



WYANGA
wyanga, the core of Aboriginal peoples spirit.

21st September 2010

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

Dear Mr Raine.

I am hoping that you will accept my late application to the Public Inquiry in relation to Aboriginal Aged Care in the Sydney Metropolitan area.

I am the CEO of Wyanga Aboriginal Aged Care Program based in Redfern, Sydney NSW. We care for our elders in their own home in Redfern, Waterloo, Marrickville, Glebe, Surry Hills and Laperouse. Many of our clients live in high rise social housing and they can become quiet isolated within the inner city area. Our services are primarily provided to Aboriginal elders in the inner city but we do go outside of this area if the need is there, for example Laperouse.

Many of our Elders want to come on our program as we are the only Aboriginal controlled Aged Care service, providing culturally appropriate care for them. We have a close association with the 3 Aboriginal Medical Services in the Sydney region and our program is well known to AMS clients.

We have 50 CACP clients, 22 HACC clients and 15 on our waiting list. We know of many Aboriginal elders in the home being cared for by family members, who will not put their elders in mainstream residential facilities because they do not want the isolation to continue in residential care and they do not trust the service to recognise their special cultural needs as Aboriginal elders. This is tragic and can be traumatic for both the elder and their families, particularly when their needs become so high, that carers are having trouble providing 24 hour care daily.

I have been working for 3 years to obtain support and funding to build our own purpose built aged care residential facility in the Sydney area to service Aboriginal families of the Sydney basin. I have identified land and I am negotiating to have an Aboriginal Aged Care Facility built on this land, at Callan Park, Rozelle. Leichhardt Council is currently developing a Master Plan for the site and our proposed facility should be included in the plan.

The inquiry should recognise the urgent need for our own Aboriginal Aged Care Facility as mainstream providers are simply not meeting our needs. As there is more demand for places by other Australians, Aboriginals elders keep missing out. This is doing nothing for closing the gap. Wyanga can address this issue if we are given serious consideration, proper resources and funding.

Yours sincerely

Millie Ingram CEO



ABOUT WYANGA

The Wyanga Aged Care Program was established in 1996 and gained its autonomy and incorporation as a community controlled organisation in December 1999. The Wyanga Aged Care Program is funded by the Commonwealth Department of Health & Aging, to provide aged care services to local Aboriginal Frail-Aged Elders, living in their own homes.

Wyanga's vision is that:

All Aboriginal Elders living in the Sydney inner city area will have continued, culturally appropriate, quality care within their own home and in the community.

Wyanga is able to provide a range of services, individually tailored to meet the specific needs of a client. Once a client has been assessed and is proven to meet the set criteria to receive Wyanga's support, a support package will then be individually tailored for each client, depending on the services and assistance needed.

Wyanga are able to provide a number of services to clients, such as providing carers, home help for older people, assistance with transport, etc. as well as offering various programs of activities to clients such as Art classes, jewellery making, outings etc.

If you would like any further information on Wyanga or the services we provide, please contact us on details below.

WYANGA CONTACT DETAILS:

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WYANGA ABORIGINAL AGED CARE PROGRAM INC.

Client Matters

We have 50 clients at the writing of this report. We have established what we call "through care" so that we always have the CACP's and Home Visiting places filled.

Stage (1) Waiting list	When potential clients ask to come on Wyanga's program, they are to fill out an "expression of interest" form for our files. They will remain on the waiting list until they can move on to the Home Visiting Program
Stage (2) Home Visiting	The Home Visiting (HV) number is capped at 22 and this is nearly always filled. If a vacancy occurs, a client will be taken from the waiting list on to the HV program. Wyanga staff make arrangements for specific clients on the HV Program to have an ACAT assessment so they can go directly on to a CACP when a vacancy occurs. HV clients are visited on a regular basis.
Stage (3) CACPs	CACP packages are capped at 50. Wyanga has to ensure that the 50 client places are kept filled. This is how our income flow is calculated from Department of Health and Ageing (DoHA). When a CACP vacancy occurs we immediately bring across a client from HV who has already been approved by ACAT to the CACP vacancy. This keeps our client number stable at 50.
Stage (4) KinCare	At times some of our clients need to move on to a higher level of care than we can provide. Wyanga has therefore entered into a Memorandum of Understand with Kincare to provide this higher level of care under their EACH program, meaning extra care in the home. Wyanga will keep our carer with them for a few months during the transition from Wyanga to Kincare, so they keep their connection with Wyanga.
Stage (5) Cluster Group in a Nursing Home	I have been putting out feelers for a Nursing Home/s to provide Wyanga with a ward or room for numbers of 4 to 6 so we can have our clients go in to a residential facility with some of their peers. I have spoken to Mission Australian who will be receiving funding to restore their Elizabeth Street, (Redfern) property into a Nursing Home. I requested a meeting with their management to put our proposal to them of a cluster group for our clients.
Stage (6) Nursing Home	<u>Feasibility study needed.</u> I am still seeking land on Callan Park to build our own Aboriginal "through care" residential facility. This still has a long way to go, and if we are ever successful in securing this land, we then have to secure funding for capital and operational costs. Securing this facility may take years and that is why I am seeking out nursing homes for cluster groups

I have been negotiating with a company called "the ideal consultancy" to do the feasibility study for our proposed Aged Care Facility. I have to try and secure funding from somewhere to fund the first stage of the study. We need to have the capital cost to build and the operational cost for the facility. We then have to know about funding sources and funding rounds. I want to engage the consultancy to do this so we can have a document to put to government/s.

Millie Ingram 23/09/10