



Inquiry into Caring for Older Australians
Productivity Commission
GPO Box 1428
CANBERRA
ACT 2601

Caring for Older Australians – a submission to the Productivity Commission

Introduction

Leichhardt Community Transport Group Inc (LCTG) is a not for profit, community based organisation, formed originally in 1978. It has continuously provided Community Transport services since 1982, pre-dating the Home and Community Care (HACC) program.

LCTG provides Community Transport services in the Inner City areas to Marrickville and Leichhardt LGA's, to the west Sydney. LCTG offers a wide variety of services, including Flexible Transport to facilities and services outside of normal hours or destinations outside our area, a unique shuttle service, 9 services a month for grocery shopping, 4 Social Outings a month, group and individual transport to health services, etc.

Community Transport in NSW provided 2.6 million trips in 2008-09, over three quarters provided under HACC funding, and clearly is a major source of transport for the aged population.

The purpose here, however, is to look at factors both inside and outside of Community Transport that affect transport supply to that population.

Summary

LCTG recommends

- (1) Transport be recognised as a key element in enabling aged people to stay in their own homes.
- (2) Transport for aged people be considered within a framework and a continuum of all transport provision for all age groups, not as an isolated issue for one age group.
- (3) Planning and Integration of Transport services be a requirement of Government and include Community Transport.
- (4) Equitable provision and social inclusion be major aims of Public Transport supply, for KPI's to be developed and regularly reported on.
- (5) That NSW Health be required to recognise and play a responsible part in coordinating with, and resourcing Community Transport Services.
- (6) That anomalies within the existing HACC process regarding data be corrected, criteria be clarified and that transparent information processes be instigated for aged people considering transitioning to aged accommodation.

- (7) As a precursor to change;
- Potential structures for operation of community services be researched, take into account real savings and costs per industry, in consultation with the whole industry.
 - The strengths of smaller NGO's be taken into account.
- (8) Steps to be taken to ensure accountability of government for transport is not diminished due to changes in Federal/State changes in responsibility.
- (9) Technological advances be researched to establish their value, and, if appropriate, models of implementation be developed.
- (10) Consideration be given to using the NSW Community Transport Program as a model at a national level.

Continuum of Needs

The fact that an increasingly older age brings about greater transport need is well documented. Transport is a key element in any strategy addressing the needs of elderly people.

Aged people require access to shopping facilities for food, access to shopping facilities for an item to keep the food fresh, transport to the doctor and specialist when they are unwell, transport to buy clothes, transport to workshops and activities, transport to social events and gatherings. As we all do.

While there is no doubt that increasing mobility issues associated with aging mean that more transport is required, and some of it specialised, there is equally no doubt that aged people can and do use 'ordinary' transport as they are able – transport that all the population uses.

Transport supply is a key ingredient of everyday life at all ages. LCTG believes a variety of accessible and affordable transport benefits the entire population. Transport for aged people cannot be considered in isolation from all forms of transport.

Transport Options in Inner Sydney - Accessible and Affordable?

Public Transport

Accessible **Rail Transport** within LCTG operational area is non-existent, despite encompassing an area with some of the oldest rail stations in the land, and despite having some of the highest population densities. None of the nine stations have access other than by a lengthy set of stairs.

Bus Transport is in apparent plentiful supply, but closer inspection reveals a deficit of services and design pertinent to the needs of an aging population.

The supply and frequency of (wheelchair) accessible buses is improving, but the reality is that accessible buses are only available for limited times of the day and/or available every 3rd or 4th bus. In any case it's questionable as to whether design for wheelchair accessibility amounts to accessibility for people with mobility issues. 26% of LCTG users state they are unable to get on/off a bus⁽¹⁾.

Sydney Buses are seemingly fixated on routes and timetables designed for journeys to/from work, despite a clear picture – their own picture – that the majority of existing bus use within Leichhardt and Marrickville LGA's is *not* for work travel⁽²⁾. This predilection has resulted in a boost to services designed to meet the needs of working people at the expense of a diminution of routes and services that concentrate on local coverage to local facilities - services more likely to be used by aged people.

Ironically, the people with the least number of transport options are offered the least coverage.

Taxi Transport in Sydney is the subject of considerable criticism from people with disabilities, particularly of late. It is unattractive to a large number of Community Transport users across the Sydney's Inner West, with 33% stating they never use taxis⁽¹⁾.

Cost is a major factor, with fares for even short distances beyond financial reach. 37% of LCTG users state that they do not use Taxis because of the cost⁽¹⁾.

A growing phenomenon of recent years, the drivers and/or owners of taxi companies appear to have decided that short trips are not in their interest. LCTG, in common with our surrounding peers, receive frequent comment from our clients that they were 'stuck' at a location, refused service by taxi companies. Occasionally we receive desperate calls asking for assistance, the client refused service by a taxi company, and having no other option to get home.

Planning and Integration of Transport

There is no formal framework for planning, interaction or integration of Community Transport within the context of the wider NSW public or private transport networks. That is despite the State Government's own Parry (2003) and Unsworth Reports calling for a structure enabling that to happen⁽³⁾.

To the best of our knowledge, the same situation exists throughout Australia.

While not a criticism of the process per se, the planning and allocation of HACC NSW Community Transport funding at bureaucratic level is carried out in isolation from overall mainstream transport planning.

While data concerning numbers and purposes of transport users is available, LCTG is not aware of regular and broad data collection that relates to the needs of the ageing population or unmet demand – or an index of satisfaction.

NSW Health and Community Transport – A Special Case

Transport to health facilities is a major generator of Community Transport demand throughout NSW, and close to 40% of LCTG trips are in response to this demand⁽⁴⁾.

The ad hoc nature of most bookings to health facilities mean that Community Transport usually responds with services for individuals – a one to one service - and that form of transport is relatively expensive to provide. LCTG responds with its Flexible and Individual Transport services, respectively the first and second most expensive services it operates. On a per passenger basis it is 3 to 5 times more costly than transport of groups.

NSW Health does fund some Community Transport providers, but at a level considered by most to be tokenistic. At a local level, Health has refused to consider the employment of even one person to coordinate bookings to the major Royal Prince Alfred (RPA) Hospital in nearby Camperdown, a resource potentially available to numerous Community Transport projects that transport clients there. LCTG has been able to demonstrate that it could double the number of clients it takes to that facility if such coordination were available. That improvement is possible with LCTG using existing resources, without Health providing funding to any Community Transport project, and the only cost to Health being the employment of one worker.

Worse, NSW Health has shifted transport cost to LCTG. In 2008, without consultation and without notice, it removed transport resources it provided to clients using therapy sessions at QEII hospital (part of the RPA complex). Demand to that hospital soared. Of the trips we were able to supply, using measurement of the number of trips across the same 5 month period for 2007 and 2008, revealed a 367% increase in the number of trips LCTG provided. According to clients that spoke to LCTG about the process, they were informed by Health workers that Community Transport would 'fix up' their transport.

Across the State the situation is reflected in the 2007 “No Transport No Treatment”⁽⁵⁾ report, instigated by the NSW Cancer Council. The report indicated 90,000 were unmet trips per year, and made numerous recommendations, including the more than trebling of non emergency health related transport funding.

To the best of our knowledge few of the recommendations have been implemented, and none to any effect.

Some Reflections on HACC

Aged people outside of Institutions

As a HACC funded organisation, LCTG is primarily concerned with keeping aged people independent, in their own homes. HACC funding dictates that we do not provide services to accommodation institutions.

Comment on transport provision within Nursing Homes, etc, is beyond our scope.

However we note that numerous ex clients, who, having moved to aged care accommodation, express their dismay that they were not aware of the lack of transport provision at those facilities, nor the loss of Community Transport and other services they previously enjoyed under the HACC program.

Reporting on HACC

Reporting ‘outputs’ via the Minimum Data Set (MDS) is a mandatory obligation of HACC funding, and Community Transport reports in terms of the number of trips per client per period.

Passenger Trips is a universally accepted standard of measurement for transport, and a valuable tool.

However counting trips alone;

- ***Tells only one side of the story.***

LCTG provides various services, responding to the various client needs. In the same time it takes one driver to conduct a return trip for one client to a specialist appointment in western Sydney, LCTG uses one driver to supply return transport for 20 clients to a local shopping centre.

The raw data tells nothing about the quality, planning or resources that went into any trip.

- ***Is not measured across transport suppliers***

HACC funded projects supplying transport to shopping outlets are not funded under Community Transport, and their data is required to be supplied in hours of service, while Community Transport supplying exactly the same service in another location reports in Trips.

This anomaly clearly makes comparison of data impossible, and is an impediment to planning.

Special Needs Groups

HACC specifies criteria for targeting sectors of the community that may suffer greater disadvantage.

In terms of transport, cost is a major factor for people on lower incomes, and the inclusion of “financial disadvantage” is welcome within HACC Special Needs Groups categories.

When LCTG asked NSW Ageing Disability and Home Care (ADHC) to define the criteria, it could not definitively do so. LCTG is not proposing means based testing of eligibility. However it, and presumably all other HACC funded projects, need a guide as to the criteria to be used for assessing whether clients fall into a Special Needs Group.

Towards the Future

Keeping the Community in Community Services or Bigger is Better?

LCTG is a proudly independent organisation, managed by the local community for the local community. It has knowledge of local needs, is committed to responding to those needs. Management and clients alike have a sense belonging, of inclusion, of the right to have input, and 'custodianship' of an important resource.

Conjecture is rife that changes to State/Federal responsibilities, as recently announced, inherently imply that 'bigger is better', that government at all levels will embrace the opportunity to drastically reduce the number of smaller, community based organisations.

LCTG would question such an approach.

At least in terms of Community Transport, a larger operation has some negative effects in terms of efficiency, and the larger the project the greater the inefficiency.

Inherently direct transport suppliers must have a base, a garaging area, and all vehicle movements depart from and return to that base. Clearly the further away the base is from the point of operation, the greater the fuel bill and impact on the environment. The further away, the greater the time it takes the driver to reach the start point, the greater the amount of 'dead running' and inefficient use of worker hours. LCTG's own data demonstrates that the amount of subsidy going to a passenger whose destination is 'out of area' is close to 5 times the subsidy going to a passenger using a local shuttle service.

Realistically timetabled services must be achieved. No passenger of any age is going to be willing to regularly travel many kilometres, sit in a vehicle for hours, have a few minutes at a destination, & then return via the same arduous process. So a shopping service in an LGA larger than Leichhardt is not realistic proposition.

Vehicles take up a certain amount of space that, in terms of project accommodation, does not shrink because the project owning it is larger. The larger the space required, the larger the accommodation needed, the larger the rent. A project double the size does not magically mean a driver can drive 2 vehicles at once.

And so it goes.

Apart from the clear loss of benefits from providing service at a local level, LCTG questions whether there is real and substantiated evidence that bigger is necessarily better, or whether it is simply supposition.

Towards Solutions

Structures

In times of such dramatic change in areas of funding responsibility, of critical significance is the structure that enables not only change but improvement.

In the same manner that requests for funding are met by calls for 'evidence based' data, LCTG calls on for research to clearly and transparently identify the structure options for community services in this new environment. LCTG proposes a consultative process be established to work with all current providers.

State and Federal Interface

Community Transport is well aware that 'disability' is a relative term. Disability does not necessarily appear at a certain age, nor is confined to one medical condition. Over time, the vast majority of HACC clients exhibit some ailment that affects their mobility and ability to use different forms of transport.

The recent 'HACC split' remains undefined in terms of its effect on HACC providers. It is clear that State responsibilities remain the same in terms of major passenger transport infrastructure and service provision. Inherently, that raises questions in terms of responsibility and accountability.

LCTG has faced situations where both NSW Health and Sydney Buses have, without notice and without compensating resources, reduced their services and made the claim that Community Transport is responsible for providing a replacement service. Frankly, LCTG is concerned that the State Government might take the future opportunity to claim services for aged people is a Federal responsibility.

Technological Opportunities and Implementation

There is some evidence that sophisticated computerised scheduling of Community Transport services could, relevant to some types of supply, improve provision across project 'borders'. That approach should be investigated on two levels; firstly for validity, and, presuming benefits can be demonstrated, secondly research conducted on a structure that enables that provision.

Potentially there are a number of different approaches, including agreements or contracts, consortium, the formation of 'specialty' providers, etc.

Back to the Future – a Model for Community Transport

LCTG, in common with a number of other projects, was initiated with funding from the NSW Community Transport Program (CTP).

Unlike HACC, which has additional criteria, CTP is a response to social exclusion caused by lack of access to transport, regardless of other factors. The program is centred on "Transport Disadvantage". NSW Transport states "Transport disadvantage is defined as a circumstance or set of circumstances that leaves those that are affected by it in a situation where they have limited or no access to private transport and they have difficulty in gaining access to conventional transport systems."

LCTG believes this model has significant advantages in that it calls for equitable transport resources across the population and with clarity places the focus equally among mainstream transport 'players'.

LCTG suggests it is a model that could be used nationally.

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- (1) Greater Inner West Community Transport Strategic Plan, 2009. Section 4, Passenger Survey Results
- (2) 2007 five-year pooled Household Travel Survey (HTS) dataset, Reason for Travel (Trips). Leichhardt and Marrickville LGA data.
NSW Transport, Bureau of Transport Statistics
<http://www.transport.nsw.gov.au/tdc/statistics-ssd-sydney-inner.html>
(Shopping, Personal business, Social/recreation, Other amounting to 54% of all reasons for travel)
- (3) Ministerial Inquiry into Sustainable Transport in New South Wales - Final Report Overview and Recommendations.
<http://www.transport.nsw.gov.au/inquiries/parry-final-report.html>
- (4) Greater Inner West Community Transport Strategic Plan, 2009. Section 2, Demographic Profile
- (5) "No Transport No Treatment", NSW Cancer Council, NCOSS & the CTO
http://www.cancercouncil.com.au/html/policyaction/reports/downloads/ComTransport_Report.pdf