



Legislative Assembly for the
Australian Capital Territory

Select Committee on Social Policy

Submission cover sheet

Inquiry into Petition 017-25 and E-Petition 005-25: Closure of Burrangiri Aged Care Respite Centre in Rivett

Submission number: 25

Submitter: Save Burrangiri Action Group

Date authorised for publication: 20 May 2025

Save Burrangiri Action Group

Submission to the ACT Legislative Assembly Inquiry into Petition 017-25 and E-Petition 005-25: Closure of Burrangiri Aged Care Respite Centre in Rivett.

19 May 2025

Introduction

The Save Burrangiri Action Group welcomes the opportunity to make a submission to this inquiry.

Burrangiri Aged Care Respite Centre (Burrangiri, the Centre) is a vital and much-loved service that provides half the available respite beds in the ACT. We have campaigned for the Minister to reconsider her decision in January 2025 to close Burrangiri, and we celebrate her recent announcement of a two-year extension for the Centre.

We are confident that careful, evidence-based planning, taking the needs of older Canberrans and their carers into account, will demonstrate that Burrangiri still has an important role to play in the ACT's broader landscape for respite care.

Our submission draws on documents released under a freedom of information request¹ and various documents released to Ms Fiona Carrick MLA.

1. The Complex Respite Landscape

ACT's Health Directorate (ACTHD) has recognised the definition of respite care set out in the Aged Care Act of 1997 as,

“Residential or flexible care (as needed) provided as an alternate care arrangement with the primary goal of offering a carer or care recipient a short-term break from their usual care arrangement. This includes helping to alleviate the burden on both paid and unpaid caregivers while providing a fresh social or residential environment for those requiring assistance.”²

¹ FOI reference number ACTHDFOI24-25.10

² ACT Health Directorate, 2024. ACT Government funded Respite – short term options paper p.8.

Clients require respite care for many reasons, including people with disabilities, mental illnesses, the elderly and those suffering from dementia.³ ACT's Health Directorate has noted the strong demographic trends driving demand for respite care.

“The respite, aged care and healthcare landscape in the ACT is changing, driven by a growing older population and increasing complexity in healthcare needs. ACT's older population aged 65 years and over or 50 years and over for Aboriginal and Torres Strait Islanders peoples, is expected to grow by 87.9 per cent from 62,087 in 2022 (13.6 per cent of total ACT population) to 116,659 in 2041 (17.6 per cent of total ACT population). The proportion of the population over the age of 85 years will increase from 7,293 in 2022 (1.6 per cent of the total ACT population) to 21,169 in 2041 (3.1 percent of the total ACT population).”

ACTHD has recognised that respite care can be provided through various formats such emergency respite, in-home care and scheduled care outside the home – including centre-based respite, cottage respite and residential respite.⁴

We understand that ACTHD is part-way through a comprehensive planning process considering long-term, future options for respite and transitional care needs and services for older Canberrans.⁵ We understand that this plan will,

“... focus on the longer-term strategies requiring a broader, systems-thinking approach to develop sustainable solutions that meet the needs of the community. This includes a health services planning approach with a comprehensive evaluation of the aged care landscape. This will explore innovative funding avenues for long-term investments in aged care, including potential repurposing of the Rivett site (noting this would mean it is not available for the relocation of Directions), engaging with and considering proposals with the Commonwealth Government aimed at supporting capital projects, and new and innovative models of care or programs.

It will consider the outcomes of the National Health Reform Agreement negotiations; and the Aged Care reforms being led by the Commonwealth including changes to Aged Care legislation. There is a need to revisit this work in the future to consider the impact of these and other reforms including evaluation of successfully implemented options.”⁶

³ ACT Health Directorate, 2024. ACT Government funded Respite – short term options paper p.8

⁴ ACT Health Directorate, 2024. ACT Government funded Respite – short term options paper p.8

⁵ ACT Health Directorate, December 2024. Ministerial Brief: Options for Aged Respite Care in the ACT (Burrangiri) p.4

⁶ ACT Health Directorate, December 2024. Ministerial Brief: Options for Aged Respite Care in the ACT (Burrangiri) p.4

We recognise the complexity of the respite landscape, and we strongly support the development of a long-term plan for respite care. We trust that this process will take care to hear the voices of and experiences of the consumers of respite services.

2. Burrangiri's Place in the Respite Landscape

Burrangiri is contracted by ACTHD to provide short-term, planned and crisis respite care and accommodation for older people, post-hospital convalescent care for all ages, and a day centre respite care program largely focussed on older people.

Burrangiri is therefore mainly focussed on older Australians and their carers. The facility was not designed to serve clients with highly complex needs such as post-bariatric surgery clients, clients who have had tracheotomies, clients with substance use issues, infectious patients, or those with severe behavioural and psychological symptoms of dementia.

In our view ACTHD's recent discourse on Burrangiri has been deficit-based by focussing on services that the Centre was not designed to provide, rather than taking a strengths-based approach by focussing on what it does well. In fact, Burrangiri has 100% occupancy and a 98% client satisfaction rating.⁷ What other ACT health facilities can claim such positive outcomes?

ACTHD's December 2024 Ministerial Brief on Short-term Options for replacing Burrangiri considers various mechanisms to procure respite services, primarily from Residential Aged Care Facilities (RACF). The brief acknowledges that this is "a very thin market" and that "RACF bed numbers have not increased at the same rate as demand and the ACT's growing older population". Furthermore, the brief acknowledges that "The Commonwealth Department of Health and Aged Care (CoHAC) has advised that the majority of RACFs have significant waiting lists for permanent placements and are therefore not interested in taking respite clients".⁸

Our own research strongly confirms these the comments made in the Ministerial Brief. We have engaged with 35 RACFs to determine the availability of dedicated short-term respite beds in ACT with the following results.

Facilities		Dedicated Respite Beds	Potential Bed Nights pa ⁹	%	ACAT required?	Ensuite bath-rooms
1	Burrangiri	15	5,366	50%	No	No

⁷ Salvation Army Performance Report July 2022-June 2023, Salvation Army Performance Report July 2023-December 2023.

⁸ ACT Health Directorate, December 2024. Ministerial Brief: Options for Aged Respite Care in the ACT (Burrangiri) p.6

⁹ Assuming 98% availability, or one week closure per year.

Facilities		Dedicated Respite Beds	Potential Bed Nights pa ⁹	%	ACAT required?	Ensuite bath- rooms
2	Villaggio Sant' Antonio	5	1,789	17%	Yes	Yes
3	Carers ACT - Deakin Cottage (closed for repairs at time of writing)	4	1,431	13%	No	No
4	Carers ACT - Isaacs	4	1,431	13%	No	No
5	Adria Village	2	715	7%	Yes	Yes
6	Warrigal Hughes - St Andrews Village	0	0	0%		
7	BaptistCare Carey Gardens Aged Care Home	0	0	0%		
8	BaptistCare Griffith Centre Aged Care Home	0	0	0%		
9	RSL Fred Ward Gardens	0	0	0%		
10	RSL Sir Leslie Morshead Manor	0	0	0%		
11	RSL Lifecare Bill McKenzie Gardens	0	0	0%		
12	RSL Mona Tait Gardens - Kaleen	0	0	0%		
13	Canberra Aged Care Facility - Lyneham	0	0	0%		
14	ACT Transitional Therapy and Care Program (TTCP)	0	0	0%		
15	Calvary Haydon Retirement Village	0	0	0%		
16	Goodwin Farrer (George Sautelle House)	0	0	0%		
17	Goodwin House Ainslie	0	0	0%		
18	Goodwin Monash	0	0	0%		
19	Southern Cross Care Residential Aged Care Campbell	0	0	0%		
20	Southern Cross Care Residential Aged Care Ozanam Garran	0	0	0%		
21	IRT Kangara Waters	0	0	0%		
22	Mountain View Aged Care Centre	0	0	0%		
23	Uniting Mirinjani	0	0	0%		
24	Uniting Eabrai	0	0	0%		
25	Uniting Amala	0	0	0%		
26	Ginninderra Gardens	0	0	0%		
27	Leo's Place	0	0	0%		
28	Pines Living Aged Care Facility	0	0	0%		
29	Jindalee Aged Care residence	0	0	0%		
30	RFBI Holt Masonic Village	0	0	0%		
31	Anglicare in Reid	0	0	0%		
32	LDK Greenway Views	0	0	0%		
33	LDK Amberfield	0	0	0%		
34	Arcare Aranda (Opening June 2025)	0	0	0%		
35	Arcare Wright (Opening December 2025)	0	0	0%		
Total		30	10,731	100%		

In effect just five facilities provide dedicated short-term respite beds in ACT, of which Burrangiri contributes a very material 50%.

New entrant Arcare will provide a significant number of RACF beds but has indicated that it has no intention of offering short-term respite facilities.

Whilst some RACFs do provide short-term respite when beds become available between long-term clients we do not consider these to be dedicated respite beds since they cannot be scheduled in advance, and they face direct competition with the RACF's preferred long-term clients. We already know there is a dire shortage of aged care facilities, so we do not expect this situation to change.

Whilst there may be merit in a respite model that procures surplus beds from RACFs we believe that Burrangiri's model offers some key strengths which should not be overlooked:

- **No ACAT barrier** - Clients do not require a prior Aged Care Assessment Team (ACAT) assessment, making the service accessible to a broader range of clients. ACAT assessments can take months to complete.
- **Continuity of care** – Dedicated respite facilities can provide a consistent environment which helps to build trust and familiarity for both clients and staff. Shifting between residential aged care facilities can be disorienting and distressing, especially for older people with cognitive impairment. A brokerage system which places respite clients at the first available RACF is unlikely to achieve the strong continuity of care that Burrangiri already provides.
- **Addressing client's fear of aging** - Some older people fear going into residential aged care. Offering respite in RACFs could be distressing for these clients. By contrast Burrangiri is very clear that it only offers short-term, supportive care. The combination of day-care and residential respite care enables a progressive adaptation.
- **Administrative simplicity** – Carers are able to make a booking for repeat care at Burrangiri in under 30 seconds.¹⁰ A purchased bed model is unlikely to achieve such speed and convenience. Our experience with accessing services via Carers Gateway has certainly demonstrated this challenge.

Taken together these are powerful strengths that help to explain Burrangiri's high utilisation and client satisfaction score. We would argue that Burrangiri should be seen as a unique model for respite care which ACT should be proud of. Rather than seeking to close the Centre perhaps we should be drawing lessons from its success to inform our plans for the future?

¹⁰ Recent personal experience of Save Burrangiri Action Group member.

3. Rebutting the arguments for closing Burrangiri

We understand Minister Rachel Stephen-Smith's stated reasons for closing Burrangiri Respite Centre to be,

“Unfortunately, the 35-year-old Rivett facility is **no longer fit for purpose** to support the delivery of quality aged care respite services. A review was recently undertaken to understand if the facility could be renovated. The **review found that significant and substantial structural work** would be required to **bring the building up to modern standards and requirements**. The facility is not intended to be demolished.”¹¹

The Minister's decision appears to rest on the view that Burrangiri:

- Cannot meet the demands of high-needs clients
- Is somehow unsafe
- Has inadequate bathroom facilities, and
- Has prohibitively high maintenance costs.

ACTHD has not published evidence to support this conclusion. We have reviewed all relevant documents available to the public, released via FOI requests and released to MLAs in an attempt to identify any such evidence.

Standard of care

It is unclear to us what standard ACTHD has applied to determine that Burrangiri is no fit-for-purpose. We believe that ACTHD should apply the Aged Care Quality and Safety Commission's Aged Care Quality Standard 5 when assessing the physical service environment that the Centre provides for residential care, respite care and day therapy centres.

The 2023 Burrangiri Asset Management Plan notes that ACTHD rated the Centre as a level 4 – Highly Important Site.¹² ACTHD ranked four sites higher than Burrangiri and seven sites below.

Internal feedback from the Centre Manager on 15 November 2023 noted the challenge of servicing high-need clients. We understand these comments to be a simple reflection on the broader systemic challenges facing respite care in the ACT. It is possible that the Centre Manager's comments may have been taken out of context.

¹¹ Correspondence from Minister Stephen-Smith dated 17 March 2025 to Dr Peter Lyons, Convenor of Save Burrangiri Action Group. Emphasis added.

¹² ACTHD. August 2023. Burrangiri Asset Management Plan. See Table 3 on page 10. Scale 1 – No operational requirement, 2 – Ancillary function, 3 – important, 4 – Highly important, 5 – Critical.

Safety concerns

ACTHD undertakes regular site visits to Burrangiri to meet with The Salvation Army (TSA) Centre Manager to identify and address safety risks. We have reviewed the 2024 Site Visit reports and have not detected any material safety concern in the reports.¹³ In fact the section of the report dealing with 'Base building concerns' records nil issues in all four of the 2024 reports.

We have approached TSA for comment. TSA has confirmed they are not aware of any safety issues at Burrangiri.¹⁴

Shared Bathrooms

The Minister has made much of the fact that Burrangiri offers shared bathrooms. In fact, Burrangiri has a 3:1 Client-to-Shower ratio which is directly on par with public hospital wards. We believe this is entirely appropriate for a short-term care facility. We note that Carers ACT cottages also offer shared bathrooms and ACTHD has not called for those facilities to be closed.

The 2023 Burrangiri Asset Management Plan (AMP) states that "The site currently houses 15 rooms and 2 shared bathrooms".¹⁵ We think this statement is misleading. We have inspected the facility and can confirm that Burrangiri has 7 showers and 12 toilets. We have engaged with staff and clients and all parties report satisfaction with the bathroom facilities.

Room sizes

Whilst larger rooms would of course be ideal we believe that Burrangiri's rooms are functional, and we cannot find evidence of a health care standard that suggests otherwise.

Building condition

We have asked TSA to clarify if they are aware of any substantive issues with the state of the building, to which they responded that "The only issue we might refer to as substantial would be the roof, which does require some rectification work".¹⁶

We asked the TSA Centre Manager for clarity on the issues which Minister Rachel Stephen-Smith had raised in the ACT Legislature and received the following response,

¹³ See attached the Client Services and Infrastructure Site Visit Reports for the past year dated 5 March 2024, 20 Jun 2024, 6 August 2024 and 21 November 2024 as evidence of this process.

¹⁴ Personal correspondence with TSA Centre Manager.

¹⁵ ACTHD. August 2023. Burrangiri Asset Management Plan. Page 6.

¹⁶ Personal correspondence between The Salvation Army and Save Burrangiri Action Group.

“Whilst we have had no formal report provided by ACT Health as to the rectification works required for Burrangiri, I can provide you with the following:

- 1. **Electrical System** – Given the age of the building, we have needed to replace a number of power points and switches over time. Electrical upgrades were undertaken in 2024 when we switched from gas domestic hot water to electric. I believe the switchboard also requires upgrading, but we have not been advised of any specific safety concerns.*
- 2. **Heating** – Major repair works were undertaken on the under-floor hydronic heating system last year just before winter due to identification of a leak. In addition, because under-floor heating can affect the vinyl floors due to degradation of the glue, several resident rooms along with the dining room had the vinyl replaced in December 2023 and during 2024.*
- 3. **Air Conditioning** – In December 2023 the evaporative air conditioner for rooms 9-15 stopped working and a new unit was installed in February 2024. In addition, the split system air conditioner in the sunroom was fixed and reinstalled Feb 2024. Currently we are not aware of any other issues with air conditioning and heating.*
- 4. **Ventilation**- this broke down 11/01/2024 and a new unit was installed 19/04/2024. We recently had issues with another ventilation unit and Larkin industries was able to rectify.*
- 5. **Roof** – in heavy downpours we do experience leaks internally (some substantial leaks), and rectification works are required to resolve this along with issues related to pitch and safety anchor points”.¹⁷*

We are left with the strong impression that the Centre is in fact proactively maintained and in good order for a building of this age.

Refurbishment plan and budget

Minister Rachel Stephen-Smith has argued that Burrangiri must be closed since it requires significant refurbishment.

We have searched the available documents and can find no evidence of a refurbishment plan. Since the closure decision was announced statements on the cost

¹⁷ Personal correspondence between The Salvation Army and Save Burrangiri Action Group.

of refurbishment cost have ranged from \$900,000¹⁸ to \$2 million¹⁹ to \$6.5 million²⁰ and finally to \$12 million.²¹ If indeed the facility is to be closed for refurbishment, we would expect the plan and the budget to be finalised well in advance of the closure date. We are left with the distinct impression that no such plan exists.

ACTHD has, however, commissioned two independent reports into the Burrangiri facility which have a bearing on this issue:

- The December 2020 report on Burrangiri Condition and Functionality Assessment prepared by SAFM Solutions (SAFM Report).²²
- The 2023 Burrangiri Asset Management Plan (AMP) prepared by KPMG.²³

We summarise the key findings of each report below.

2020 Burrangiri Condition and Functionality Assessment

The SAFM report is a high-level assessment which has been superseded by the AMP which considered a far greater level of detail.

The SAFM report cites a Burrangiri Asset Replacement Value (ARV) of \$3.3m based on a 2014 source. Applying ABS inflation statistics for Other Residential buildings we can expect a 45% increase in replacement value between 2014 and 2025, or a current ARV of \$4.8m.

The SAFM report found an ‘indicative backlog’ of \$1.23m, or 37% of the ARV, as follows.

Category	Source	Estimate
Functionality backlog	No breakdown provided	\$680,000
Backlog maintenance	No breakdown provided	\$550,000
Total		\$1,230,000

The Functionality Assessment was undertaken against ‘generic criteria’ and the ‘VIC Govt Aged Care Residential Services, Generic Brief (2000)’. Limited detail is provided, making it difficult to assess whether the criteria were appropriate for such a specialised facility.

¹⁸ Standing Committee on Social Policy: Inquiry into Annual and Financial report 2023-2024, 20 February 2025.

¹⁹ Ministerial Brief Burrangiri Aged Care Respite Centre- Future options for service and facility, 13 June 2024

²⁰ Ministerial Brief Burrangiri Aged Care Respite Centre- Future options for service and facility, 13 June 2024

²¹ Transcript press conference Mark Butler

<https://www.markbutler.net.au/news/transcripts/gdrpztnrfpgjjna3ychlqw94wshf55>

²² SAFM Solutions. December 2020. Report on Burrangiri Condition and Functionality Assessment.

²³ ACTHD. August 2023. Burrangiri Asset Management Plan.

The Functionality Assessment finds that ‘No issues were reported or observed’. Some specific issues are identified, but none are particularly material.

Attachment A of the SAFM report estimates a Cost of Rectification Works at \$142,000. It is unclear whether this amount is included in the Backlog Maintenance. The issues listed in the 2020 SAFM Rectification Works budget are similar to the issues identified in the subsequent 2023 AMP.

2023 Burrangiri Asset Management Plan

The AMP is based on ISO 55000 Asset Management Standard and, as such, represents best-practice asset management.

The AMP set out a 15-year plan and budget based on a detailed assessment of 60 well-defined asset sub-systems. The AMP took asset age and life expectancy into account with an asset replacement schedule. The AMP considered asset maintenance and provided for cyclic, preventative and reactive maintenance.

The AMP proposed a KPI for the Centre to be compliant with all statutory obligations by June 2025. No significant non-compliances were identified. Some minor compliance issues are noted, together with a target to resolve these by June 2025 – ironically the same date as the Minister’s announced date of closure.

Asset sub-systems were assessed on a 1-5 scale. Seven of the 60 asset sub-systems were found to be poor performers in the category of ‘2-Marginal’.²⁴ Some of these systems had exceeded their design life – such as flooring, some elements of the electrical distribution board, the asphalt hardstand, the domestic hot water system, and some elements of the heating, ventilating and air conditioning (HVAC) system. The AMP prioritised four systems for immediate action, including replacement of a faulty gutter, upgrading the distribution board RCDs, resolving the way forward with the hydronic heating system and replacing old fluorescent lights with LEDs.²⁵ Altogether these seven asset sub-systems constitute a small fraction of the total facility.

The AMP provides a detailed 15-year budget estimate for planned maintenance, capital expenditure as systems reach end-of-life, and the cost of addressing the identified backlog, as summarised below.

Category	15 Year Total	Average pa
Planned maintenance	\$1,162,250	\$77,483
Capital expenditure	\$2,081,081	\$138,739
Backlog	\$457,594	\$30,506
Total	\$3,700,925	\$246,728

²⁴ ACTHD. August 2023. Burrangiri Asset Management Plan. See table 6 on page 13.

²⁵ ACTHD. August 2023. Burrangiri Asset Management Plan. See table 8 on page 15.

We do not have data with which to benchmark these estimates against peer facilities but on the face of it none of the estimates seem prohibitive for a facility of this age or scale. We also note that the bulk of the backlog expenditure was budgeted to occur in 2023 with the balance occurring in 2030.

Our conclusion on Fit-for-Purpose

In our view neither the 2020 SAFM report or the detailed 2023 AMP report support the view that Burrangiri is “not fit for purpose”, “non-compliant” or “sub-standard”. The two reports do identify some assets that have exceeded their planned life and some maintenance backlogs. The 2020 SAFM report quantifies the backlog at \$550k whilst the more detailed 2023 AMP suggests \$457k, of which a substantial portion should already have been spent. In both cases the backlog amounts to around 10% of the estimated Asset Replacement Value.

The findings in these two reports align well with our daily experience of the Centre, the 2024 Site Visit Reports and the Salvation Army Centre Manager statements on the current condition of the facility.

In conclusion we cannot find evidence to support:

- The Minister’s position that Burrangiri should be closed on fit-for-purpose grounds, or
- The exaggerated claims that have been made on the cost of refurbishment.

On the contrary, we find considerable evidence to support the view that Burrangiri:

- Is a core component of ACT’s respite system, providing 50% of dedicated respite beds in the Territory with very high utilisation and client satisfaction scores
- Requires some maintenance, as would be expected with a mid-life asset of this nature. The expected cost of maintenance is well documented and represents a small fraction of the replacement asset value.
- Can continue to operate and successfully deliver respite services within the scope of its functional design for the foreseeable future.

Funding Options to Sustain Burrangiri

We recognise that the ACT Health budget is under pressure. We nonetheless trust that a viable path can be found to sustain Burrangiri’s operation long-term and wish to raise the following possibilities,

- **Commonwealth Aged Care Funding** – The Salvation Army is already an approved aged care provider. With ACT Government support TSA could pursue an aged care accreditation for Burrangiri. We note that over the period July 2023

to April 2024 247 of 314 or 79% of the Centre's clients had an ACAT assessment. Of the 67 who did not have an ACAT assessment only 12 were under the age of 65 and therefore ineligible. This suggests that just 4% of Burrangiri's clients would not be eligible for Commonwealth Aged Care funding. Other funding options could be explored for this small minority.

- **Land swap** – A land swap could be considered between the ACT Government's Burrangiri facility and The Salvation Army's Block 22, Section 72 in Dickson.

4. A Constructive Way Forward

We request the Inquiry to:

1. Encourage ACTHD to develop a long-term plan for ACT respite service provision, drawing on insights from respite clients and carers
2. Take a strength-based approach in evaluating the role that Burrangiri can play in this plan given its dedicated respite beds, its unique ability to provide continuity of care and its fit-for-purpose administrative systems, and
3. Consider all practical measures to retain Burrangiri as a dedicated aged care respite service beyond the Minister's two-year extension, including working with The Salvation Army to identify a model for long-term financial sustainability.

We thank you again for the opportunity to make this submission.

Save Burrangiri Action Group
Dr Peter Lyons - Convenor

[REDACTED]
[REDACTED]

Attachments

ACTHD. December 2020. Burrangiri Condition and Functionality Assessment.

ACTHD. August 2023. Asset Management Plan Burrangiri.

ACTHD. November 2024. ACT Government funded Respite Short-term options paper.

ACTHD. December 2024. Ministerial Brief Options for Aged Respite Care in the ACT (Burrangiri).

ACTHD. Client Services & Infrastructure Site visit reports 2024.

The Salvation Army. July 2022-June 2023. Burrangiri Performance Report.

The Salvation Army. July 2023-December 2023. Burrangiri Performance Report.