

Aged Care Legislated Review

Vision 2020 Australia submission to
the Department of Health

December 2016

Contents

General comments	3
1 Summary of recommendations	4
2 Response to Criteria in the Legislation	5
2.1 Whether unmet demand for residential and home care places has been reduced	5
2.2 Whether the number and mix of places for residential care and home care should continue to be controlled	6
2.3 Whether further steps could be taken to change key aged care services from a supply driven model to a consumer demand driven model	8
2.4 The effectiveness of means testing arrangements for aged care services, including an assessment of the alignment of charges across residential care and home care services	9
2.5 The effectiveness of arrangements for regulating prices for aged care accommodation	10
2.6 The effectiveness of arrangements for protecting equity of access to aged care services for different population groups	10
2.7 The effectiveness of workforce strategies in aged care services, including strategies for the education, recruitment, retention and funding of aged care workers	11
2.8 The effectiveness of arrangements for protecting refundable deposits and accommodation bonds	12
2.9 The effectiveness of arrangements for facilitating access to aged care services	12
3 Conclusion	14

General comments

Vision 2020 Australia welcomes the opportunity to provide comment to the Department of Health on the Aged Care Legislated Review. It is estimated that there are over 453,000 people living with blindness or vision impairment across Australia and the majority of these are aged over 65 years.¹ In 2010, Access Economics projected that the number of people who are vision impaired aged 40 or over will rise to almost 801,000 by 2020 and those who are blind will rise to 102,750.² This rise reflects the ageing population and the fact that the prevalence of vision impairment and blindness doubles with each decade over 60 years.³

Alongside the ageing population, recent reforms to disability and aged care mean that there will be a greater number of older Australians who are blind or vision impaired who will be relying on the aged care system to receive necessary supports and services to maintain their independence and live the life they choose. It is therefore critical that the Living Longer Living Better (LLLLB) Legislation is effective for people who are blind or vision impaired, given the majority of this population group are aged over 65 years and will therefore be ineligible for support through the National Disability Insurance Scheme (NDIS).

Vision 2020 Australia broadly supports the submissions put forward by our member organisations, including Blind Citizens Australia, Vision Australia and sector partner Guide Dogs Australia, all of whom provide services and supports to people who are blind or vision impaired, a majority of whom are over 65 years. The eye health and vision care sector is concerned that there is not adequate recognition and understanding of disability, including blindness and vision impairment, within the aged care sector. In the following submission, Vision 2020 Australia asserts a number of recommendations to the Department of Health on how the aged care system can be better administered and formulated to meet the specialist needs of people who are blind or vision impaired.

Vision 2020 Australia

Established in October 2000, Vision 2020 Australia is part of *VISION 2020: The Right to Sight*, a global initiative of the World Health Organisation and the International Agency for the Prevention of Blindness. Vision 2020 Australia is the national peak body for the eye health and vision care sector, representing over 50 member organisations involved in: local and global eye care; health promotion; low vision support; vision rehabilitation; eye research; professional assistance and community support.

This submission has been developed in collaboration with the Vision 2020 Australia Independence and Participation Committee (the Committee). The Committee brings together a diverse group of members providing services and supports to people who are blind or vision impaired across Australia; enabling an unique platform for stakeholders to collaborate, foster consensus and develop a shared understanding on matters of significance affecting member organisations and consumers. Through drawing on the knowledge, experience, and resources of the Committee's broad and inclusive membership, the Committee is central to supporting one of Vision 2020 Australia's key roles as an effective conduit to government, offering a unified and consistent voice.

¹ Foreman, J., et al, 2016, The National Eye Health Survey Report 2016, The Centre for Eye Research Australia and Vision 2020 Australia, Melbourne

² Vision 2020 Australia by Access Economics Pty Limited, Clear Focus: The Economic Impact of Vision Loss in Australia in 2009, June 2010.

³ Foreman, J., et al, 2016, The National Eye Health Survey Report 2016, The Centre for Eye Research Australia and Vision 2020 Australia, Melbourne

1 Summary of recommendations

Vision 2020 Australia recommends that the Australian Government ensures:

Recommendation 1: the aged care system is adequately funded and administered to address the current unmet demand and meet the needs of people who are blind or vision impaired.

Recommendation 2: that people with disability, including people who are blind or vision impaired, are prioritised in the allocation of places within the aged care system, in particular where comorbid conditions exist and where it is evident that early intervention will lead to improved outcomes.

Recommendation 3: that expert advice is sought from specialist groups on best practices and guidelines on producing a range of alternative formats to ensure accessibility within the aged care system for all consumers.

Recommendation 4: that aged care providers and My Aged Care (MAC) assessors are appropriately resourced, trained and informed to identify and respond to the needs of people who are blind or vision impaired.

Recommendation 5: that organisations and representative bodies in the disability sector, including those with expertise in the eye health and vision care sector, are involved in the development of an information sharing system, to ensure expert knowledge on accessibility needs is available and utilised.

Recommendation 6: that means testing arrangements for aged care services does not create a barrier for people who are blind or vision impaired in accessing the most appropriate supports and services they need to remain independent and engaged in their community.

Recommendation 7: that Clause 1 of Schedule 1, section 11-3 (definition of people with special needs) of the Aged Care LLLB Act 2013 be amended to include disability, including people who are blind or vision impaired, as a special needs group.

Recommendation 8: investment in and development of a macro-level industry development strategy, to enhance and support a sustainable quality workforce in the blindness and vision impairment services sector, is supported.

Recommendation 9: that a specific trigger mechanism is implemented to identify applicants who are blind or vision impaired to ensure effective passage through the My Aged Care Gateway.

Recommendation 10: ensures that people who are blind or vision impaired have access to a holistic specialist assessment at the time of determining an individual's eligibility to My Aged Care and throughout supporting planning.

Contact

Haylea Fitzsimmons
Policy and Advocacy Officer
Vision 2020 Australia
Hfitzsimmons@vision2020australia.org.au
Ph. 03 9656 2020

2 Response to Criteria in the Legislation

2.1 Whether unmet demand for residential and home care places has been reduced

In 2010, Access Economics projected that the number of people who are blind or vision impaired will rise to over 900,000 by 2020.⁴ In 2016, the National Eye Health Survey found that the prevalence of blindness and vision impairment doubles with each decade over 60 years.⁵

In Australia there are more than 40 blindness, vision impairment and rehabilitation service providers who predominately deliver services to clients aged 65 years or older. The 2015 Snapshot of Blindness and Low Vision Services in Australia (the Snapshot Survey) conducted by Vision 2020 Australia, the National Disability Services (NDS) and the Australian Blindness Forum (ABF) found that 60 per cent of blindness and vision impaired clients are aged 65 years or older.⁶ Further, figures from the Australian Bureau of Statistics 2012 Survey of Disability, Ageing and Carers (SDAC) indicate that prevalence of disability increases with age, as does a person's need for assistance. The findings uncovered higher rates of unmet need amongst those with sensory and speech disabilities at 50.2 per cent.⁷ This focus on the 65 years and over age group for the blindness and vision impairment services sector reflects the need for the aged care sector to be appropriately formulated to meet the needs of this growing population.

It is estimated that on average, supporting people who are blind or vision impaired over the age of 65 requires less intense and less frequent interventions than their younger counterparts. This means that, with relatively little intervention, older Australians can remain engaged in their communities, living in their own homes and out of expensive residential care for longer. Yet, while a majority of clients are aged 65 years and older, only a fraction of funding for blindness and vision impairment services is derived from Government funded aged care streams. According to the Snapshot Survey, funding for the blindness and vision impairment services sector generated from all government sources amounts to just 30 per cent of all funding or \$56 million. Government funding streams for the sector are spread across disability, aged care, health and education.

The greatest proportion of funding for the blindness and vision impairment services sector is generated by fundraising and bequests at 43 per cent (nearly \$81 million). A further 18 per cent is derived from sales (\$34.4 million) and nine per cent (\$17.1 million) from investments, grants and other sources.⁸ Vision 2020 Australia member organisations working in the blindness and vision impairment services sector who are registered providers of aged care are only partly funded through the aged care sector. Many of our member organisations provide services which are not funded from aged care to people aged 65 years and older living with blindness and vision impairment. These include low vision clinics, information and library services, alternative

⁴ Vision 2020 Australia by Access Economics Pty Limited, Clear Focus: The Economic Impact of Vision Loss in Australia in 2009, June 2010.

⁵ Foreman, J., et al, 2016, The National Eye Health Survey Report 2016, The Centre for Eye Research Australia and Vision 2020 Australia, Melbourne

⁶ B. Ah Tong, G. Duff, G. Mullen and M. O'Neill, August 2015, A Snapshot of Blindness and Low Vision Services in Australia, Vision 2020 Australia, National Disability Services, Australian Blindness Forum, Sydney.

⁷ Australian Bureau Disability, Ageing and Carers, Australia: Summary of Findings, 2012 of Statistics, available at <http://www.abs.gov.au/ausstats/abs@.nsf/mf/4430.0>

⁸ B. Ah Tong, G. Duff, G. Mullen and M. O'Neill, August 2015, A Snapshot of Blindness and Low Vision Services in Australia, Vision 2020 Australia, National Disability Services, Australian Blindness Forum, Sydney.

formats, assistive technology training and advocacy services. Specialist blindness and vision impairment services provided by Vision 2020 Australia member organisations are only made possible through philanthropic funding, a cost that has not been borne by Government or aged care providers.

Vision 2020 Australia member organisations report that unmet demand for blindness and vision impairment services is increasing. According to the results of the Snapshot Survey, more than one-quarter (27 per cent) of organisations reported that they have had to refuse services to clients. Organisations that reported they had not been able to meet demand quoted the main impediments as a lack of financial resources to hire staff or being unable to pay staff to work longer hours. Furthermore, with no current mechanism in place for residential aged care providers and other generalist aged care organisations to refer or pay for specialist blindness and vision impairment services, Vision 2020 Australia believes that unmet demand for specialist services within nursing homes and residential care is somewhat hidden.

The lack of Government recognition and investment to address blindness and vision impairment as an issue predominately affecting older Australians is of significant concern to the sector. Given the link between ageing and the increased incidence of blindness and vision loss, ensuring access to funded specialist blindness and vision impairment services for older Australians is a crucial aspect of improving the aged care system and ensuring that consumers have equal access to the right services and supports. Vision 2020 Australia calls on the Australian Government to ensure that the aged care system is adequately funded and administered to address the current unmet demand and meet the needs of people who are blind or vision impaired.

Recommendation 1

That the Australian Government ensures the aged care system is adequately funded and administered to address the current unmet demand and meet the needs of people who are blind or vision impaired.

2.2 Whether the number and mix of places for residential care and home care should continue to be controlled

Vision 2020 Australia in principle supports a national approach for making packages available based on the relative needs and circumstances of individual consumers, rather than controlling the availability of packages at the regional level. The eye health and vision care sector favours a model of aged care that promotes individual choice. Vision 2020 Australia is pleased that a national approach to aged care will provide an opportunity to address unmet need through reducing waiting periods and improving access to aged care services across Australia.

Vision 2020 Australia appreciates the need for the Australian Government to cap the total number of packages in line with the current aged care-planning ratio. It is estimated that there are 72 000 places for home care packages and this will increase to around 100,000 places nationally by 2017-18/9. However, Vision 2020 Australia is concerned that this number of available packages is only responding to the 'frail' aged and does not take into account older Australian's with disability who will be ineligible for support through the NDIS and therefore seeking support through the aged care sector.

⁹ Department of Health, Home Care Packages - Reform, Commonwealth of Australia, Canberra, <https://www.dss.gov.au/our-responsibilities/ageing-and-aged-care/aged-care-reform/home-care/home-care-packages-reform>

The eye health and vision care sector supports increases in supply of aged care services through expansion in the number of places available and greater transparency in planning ratios, prioritisation and allocation rationale and levels of subsidies. However, Vision 2020 Australia considers it absolutely critical that the continued control of places should prioritise the needs of older Australian's with disability. The data is clear that the prevalence of disability increase with age and that people aged 65 years and over are the foremost recipients of services in the eye health and vision care sector. In comparison to the general population, people who are blind or vision impaired suffer twice as many falls, have three times the risk of depression, are admitted to residential care three years earlier and often lose confidence to independently manage everyday life.¹⁰ These results reiterate the urgency for the needs of older Australians who are blind or vision impaired and people with disability more broadly to be prioritised within the aged care system.

More so, Vision 2020 Australia holds that in prioritising package access, consideration should be given to prioritising access for people experiencing comorbid conditions that exacerbate their functional decline. For example, the presence of multiple health conditions in conjunction with vision impairment compromises functional capacity, with research demonstrating that people over 65 with vision loss and comorbidities experience greater difficulty walking, climbing steps, shopping and socialising.¹¹ Additionally, Vision 2020 Australia holds that places should be prioritised for access where it is evident that early intervention will lead to significant outcomes such as improved functionality. Early intervention is a vital aspect of service provision, with evidence suggesting that early expert assessment and support planning to mitigate the functional impact of diagnosed conditions can allow people with vision impairment to retain their independence and reduce or delay unnecessary entrance into residential aged care.

Vision 2020 Australia therefore recommends that a national prioritisation process within the aged care system should account for the specific needs of older Australians with disability, in particular where comorbid conditions exist and where it is evident that early intervention will lead to improved functionality. Prioritising the specialist needs of people with disability, including people who are blind or vision impaired will provide a clear signal to the market and the community that the needs of people with disability have been considered and will be met within the aged care system.

Recommendation 2

That the Australian Government ensures that people with disability, including people who are blind or vision impaired, are prioritised in the allocation of places within the aged care system, in particular where comorbid conditions exist and where it is evident that early intervention will lead to improved outcomes.

¹⁰ Vision 2020 Australia by Access Economics Pty Limited, Clear Focus: The Economic Impact of Vision Loss in Australia in 2009, June 2010.

¹¹ Crews, JE et al. (2006) 'Double jeopardy: the effects of comorbid conditions among older people with vision loss.' Journal of Visual Impairment and Blindness 100: 824-848.

2.3 Whether further steps could be taken to change key aged care services from a supply driven model to a consumer demand driven model

The My Aged Care reforms for Home Care and Home Support are moving toward a consumer directed care approach, positioning the individual at the centre of decision making over the supports they require. This is not dissimilar to the values and principles underpinning the NDIS. Person centred care is the basis of quality care and a consumer driven aged care service. Vision 2020 Australia supports this intention to transition to a culture that provides consumers with greater flexibility and choice over their individual needs.

However, under current arrangements Vision 2020 Australia holds that people who are blind or vision impaired do not receive equal access to the services and supports they require. Vision 2020 Australia member organisations report that many aged care providers do not recognise the need for specialist blindness and vision impairment services and fail to provide information in accessible or relevant formats, this is particularly evident in residential aged care settings. These barriers take on numerous forms for example inappropriately situated information; information provided in inaccessible formats, or the failure to provide information in a verbal manner. Access to information can be a significant barrier to accessing specialist blindness and vision impairment services. Vision 2020 Australia holds that knowledge and understanding to make an informed choice is at the centre of a consumer directed care approach, this in turn requires accessible information in a range of formats.

Vision 2020 Australia therefore considers it essential that all information and forms of communication be produced in a range of alternative formats as per best practice and should be made accessible to all consumers. These formats include braille, electronic text, audio and large print and where possible, all efforts should be undertaken to ensure these formats are available at the same time as other formats rather than upon request. Older Australians are far less likely to use the internet and therefore alternative formats should always be provided. It makes sound economic sense to leverage the existing skills and expertise of the disability sector to ensure accessibility within the aged care system. Therefore, Vision 2020 Australia recommends that the Australian Government seeks expert advice from specialist groups on best practices and guidelines, as this information already exists within the broad disability service provision sector.

Recommendation 3

That the Australian Government ensures that expert advice is sought from specialist groups on best practices and guidelines on producing a range of alternative formats to ensure accessibility within the aged care system for all consumers.

Furthermore, in order to ensure that people who are blind or vision impaired are informed and empowered to make decisions it is critical that general aged care providers and My Aged Care (MAC) Assessors are appropriately resourced and informed to identify and respond to the individual needs of people who are blind or vision impaired. Vision 2020 Australia considers it essential that general aged care providers and MAC assessors are informed of the range of needs of people who are blind or vision impaired and the services and supports available. It is imperative that My Aged Care staff are aware of the range of services and supports people who are blind or vision impaired may require. These include assistance with: orientation and mobility (i.e. using a white cane, dog guide, or training in using acentric viewing methods to optimise residual vision); training in braille or adaptive technology for literacy (i.e. screen readers or magnifiers or hand held magnifiers or close circuit televisions); occupational therapy (i.e. for learning new techniques around the home in cooking or cleaning); peer or emotional support to deal with vision loss, or a range of aids and equipment to assist with their mobility or literacy.

This aim could be supported through the provision of appropriate training and awareness raising activities specific to people who are blind or vision impaired. Vision 2020 Australia recommends that as an incentive this training should be made a requirement of aged care funding.

Recommendation 4

That the Australian Government ensures that aged care providers and My Aged Care (MAC) assessors are appropriately resourced, trained and informed to identify and respond to the needs of people who are blind or vision impaired.

Additionally, content and information made available through the My Aged Care Gateway should be created in ways that support and maximise accessibility. Vision 2020 Australia notes that the Australian Government has endorsed the Web Content Accessibility Guidelines (WCAG) version 2.0 AA rating for all government websites. Vision 2020 Australia recommends that the Department of Health develop information relating to My Aged Care in accordance with these guidelines, considering the varied needs of users, and plan for accessibility from the outset; noting that not all people who are blind or vision impaired access information in the same way and that many individuals have a preferred format. Vision 2020 Australia supports improvements to the My Aged Care website to enable consumers to understand what services are available on a comparable basis including types and quality. Vision 2020 Australia therefore recommends that organisations in the disability sector, including the eye health and vision care sector, are involved in the development of an information sharing system, to ensure expert knowledge on accessibility needs is available and utilised.

Recommendation 5

That the Australian Government ensures that organisations and representative bodies in the disability sector, including those with expertise in the eye health and vision care sector, are involved in the development of an information sharing system, to ensure expert knowledge on accessibility needs is available and utilised.

2.4 The effectiveness of means testing arrangements for aged care services, including an assessment of the alignment of charges across residential care and home care services

Vision 2020 Australia acknowledges that an individual with the means to contribute towards the cost of their care should be required to do so. However, Vision 2020 Australia notes that people who are blind or vision impaired, and people with disability more broadly, often experience high living and support costs which are frequently met through their own incomes. Ageing can have a compounding impact on the non-optional costs of blindness or vision impairment and disability. Some of these costs include additional transport costs, mobility or communication aids, other medical expenses and those associated with the use of assistive technology, including initial purchase and ongoing maintenance, servicing, training and support. For people who have recently acquired their vision loss, potentially higher costs are associated with intensive early intervention support across a range of needs in the initial stages.

Additionally, it should be noted that for people over 65 years who have lived their entire lives with a disability, or acquired their disability at a young age, this will have significantly impacted their ability to accumulate assets and resources that other members of the community will have access to in arranging their aged care supports and services. For example a person who is blind or vision impaired and living in a residential aged care facility, who is contributing up to 85 per cent of their pensions towards the cost of their care, may not have the financial capacity to purchase assistive technology relevant to their blindness or vision impairment, nor should the provider be expected to provide this free of charge.

Vision 2020 Australia therefore recommends that the Australian Government ensure that means testing arrangements for aged care services do not create a barrier for people who are blind or vision impaired in accessing the most appropriate supports and services they need to remain independent and engaged in their community.

Recommendation 6

That the Australian Government ensures that means testing arrangements for aged care services does not create a barrier for people who are blind or vision impaired in accessing the most appropriate supports and services they need to remain independent and engaged in their community.

2.5 The effectiveness of arrangements for regulating prices for aged care accommodation

No comment.

2.6 The effectiveness of arrangements for protecting equity of access to aged care services for different population groups

For many years, the eye health and vision care sector has expressed concern that people with disability, including people who are blind or vision impaired, are not explicitly recognised as a special needs group within the Aged Care Legislation.

Clause 1 of Schedule 1, section 11-3 (definition of people with special needs) of the Aged Care Living Longer Living Better (LLL) Act 2013 defines a person with special needs as the following:

- a. people from Aboriginal and Torres Strait Islander communities;
- b. people from culturally and linguistically diverse backgrounds;
- c. people who live in rural or remote areas;
- d. people who are financially or socially disadvantaged;
- e. veterans;
- f. people who are homeless or at risk of becoming homeless;
- g. care leavers;
- h. parents separated from their children by forced adoption or removal;
- i. lesbian, gay, bisexual, transgender and intersex people;
- j. people of a kind (if any) specified in the Allocation Principles.

Vision 2020 Australia is concerned that there is not adequate recognition and understanding of disability within the Aged Care Legislation. Too often disability acquired in older age is perceived as frailty, which makes equity of access challenging. In failing to recognise the special needs status of people with disability, including people who are blind or vision impaired, there is a denial of the intrinsic rights of a person with a disability. Vision 2020 Australia holds that a person who is blind or vision impaired and over the age of 65 years should have their needs met as a 'person with a disability' and not as a 'person who is ageing.'

It is therefore the position of Vision 2020 Australia that the Aged Care LLLB Act 2013 should be amended to include people with disability, including people who are blind or vision impaired as a special needs group. This amendment to the legislation will ensure that places are allocated to meet the specialist needs of people with disability, including people who are blind or vision impaired, including identification and matching with professionals with expertise specific to the holistic needs of the individual.

Recommendation 7

That the Australian Government ensures that Clause 1 of Schedule 1, section 11-3 (definition of people with special needs) of the Aged Care LLLB Act 2013 be amended to include disability, including people who are blind or vision impaired, as a special needs group.

2.7 The effectiveness of workforce strategies in aged care services, including strategies for the education, recruitment, retention and funding of aged care workers

The 2013 Snapshot Survey found that the eye health and vision care sector is struggling to recruit and retain specialist staff in these roles. The study found that more than one-quarter (27 per cent) of organisations reported that they have had to refuse services to clients and more than half of organisations surveyed reported that service wait times had increased on the previous year.¹² The data suggests that the sector is experiencing shortages in workers with specialist skills. This strain is expected to worsen as the population ages and as the sector adapts to changing policy environments. For example, a shift to a consumer directed care approach in aged care will mean that the sector will need to move to flexible workforce arrangements in order to meet the needs of individual consumers.

Vision 2020 Australia recognises that difficulties in recruiting to the eye health and vision care sector are due in part to remuneration issues combined with a lack of education pathways, professional development and training options required to obtain and retain required expertise. For example, qualifying as an orientation and mobility instructor often requires completion of an undergraduate degree followed by a graduate diploma in Orientation and Mobility requiring significant practical experience. The graduate diploma is offered and primarily funded by a small number of not for profit institutions, limiting the number of qualified graduates. Experienced orientation and mobility instructors can then go on to apply for a Guide Dog Cadetship to become guide dog instructors. This additional training can take several years of on-the-job training.

It is the position of Vision 2020 Australia that the eye health and vision care sector must work with the Australian Government to develop a sophisticated overarching strategy for future workforce growth in the sector. A macro-level industry development strategy, led by the Australian Government, service providers and consumers will map out how the projected demand for blindness and vision impairment services will be met in the medium to long term and ensure workforce, financial and policy harmonisation.

¹² B. Ah Tong, G. Duff, G. Mullen and M. O'Neill, August 2015, A Snapshot of Blindness and Low Vision Services in Australia, Vision 2020 Australia, National Disability Services, Australian Blindness Forum, Sydney.

Such a workforce strategy would result in three things:

1. Provide further opportunities for education, training and skills development and competitively remunerated staff, resulting in a workforce that is sufficiently skilled, appropriately qualified, attracted to and retained and respected for their work in the blindness and vision impairment services sector.
2. Build on the capacity of people who are blind or vision impaired and people with disability more broadly, by directly supporting an increase in workforce numbers; education and training programs.
3. Develop a sustainable workforce to ensure that people who are blind or vision impaired are able to access the appropriate specialist supports and services to remain independent and engaged in the community.

The demand for blindness and vision impairment services exceeds current sector capacity. As the population ages and the fact that the risk of eye disease doubles for each decade over the age of 60, we cannot continue to allow the sector to develop in an ad hoc manner. Instead, we must plan for the future. Vision 2020 Australia therefore recommends the development of a macro-level industry development strategy, led by the Australian Government, service providers and consumers, to enhance and support a sustainable quality workforce in the blindness and vision impairment services sector.

Recommendation 8

That the Australian Government ensures investment in and development of a macro-level industry development strategy, to enhance and support a sustainable quality workforce in the blindness and vision impairment services sector, is supported.

2.8 The effectiveness of arrangements for protecting refundable deposits and accommodation bonds

No comment.

2.9 The effectiveness of arrangements for facilitating access to aged care services

The My Aged Care reforms for Home Care and Home Support are focused on preventing or delaying entrance into high cost residential care. While the eye health and vision care sector is supportive of this aim, the resulting eligibility for service has an over-emphasis on frailty. Vision 2020 Australia would like to make clear that a person who is blind or vision impaired and over the age of 65 years is not necessarily frail. This eligibility of frailty creates a barrier to accessing necessary supports and services for people who are blind or vision impaired, as they are often not frail despite requiring support related to their blindness and vision impairment to remain independent.

As a result, Regional Assessment Services (RAS) or Aged Care Assessment Teams (ACATs) are focused on assessing the needs of the 'frail aged' rather than the needs of a 'person with a disability.' Assessors are not equipped with specific expertise in determining the types of services and support required for a person who is blind or vision impaired and may not consider whether a person would benefit from specialised blindness and vision impairment services, such as orientation and mobility, literacy aids, library services or assistive technology training. In

order to truly meet the individual needs of consumers, Vision 2020 Australia holds that My Aged Care Reforms should embed a restorative care approach with a focus on maintaining independence, safety and dignity.

Furthermore, Vision 2020 Australia is concerned that the National Screening and Assessment Form (NSAF) is limited in its capacity to respond to needs of older people who are blind or vision impaired and people with disability more broadly. While disability is identified as a health condition that may prompt referral to an allied health professional there is no trigger to refer an individual to specialised support services such as providers in blindness and vision impairment. In relation to blindness and vision impairment, NSAF instructs assessors to refer the person to an optometrist if the person has had changes to their vision in the last three months and does not seek any information on underlying vision impairment or consider the need for specialised blindness and vision impairment services.

In order to ensure that people who are blind or vision impaired do not continue to fall through the gaps, it is essential that specialist knowledge regarding individual need is available once an individual presents to the My Aged Care Gateway. It is the position of Vision 2020 Australia that a specific trigger mechanism is required in order to identify applicants who are blind or vision impaired. This trigger will need to ensure an effective passage through the My Aged Care Gateway, by providing the option for a specialist assessment undertaken by a specialist service provider in blindness and vision impairment to substantiate the correct services and supports to meet the identified needs.

Recommendation 9

That the Australian Government ensures that a specific trigger mechanism is implemented to identify applicants who are blind or vision impaired to ensure effective passage through the My Aged Care Gateway.

Furthermore, Vision 2020 Australia considers it critical for people who are blind or vision impaired seeking support through the My Aged Care Gateway to have access to a holistic specialised assessment. It is vital that a holistic specialist assessment is undertaken by trained professionals with specialist expertise in blindness and vision impairment, with a view to the person's needs so that they can remain independent and connected with the community. A holistic specialist assessment would ensure that individual need is met and that services to people who are blind or vision impaired are able to be accessed through the aged care system.

Recommendation 10

That the Australian Government ensures that people who are blind or vision impaired have access to a holistic specialist assessment at the time of determining an individual's eligibility to My Aged Care and throughout supporting planning.

3 Conclusion

Vision 2020 Australia supports the Living Longer Living Better reforms to aged care and favours a model which promotes individual choice and consumer directed care. However, the eye health and vision care sector is concerned that there is not adequate recognition and understanding of disability, including blindness and vision impairment, within the aged care sector reforms.

Vision 2020 Australia appreciates the opportunity to provide comment to the Department of Health on this important issue, and welcomes any further participation and discussion on what is an important matter to the eye health and vision care sector.