors Voice therefore calls on the South Australian Government**

- 7.1 To develop and implement, in conjunction with Commonwealth and Local Governments, a comprehensive strategy (including labour market planning, education and training, immigration, addressing ageism etc) to create an employment climate where older South Australians choose to remain in the workforce for as long as they desire and where impediments to this are removed.**
- 7.2 To devise pathways for seniors to successfully re-enter the workforce after a period of retirement, including the provision of services that nurture self-esteem and skills of older people.**
- 7.3 To continue to actively recruit and retain older people as employees in the public sector workforce.**
- 7.4 To work with the Commonwealth Government to increase public awareness of age discrimination and ageism and to combat negative perceptions about older workers.**
- 7.5 To abolish workers compensation age limits within SA.**
- 7.6 To enshrine older workers as a key focus in workforce planning in key growth industries, including through a target within the 100,000 training places policy.**

## 8. Housing & Home Maintenance

Housing for older people continues to be actively ignored by Government. The widespread perception that most older people reside in lifestyle communities or residential care facilities has led to an ongoing lack of access to social housing for older people in the past two decades. This has increased the plight of older private renters considerably and is now leading to the increase in the numbers of older people who are homeless.

Further, many older people who do own their homes do not have the physical or financial capacity to maintain them. Rising housing costs mean they are unable to sell their home in order to purchase a more suitable property in their own area. This problem is further exacerbated by the growth of residential care facilities and lifestyle communities on the urban fringe, isolating older people from their communities and support networks.

It is vital that the Government recognise the long held knowledge that it is appropriate for most older people to age in their own communities and act accordingly. Organisations such as National Shelter and the Brotherhood of St Laurence have referred to the increasing crisis in housing for older people, and the National Older People's Affordable Housing Alliance has put a sound case for investment in support for older people's housing now. By investing in the short term, the Government can avoid an imminent crisis.

The continued lack of recognition by the State Government of the specific needs of older people for housing within policies such as targets for the provision of housing for people on low incomes and the provision of subsidies for people buying their first home are prime examples of the ageism rife in government policy in South Australia.

Furthermore, the considerable current investment of government funds in the provision of new housing is being made without any requirement that the housing be designed in a manner that provides accessibility for people with limited mobility (i.e. all of us as we age). As the cost of including universal accessibility at the design stage is negligible compared to retro-fitting housing, the current investment in housing amounts to exclusion of older people and others with limited mobility.

To this end, CSV calls on the South Australian Government to exceed the targets set in the National Dialogue on Universal Design Strategic Plan<sup>18</sup> and require that all new housing – inclusive of public and private housing – reaches the Livable Housing Design Guidelines 'gold' standard by 2019.

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[http://www.fahcsia.gov.au/sa/disability/pubs/general/Pages/national\\_dialogue\\_on\\_universal\\_design\\_strategic\\_plan.aspx](http://www.fahcsia.gov.au/sa/disability/pubs/general/Pages/national_dialogue_on_universal_design_strategic_plan.aspx)

**COTA Seniors Voice calls on the South Australian Government:**

- 8.1 To target provision of social housing and housing subsidies for older people, including a 'last home program' to assist low to middle income older people to adapt their existing housing or move to other housing in their area that better meets their needs and capacities.**
- 8.2 To introduce better protection for older people living in private rental settings and to provide active support to ensure the energy efficiency of the dwellings they rent.**
- 8.3 To increase support to older people on low incomes to access value for money home maintenance services such as the COTA Home Maintenance Service.**
- 8.4 To adopt a target of 100% new housing to reach the Livable Housing Design Guidelines gold standard by 2019.**

## 9. Information Technology

The prevalence of information technology across and throughout the South Australian economy and society has led to an unrealistic expectation that older people should utilise electronic forms of communication in place of paper documents and telephone and face-to-face communication. Older people require support to adopt and utilise information technology that could be of benefit, and even then, some may never do so because it is simply irrelevant to their lives.

Recognising that this is a very important contemporary issue, CSV conducted a survey of its members in July/August 2009 to gather views and data about information technology use by older people. 1245 members responded to this survey, all of whom were over 50 years of age. Of the total survey respondents, 81% had used a computer while 19% had not. Of those respondents who had not used a computer, most cited cost, lack of relevance, and difficulty. Most significantly, 29% of respondents did not have access to the internet.

Members were asked what support or assistance they required to help them use a computer. The main forms of assistance indicated by members were:

- Training that is affordable, easy to understand, personalised, accessible and ongoing;
- A helpline that can give simple, patient and understandable information, in plain language, and advice when needed; and
- Affordable equipment, programs, training and broadband.

The SA Government has itself recognised the information technology needs of seniors. The “State of Ageing in South Australia” report says:

“It is strongly recommended that further initiatives be undertaken to encourage and support older people to develop their IT skills. There is a risk that the digital divide will further alienate older people from the community, information and services. Without specific additional support, their knowledge and ability to contribute to the community through volunteering, for example, may be lost. It should be noted however that many older people are unlikely to embrace the digital revolution and will continue to require information and support services in a non digital format. In particular, governments and institutions will need to continue to provide information and services in a variety of formats to cater for all segments of the population. Not doing so could be viewed as exclusive and discriminatory and will undermine the state’s action in acknowledging the value of older people.”<sup>19</sup>

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<sup>19</sup> Government of South Australia (2009) “State of Ageing in South Australia” – p155

**COTA Seniors Voice therefore calls on the South Australian Government:**

- 9.1 To continue to offer information on paper, face-to-face and by phone, not solely electronically.**
- 9.2 To work with Local Government and other providers to ensure sufficient and low cost training is available to older South Australians, including in rural areas, to ensure that those who want to use personal computers can do so.**
- 9.3 To foster access to affordable information technology hardware and software for low income older South Australians**
- 9.4 To fund a PC Helpline to assist older South Australians.**

# Appendix

## COTA Seniors Voice

COTA Seniors Voice is recognised as a strong and effective organisation providing significant leadership on ageing issues at state and national levels. COTA Seniors Voice also delivers a range of programs and services to seniors.

COTA Seniors Voice is South Australia's peak seniors' organisation with an individual membership of around 20,000 and over 250 seniors' organisations members with a combined membership of more than 60,000. In addition COTA Seniors Voice has 80 associate members who are aged care providers, local government bodies, health units and other service and educational institutions. COTA Seniors Voice membership networks and programs are state-wide.

The organisation (then called 'The Older People's Welfare Council' and later 'Council on the Ageing' or 'COTA') was incorporated in 1957, and changed its name to COTA Seniors Voice in 2008.

The key roles of COTA Seniors Voice are:

- Policy and advocacy - centrally engaged in every major State Government policy related to ageing or seniors over the last 20 years, including the 'Ten Year Plan', 'Moving Ahead' and 'Improving with Age'.
- Representation - seniors' interests are represented by COTA Seniors Voice in a wide range of State and Commonwealth government forums, non-government bodies, consumer advisory groups, research bodies.
- Programs and services - COTA Seniors Voice manages a range of services and programs delivered to seniors and seniors' groups within South Australia and in other states
- Sector development - COTA Seniors Voice has actively supported the establishment a wide range of aged sector organisations including Seniors Information Service, Aged Rights Advocacy Service, Aged & Community Services SA & NT, Carers SA, Aboriginal Elders Council of SA and many others. It promotes adaption and development of local seniors organisations throughout SA
- Member services – COTA Seniors Voice provides its members with access to a range of special benefits including discounts, insurance, financial and legal services, home maintenance services, day trips and a magazine.