

**Submission
No 32**

**ACCESS TO TRANSPORT FOR SENIORS AND
DISADVANTAGED PEOPLE IN RURAL AND
REGIONAL NSW**

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Aged & Community
Services NSW & ACT

**Legislative Assembly – Committee on
Community Services**
***Inquiry into access to transport for seniors
and disadvantaged people in rural and
regional NSW***

Submission

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ABOUT AGED AND COMMUNITY SERVICES NSW & ACT

Aged & Community Services NSW & ACT (ACS) is the leading peak organisation representing not-for-profit, church and charitable providers of services in retirement living, community aged care and residential aged care in NSW and the ACT.

ACS represents around 300 organisations, providing over 2,000 services to more than 100,000 people.

ACS members range in size from large multisite organisations to small rural and regional stand-alone providers.

ACS members are typically registered charities with not-for profit status, in recognition of the services provided to aged and frail people unable to afford fees and charges or unable to access any other form of support due to their levels of disadvantage. Not-for-profit organisations across NSW and the ACT provide around 65% of all aged care beds and around 89% of community packages.

The views expressed in this submission are those of our members, management and staff.

SUBMISSION

ACS is pleased to have the opportunity to provide input into this Inquiry into access to transport for seniors and disadvantaged people in rural and regional NSW.

In 2005 Aged and Community Services Australia together with the National Rural Health Alliance Inc published *Older People and Aged Care in Rural, Regional and Remote Australia - National Policy Position*. Eleven years on it is concerning that the transport issues raised then, remain largely the same. This submission draws on the issues raised in that document as well as on current feedback from our members.

(a) Specific issues relating to the transport needs of seniors and disadvantaged people in rural and regional NSW

Population ageing in rural and regional areas will increase demand for specialised transport services to assist older people who live in the community, particularly frail older people. Many rural areas have no public transport and no taxi services. For example Coonabarabran only has access to a country link bus that goes to Lithgow then on to Sydney by train. When public transport is available 'fear for physical safety can also inhibit use'ⁱ. Many older people, not only those who require assistance, have concerns for their safety. 'Some of the most widely-reported reasons for not using public transport, when it is available, are the fear of crowds, security issues, and the heightened risk of a fall'ⁱⁱ

Older people need safe transport options that preserve dignity, maximise independence, and provide access to the full range of activities that contribute to quality of life, including:

- work or volunteering;
- access to education, aged and health services such as visiting a specialist, GP or dentist;

- daily living including shopping, banking, library visits and other recreation;
- maintaining family and community networks; and
- countering social isolationⁱⁱⁱ.

'Social isolation is a well-established risk factor for depression and anxiety. Conversely, social connections are shown to be protective factors that can prevent against and reduce the severity of these conditions. Older adults are at greater risk of becoming isolated due to a range of physical, social and structural factors'^{iv}. Access to transport is a key factor in facilitating older people's ability to remain in contact with their community and limited transport choices can lead to isolation of an older person and a consequent deterioration in both their physical and mental health. This deterioration may lead to hospitalisation and / or premature admission to residential aged care which may not have been required if they were living in a metropolitan area.

Early discharge from hospitals, attendance as outpatients and day treatment at doctors' surgeries mean that older people must travel more frequently for health care, often under circumstances where they require support while travelling. Same day procedures require people to attend hospital early in the morning which creates enormous difficulties for those travelling long distances, and similar problems are caused by discharge late in the day and/or at short notice.

Accessing door to door transport of people to medical appointments in regional centres and cities is difficult. Many services take a number of people at any one time which means they usually need to wait for hours for the return journey which is often difficult for an older person or someone with a disability.

Whilst the Isolated Patients' Travel and Accommodation Assistance Scheme (IPTAS) is available it:

- has limited funding;
- focuses on specialised health services rather than primary health care;
- is poorly promoted so that those who could benefit from it may not be aware of its availability; and
- has complex administrative arrangements, so that many of those who desperately need assistance do not seek it.

As the population continues to age, more people from rural and remote areas require assessment and/or treatment at distant health and specialist facilities (especially given the loss of many local health services). Travel assistance schemes will become even more important in reducing access barriers. However, there is considerable concern that existing financial schemes are already inadequate^v.

Older drivers often self-regulate their own driving; limiting the distances they drive as they get older. In rural areas this may happen earlier due to poorer road conditions and distances that need to be travelled. For people living in rural areas, this can significantly impact on their independence when accessible and affordable transport options are not available. This is

exacerbated as younger family members, who may have been able to assist with transport, have often left rural areas for work or study opportunities.

Distance isn't the only barrier that people in rural and some regional areas experience that may make them more dependent on transport services. The local topography such as in areas dominated by hilly terrain, may require access to multiple short journeys to allow them to navigate their community.

Community transport provides free or subsidised transport from the home to shops and services. However many other funded community services, such as social support services (eg day care) provide a de-facto transport service to older people allowing them to remain socially connected. With the current ageing and disability reforms, and the move away from pooled or block funding, the capacity of organisations to provide additional services such as transport, may diminish. The ongoing viability of some ageing and disability service providers in rural areas is in question, which may result in a loss of these ad hoc but vital transport services.

Some community transport providers limit the distances they travel due to having to meet contracted outputs. A 20 km trip is reported the same as a 200 km trip providing a significant disincentive for longer trips to be accommodated.

There is significant concern that some people are falling through the cracks, such as those who have been assessed as ineligible for NDIS (because their disability is predicted to improve over time) but who still require transport now to get to and from activities/community events.

The ageing of the population also impacts on the pool of available volunteers. Many community transport services rely heavily on their volunteer drivers and as the population ages, they are becoming an increasingly rare resource potentially jeopardising the viability of this service stream.

Barriers to the successful implementation of community transport in rural and remote communities include:

- services are more expensive to operate than in metropolitan areas;
- complex funding arrangements and an overall lack of funds (e.g. for vehicle replacements);
- a lack of coordination between different government agencies, each of which provides transport in some form;
- program funding arrangements which mean that some members of the community who do not meet the criteria for access remain isolated from community activities if no other form of transport is available; and
- lack of appropriate supports for volunteers (usually older people).^{vi}

Transport for older people living in residential aged care services is also a major gap, particularly in rural and regional areas. Residential aged care services are not funded to provide transport. When a resident is required to attend a specialist appointment eg in a

major town or regional centre community transport services will not transport residents and often families are not available to help out. The costs to a residential aged care facility would be high and many do not have cars or vehicles available to transport people with high needs. Often a staff member needs to be sent with the resident and many residents are not in a financial position to pay for this. Sometimes taxis are used for in-town transport if the resident is capable. At times an ambulance is used which takes them away from town when they may be needed for an emergency. Residents in aged care services are not currently eligible for the Isolated Patients' Travel and Accommodation Assistance Scheme.

(b) Accessibility of current public transport services in rural and regional NSW

The public transport infrastructure is minimal in most rural areas of New South Wales and is variable across regional areas. Public transport is often not available to required destinations, especially regional centres or, where it is available, may not meet the needs of older people due to expense, accessibility, or timetabling and route constraints.

Access to train platforms eg in the Blue Mountains is a major issue for older people and for people requiring assistance with movement; wheelchairs, walkers etc. To access many of the platforms one has to go up and down many stairs.

Whilst in some locations there are bus services, many older people report that they do not use them as they are not sufficiently frequent, don't meet their time frames or it's too hard to walk up steep hills or uneven footpaths to get to the bus stop. Many buses are not accessible due to the size of the steps. There are also few seats and little shelter provided at bus stops.

(c) Potential strategies to improve access, including better alignment between different modes of transport, available routes and timetabling generally

- Many of the innovative solutions to transport provision in regional and rural areas rely on the good will and personal networking of staff of different organisations. What is needed is a more formal, coordinated and planned approach to the sharing of expensive vehicle resources which are less reliant on the whims of individuals. The ability to manage and mobilise excess vehicle capacity and coordinate timetables to maximise accessibility for older and other disadvantaged people, is crucial.
- The ability for older and disadvantaged people to access public transport or transport services that do not advertise or imply vulnerability is important to them. Some people will avoid using services which they believe label them or bring attention to them in this way.
- Opportunities exist for a social enterprise taxi service for older people or those with mobility issues. It would need to be affordable enough that people could use it daily rather than current taxis which are very expensive. Drivers would need to be registered (with a professional body) and trained in working with older people and people with disabilities.

- The NSW Committee on Ageing in 2000 recommend that the Government fund the development and piloting, in rural NSW, of a new car sharing scheme that would match older car owners needing drivers, with younger volunteer drivers^{vii}.
- Subsidising and supporting driver training and licensing for bus drivers would assist in ensuring community transport providers in rural and regional areas were able to access drivers needed.
- Closer working relationships or partnership between Transport for NSW (including the contracted Community Transport Service Providers), Local Councils, Registered Clubs and other organisations that provide transport are recommended. This would allow transport to be scheduled at times more appropriate for older and disadvantaged people rather than just at peak hour and school times which often occurs in rural and regional areas.
- Ensuring a range of services which allow for variable or booked door-to-door routes rather than only standard routes would also assist older and disadvantaged people.
- Integrating transport issues into the planning of all health services for rural and regional communities is essential. Important considerations are the location of services, admission and discharge practices, and arrangements for appointments.
- Particularly vulnerable and isolated communities should be identified to ensure appropriate access to vehicles is available eg some Aboriginal communities. Often Aboriginal people will only access local Aboriginal services so it is important that they are supported and have access to the vehicles needed to support their elders and disadvantaged community members.

(d) Support that can be provided to seniors and disadvantaged people to assist with the costs of private transport where public transport is either unavailable or unable to meet the needs of these groups

More and better access to community transport and taxi subsidies can only help reduce anxiety, isolation and declining health due to older and disadvantaged people not attending necessary medical appointments or being able to engage with their community. The following supports are recommended:

- Commit to an improved and well-resourced Isolated Patients' Travel and Accommodation Assistance Scheme with:
 - sufficient funds to guarantee access to the program for all who qualify;
 - uniform reimbursement rates for travel and accommodation for the patient and their escort; and
 - flexibility at the local level to provide support on an individual basis^{viii}.

The scheme should be widely publicised and promoted in a range of user friendly formats.

People residing in residential aged care facilities and those in receipt of Home Care Packages should not be excluded from eligibility.

- Older people are the greatest users of ambulances yet not all have cover as concession card holders or through insurance schemes. The Australian Government should include ambulance travel in Medicare to ensure that all patients are covered^{ix}.
- Consideration should be given to introducing a viability supplement to support people in receipt of Government income support, such as the Aged Pension, who live in isolated areas to assist with the additional transport costs they incur.
- Petrol and other costs are higher in rural and regional areas so a form of petrol discount should be considered for older people and services that support them. This discount should not be funded by the local service (such as a Seniors Card discount) as many rural business struggle to remain viable.



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Aged and Community Services NSW & ACT

ⁱ Maitland Social Compass Discussion Paper Older People (55 years +) 2008

ⁱⁱ NRMA Transport and Mobility Needs of Ageing Australians - Discussion Paper 2010

ⁱⁱⁱ Aged and Community Services Australia together with the National Rural Health Alliance Inc *Older People and Aged Care in Rural, Regional and Remote Australia - National Policy Position* September 2005

^{iv} *Social isolation in older adults – Project Brief*, beyondblue, Megan Bond, Peter Howden, and Nikki Ralston <https://www.beyondblue.org.au/about-us/research-projects/research-projects/social-isolation-in-older-people>

^v Aged and Community Services Australia together with the National Rural Health Alliance Inc *Older People and Aged Care in Rural, Regional and Remote Australia - National Policy Position* September 2005

^{vi} Aged and Community Services Australia together with the National Rural Health Alliance Inc *Older People and Aged Care in Rural, Regional and Remote Australia - National Policy Position* September 2005

^{vii} *Driving Miss Daisy in Country NSW :Extending the transport options of older people living in rural NSW*. NSW Committee on Ageing October 2000

^{viii} Aged and Community Services Australia together with the National Rural Health Alliance Inc *Older People and Aged Care in Rural, Regional and Remote Australia - National Policy Position* September 2005

^{ix} Aged and Community Services Australia together with the National Rural Health Alliance Inc *Older People and Aged Care in Rural, Regional and Remote Australia - National Policy Position* September 2005