This submission is as an individual, not as DAC Chair.

Cheers

Trevor

Trevor Robinson MAAPD(ANU) MMCom(UC)

There seems to be considerable disparity in the services delivered to people with disabilities and those offered to the elderly in respite or aged care facilities, despite the analogous physical, intellectual and emotional needs of both groups. While there is absolute agreement that the fragilities of elderly residents necessitate the permanent and ongoing presence of medical expertise such as nurses, there is no understanding why people with disabilities in respite care receive a lower or lesser standard of physical therapy and mental stimulus to that of aged care residents. Examine schedule of any nursing home, aged care or retirement facility and you'll find a significant portion of the day's routine dedicated to structured diversional-, physio- and occupational therapy by qualified practitioners. Yet in respite care (including group homes), therapeutic treatment is either not performed at all, or left to unqualified, untrained carers to perform in a vague, haphazard manner.

However, inequity between aged care and disability care extends beyond the provision of therapeutic treatment. A number of aged care facilities have hydrotherapy pools, gyms and adequately equipped common areas (large screen TVs, private spaces, gardens, furnishings, etc). You'll find none of these niceties at a disability accommodation facility, despite the need being the same.

Last but not least, the delivery of care in disability accommodation needs to change. The current approach is for individual residents to adapt to the routine dictated by the facility, eating, showering and performing ADL (Activities of Daily Living) at a time not of their choosing. Despite most facilities having a small resident population with low resident/carer ratios, the right of residents to determine their daily schedule is either dismissed or ignored. The care should match the individual, not the individual adapt to the care. Unlike those in aged care, those in disability accommodation consider the facility as home, and should be allowed to experience the right to determine their routine.