

AUSTRALIAN BLINDNESS FORUM

**All correspondence to: C/o Royal Society for the Blind
Adelaide**

ABN 47 125 036 857

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Response to the Caring for Older Australians Report

About the Australian Blindness Forum

The Australian Blindness Forum (ABF) was formed in 1992 and was registered as an Australian public company limited by guarantee in 2007. It is funded through the contributions of its members, which are the major Australian blindness organisations providing services to people with blindness or vision impairment and the consumer organisations, Blind Citizens Australia and Blind Citizens WA.

Members of the ABF are committed to assisting people who are blind or vision impaired to become and remain independent, valued and active members of the community.

Services provided by members include - adaptive technology, accommodation support, Braille training and support, computer training, community support programs, counselling, education and training, employment services, equipment, guide dogs, independent living training, information in alternative formats to print, library services, orientation and mobility, recreation services, support for low vision, systemic advocacy and design advice, and transport.

Further information on the ABF may be found via the website at <http://www.australianblindnessforum.org.au>.

Caring for Older Australians Draft Report

The ABF commends the Productivity Commission on its intention to reform the aged care system. However, the ABF has concerns about the Draft Report's failing to address the needs of people who are blind or vision impaired.

In Australia, the majority of people acquire severe vision loss over the age of 65, age related vision loss is not a "natural" part of the ageing process. Highly specialized services are provided to people, free of charge, to improve their wellbeing, independence and ability to continue to participate in the community. These include "therapy" services such as counseling, occupational therapy and orientation and mobility instruction.

The ABF believes that the Draft Report fails to address basic human rights principles that include:

- Independence,
- Participation, and
- Quality of life

Rather it has focused on funding and the provision of supported and residential accommodation.

In doing so, it fails to acknowledge the abilities and aspirations of people over the age of 65 years remain valued and contributing members of the community. This exclusion is exacerbated further by the Productivity Commission's Draft Report on Disability Support. The ABF believes that people with disabilities irrespective of the age of onset of the disability should have a right to receive specialist services to enable them to achieve the quality of life to which they aspire.

Further the Draft Report states that the costs of "therapy" services should be borne by the individual unless they do not have the means to pay. The result of this is that people acquiring a severe vision loss over 65 years of age will be discriminated against compared with those acquiring their vision loss under 65 years of age and who will be covered by the proposed National Disability Support Scheme which is an entitlement based scheme.

If this is, in fact the result of the Draft Report's recommendations, this will potentially contravene the United Nation's Convention on the Rights of Persons with Disabilities ratified by Australia two years ago. The two Draft Reports are creating two classes of people with vision loss – those acquiring their vision loss under 65 years of age and as a result have the right to access and receive services of their choice and those acquiring their vision loss over 65 years of age who will have to make at least a co-payment, if not bear the full cost of these services.

The ABF believes that the different treatment of people with severe vision loss who acquire their vision loss after 65 years to those acquiring their vision loss under 65 years of age, contravenes the Age Discrimination Act 2004. The Act which "helps to ensure that people are not treated less favourably on the ground of age in various areas of public life including...the administration of Commonwealth laws and programs".

The ABF is also very concerned that the Draft Report provides for no continuum between the Productivity Commission's parallel Draft Report on Disability, which is recommending an entitlement system for those acquiring a disability under the age of 65 years. For a person who is blind or vision impaired to reach their full potential they require an entitlement to specialist services and equipment, irrespective of artificial barriers created by Government.

Assessment:

The ABF is also very concerned that a single assessment will not address the needs of people who are blind or vision impaired.

The current assessment criteria for the Aged Care Assessment Program (ACAP) system, for example, are a very poor screening tool for vision loss. It does not take into account functional vision loss, its subsequent implications and specialist nature of the support required. To date, in the Disability sector, in spite of numerous attempts there has been no single assessment tool which has been robust enough to adequately assess the needs of people who are blind or vision impaired. Rather they have been focused on the needs of people with an intellectual disability.

Additionally, the Draft Report raises the possibility of people completing self assessments or their GP assessing their needs. The experience of the ABF members is that people with vision loss:

- need assistance to complete forms; and
- are poor at articulating their functional difficulties (or may be unaware of the functional impact of their vision loss)

It is also our experience that GP's are very good at identifying medical issues, but very poor at identifying or even being aware of the implications for independent living. The assessment system therefore needs to allow easy access to specialized service providers for assessment, service planning and delivery. It is the ABF's belief that the current Draft Report does not include consideration of these issues.

Additionally, services for people with severe vision loss or legal blindness are usually episodic, typically occurring at times of transition in people's lives or when the person's vision deteriorates further. This episodic approach contrasts with other disabilities such as brain injury or intellectual disability which is usually delivered on a holistic basis.

Assessment processes need to be able to understand the functional impact of vision loss and the unique and specialist responses available.

Information:

The ABF supports the Commission's recommendation to establish Information Centers, and include regional and remote areas.

Informed choice is a very important principle being established.

However, to allow people who are blind or vision impaired to make informed decisions, it is:

- critical that all information resources are available in alternate formats – Braille, audio (MP3, alpha numeric sequence), large print and e-text;
- important that assumptions are not made that all people can access on-line material;
- people with vision loss will frequently need assistance to complete application forms;
- People who need information in languages other than English will also need access to material in alternate formats.

People who are blind or vision impaired require specialized equipment and software to:

- Access the internet and websites. Accordingly, all government and community websites need to be accessible and comply with the highest levels of accessibility standards. Specialist software and equipment similarly need to be available to source this information.

Equipment:

The availability and use of special equipment enables people with vision loss to optimise their ability to continue with daily living tasks, and social and community tasks and continue to enjoy a high quality of life without the need for personal support.

Many current equipment programs for people with disabilities exclude people with vision loss, leaving it to organizations such as ABF members to assist or the person's own resources.

Elderly people with vision loss need access to this equipment to allow them to stay successfully in their own homes and age in place.

Examples:

- A Braille for a person who is blind is equal to a pen for a sighted person.
- An electronic magnification system is the same as a pair of spectacles or hearing aid.
- Screen reading software is essential for a person who is blind or vision impaired to access the computer or the internet.

Other specialist considerations include, for instance, lighting which is also a very important need for people with vision loss and is an important ingredient in vision

enhancement, assisting reading and writing as well as preventing falls. No assistance is currently available for people who need to modify the lighting in their homes.

This also leads to the question which will be noted again below as to what the Commission believes will be included both with regard to equipment and services and what criteria will be developed to make this decision.

Improving Choice of Age Friendly Housing

The ABF commends the Commission on its recognition of the importance of universal design and accessible residential facilities.

However, the Report only considers access for people with 'physical' mobility issues and/or those who use wheelchairs.

The needs of people with vision loss require consideration as well including consistent lighting, luminance contrast and large clear signage. All of these are detailed in Australian Standards.

Example:

A residential care facility that provides an accessible environment with colour (luminance) contrasting interior design, logical paths of travel and accessible equipment would promote independence and participation in a person who is blind or vision impaired. This will reduce staff requirements and increase wellbeing.

The above needs to be supported by a workforce aware of the functional impacts of vision loss and how to tailor their services and ensure the inclusion of their clients who are blind or vision impaired.

Funding

Funding for early intervention should be acknowledged as a priority.

Early intervention is the process for the identification, assessment and provision of timely services to prevent dependence, social isolation and an early reliance on the residential aged care system.

It is known that “[Vision] impairment shortens life, increases the risk of other conditions, restricts social participation / independence across all domains of activity and impairs physical and mental health”¹.

Therefore early rehabilitation interventions will reduce both the human and financial costs of care in the future. The above mentioned rehabilitation services from ABF members are primarily funded through community support. Accordingly, consideration is required as to whether “Government” will meet this shortfall or will be selective about what they fund in the future. If an entitlement system is not created then what will be the criteria for inclusion or exclusion of a requested service or individual?

People acquiring their vision loss irrespective of the age of onset have always and we believe given the linkage with the primary medical sector as part of a continuum will continue to access specialized Rehabilitation Services directly rather than through the Aged Care System. The model proposed in the Draft Report may achieve this through the proposed system of block grants, although our reading of the report tends to suggest that block funding is a last resort when in fact in the case of specialist services it may be the only practical way of achieving a specialist responsive outcome. Of course, the next issue is then the quantum of funding, deciding priorities and how it will be applied.

Similarly, how does the Commission believe in future new technologies and service delivery systems will be researched and trialed?

There is also a need whilst acknowledging that Government does not have a role in ensuring the viability of a service provider, how will specialist skills be retained within the workforce? Many specialist skills are delivered by cadetships or on the job training for instance, Orientation and Mobility Instructors, skills that cannot be obtained in an aged or pan disability setting.

Community Based Services

Another disappointing feature of the Draft Report is the lack of detail provided on Community Based Services even though the Draft Report acknowledges that most people will want to remain in their own homes. The focus instead appears to be on the services provided in the residential care system.

The Draft Report appears to make an assumption that all people over 65 years of age are frail when in fact most people in this age group are fit active participants in their communities, indeed many are still in employment. This also applies to people who are blind or vision impaired who currently receive and have the right

¹ Clear Insight, Access Economics accessed at http://www.cera.org.au/uploads/CERA_clearinsight.pdf

to access specialized services of their choice in the same way as those under 65 do.

Typically, ABF members provide high quality services to people in their own homes free of charge. These services focus on independence, participation in the community and wellbeing and are most effective when incorporating early intervention strategies. These services are provided by a workforce that is expert in the needs of people who are blind or vision impaired.

Conclusion

As the intent of the Draft Report does not address many of the above issues and has excluded any consideration of the recommendations of the Productivity Commission Report into Disability Support and its potential impact on people acquiring vision loss over the age of 65 years. The ABF respectfully submits that substantially more work needs to be undertaken to specifically address these issues and ensure that people who are blind or vision impaired are able to enjoy their full rights of citizenship.

The ABF as the peak body representing organizations of and for the Blind is naturally available to assist you with regard to this process.

If you require any further information regarding the above, please do not hesitate to contact the undersigned.

Yours Faithfully

Andrew Daly
Chairperson