

**Submission
No 56**

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

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Submission No. 56 – Berrigan Shire Council

The Berrigan Shire Council welcomes the decision by the NSW Government to conduct an Inquiry into the transport needs of people who in rural and regional NSW.

This submission will comment on the following:

a) Transport needs of seniors and disadvantaged people in rural and regional NSW; b) Accessibility of current public transport services in rural and regional NSW; c) strategies to improve access, including better alignment between different modes of transport d) Support needed by 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; and e) Additional costs and transport disadvantage experienced by NSW residents who use Victorian transport providers

1. Transport needs of seniors and disadvantaged people in rural and regional NSW

The Berrigan Shire Council has undertaken extensive consultation with its residents on the extent of transport disadvantage experienced by seniors. The results of this consultation are attached as a supplementary file. Key issues identified by this process include public bus or similar not supported for local travel.

Private car is preferred. Primarily because when seniors can no longer drive this is the mode of transport with which they are familiar and public transport because it involves long distances, and infrequent travel was for most something which during a lifetime has never been used or only used intermittently. Transport or the ability to drive a car or have access 'on demand transport' was also viewed as the single biggest issue impacting on livability and the desire of older residents to age in place with many focus group attendees suggesting that they would move to Victoria when or if they could no longer drive.

2. Accessibility of current public transport services in rural and regional NSW

Current NSW public transport services in rural and regional NSW - from the Berrigan Shire provides, for the most part, the option to travel by bus (only) to major NSW centres - that is if the user can afford overnight accommodation or is travelling with the intention of staying overnight. It is not possible from the Berrigan Shire to take NSW public transport - conduct more than 1 hours business in an NSW regional centre and return on the same day. There is also limited to no access to public transport if it is unplanned or needed in an emergency - because even if there is a service scheduled - the tickets cannot be purchased locally - but need to be purchased online. For seniors, this poses some difficulties and is we understand leading to additional costs as local businesses can and do offer as a community service to do the booking and in doing so then charge a small fee for their time and internet use. There is also no local taxi service or similar on-demand service other than courtesy cars provided by local clubs - for patrons. Taxi services that do operate in our urban centres are Victorian Taxi's that can drop off in NSW but not pick up.

3. Strategies to improve access, including better alignment between different modes of transport

Potential strategies to improve access relate to transforming the delivery of transport in rural and regional NSW and recognising that public transport - does not need to be a bus/train.

19th and 20th-century modes of transport (bus/train) relied on critical mass and multiple users to justify costs associated with moving lots of people to where they needed to be within a set time frame. Service improvements for regional services as with urban populations that still meet that criterion are achievable through timetabling and connectivity. Unfortunately, this is not the transport landscape of rural and many parts of regional NSW. What we have is falling population - the majority of whom have never used or been reliant on public transport and who are not homogeneous re: the reasons why they need to travel and when. We also have the considerable investment in our existing transport infrastructure /services that is not able to respond to the market or no longer delivers public value. Ride sharing or programs that coordinate 'on-demand' local public transport using cars/local drivers - should be considered. The 'uber' taxi model could work equally well in regional and rural NSW. For example, if the 'fee' payable to a registered driver were subsidised. Instead of the subsidies that are currently paid to run bus routes that are not commercially viable; and which are not for many even accessible or entail the additional costs associated with overnight travel and transit costs - meals etc. while waiting for connections.

4) Support needed by 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

The issue of what is public and private transport needs to be resolved - to me, public transport is provided by a regulatory framework - where there is some vetting of the operators/ plant/ infrastructure - the mode can be a bus, train or car. Private transport is the 'next door neighbour who may or may not have a road worthy car but who is helping out. The support needed by seniors and disadvantaged people is the development of a 'public transport' system that includes - car travel as an option. If the privately owned car is part of the 'solution' the support needed is the third party (transport cooperative) oversight/ registration and coordination of 'private transport' operator. Who once registered can apply for financial recompense for costs incurred - through either a transport cooperative of which the senior is a member and pays a fee instead of purchasing and running a car. Alternatively, support could be fuel card or a transport package administered through NDIS or similar brokerage model with eligibility requirements.

4. Additional costs and transport disadvantage experienced by NSW residents who use Victorian transport providers or are required to access services in NSW

The Berrigan Shire's residents are fortunate in that they have for a rural community the opportunity to use public transport that offers a daily and return service to a capital city - Melbourne. Meaning that residents can use public transport to attend to Doctors / Medical and Commonwealth Government Human Services (Centrelink) appointments in Shepparton (our nearest regional centre) or indeed travel to Melbourne for the same purpose and return home late that evening. Unfortunately, this comes at a cost. The cost being: no country pensioner excursion concession because VLine runs the service. The alternative is to use the NSW country excursion concession and incur the additional costs associated with overnight stays. For example, pensioners who are 'disabled' and under the age of 35 years are now required to meet a work test and attend in person their nearest Centrelink office. For a disability pensioner who lives in Finley, this disability pensioner has no choice but to attend a Centrelink appointment in Deniliquin 70 km west of Finley. To attend their 1 pm appointment, they need to catch the bus from Finley the night before - stay overnight in

Deniliquin and then catch the bus from Deniliquin to Finley. There is no benefit for NSW residents that live in the southern Riverina in having a country pensioner excursion concession if it cannot be redeemed nor is it equitable that for NSW pensioners other concession holders end up paying more because they choose the transport connectivity and convenience of VLine.

Berrigan Shire Liveability & Healthy Aging

Focus Group Outcomes

September 2014

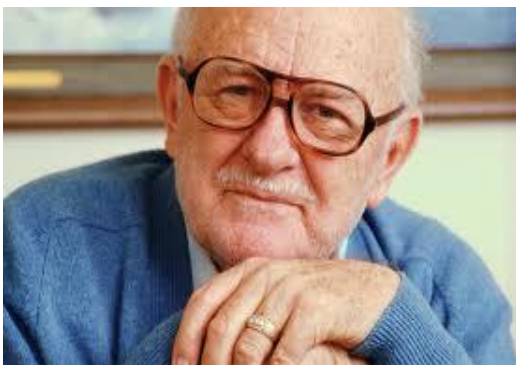


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Focus Group Program : Transport

Where are we now

Transport:

- In Berrigan (A) (Local Government Areas), 37.8% of occupied private dwellings had one registered motor vehicle garaged or parked at their address, 35.7% had two registered motor vehicles and 15.9% had three or more registered motor vehicles. Registered vehicles (2 or more) over NSW and Aust average
- Information re: Public Transport (Providers / Timetables)
- Information re: Community Transport (Libby Quick)
- Community Bus Trial
- Modes of transport
 - Car (private)
 - Public (govt funded or commercial)
 - Community (car or bus – volunteer based)
 - Active
 - Walking
 - Bike
 - Mobility Aids

Based on this overview of transport for older people if you could no longer drive or no longer use family/friends for transport on a scale of 1 – 10 how would this impact on the liveability of the town / district in which you live.

(Rate toward a 10 if the impact would be severe and cause you to consider leaving town and rate toward a 1 if there would be no impact on your current lifestyle and perception of the liveability of your town')

Participants rated liveability at 10 / 8 = the access to transport having a major impact on liveability.

Comments of the impacts are ;

- ✗ Reduce liveability and forced to relocate to a regional town (Cobram)
- ✗ Loss of dignity and choice
- ✗ Family not always available
- ✗ If no family nearby we are more reliant on others and I don't like to bother them
- ✗ No internet access or limited knowledge of the internet to book public transport
- ✗ Can't buy a ticket from the bus driver, no shop front to buy a ticket and we must use a credit card
- ✗ Impromptu taxi service as an alternate transport option
- ✗ Promote public transport as an option
- ✗ Impact of the online generation (goods purchased and delivered etc) and how this will effect liveability
- ✗ Timing of public transport to and from Albury & Shepparton is limited, with a narrow window of time in the day between drop off and pick up
- ✗ Introduce community education on how to use MyKey Cards for Melbourne Public Transport system
- ✗ Lobby V-Line to introduce MyKey on to regional public transport so that it integrates for Country travellers.
- ✗ Sale of MyKey cards at regional outlets and country train stations

Q How do you or your family move about the Shire or the region and how will this change as you age?

Challenges & barriers were ;

- ✗ Taxi Service : Cross border issues between Victoria and NSW
- ✗ Vic / NSW Taxi Licensing Regulations : Pick up in Vic and drive to NSW (but not the other way)
- ✗ Question of commercial viability of private taxi and ownership of 2 state taxi licences
- ✗ Qualifications for HACC and Community Transport : limitations on who can use the service
- ✗ Need more volunteer drivers to participate in Community Transport service
- ✗ Economic Circumstances : some cannot afford to own or run a car
- ✗ Unable to drive due to medical diagnosis creates a barrier to attend appointments
- ✗ Need for a good path system that is safe. Walking tracks aid lifestyle. Liveability is enhanced by walking circuits that take in the natural elements of the township such as river & parklands.
- ✗ Gofers : aid liveability, are a good alternative transport mode and provide accessibility to local shops
- ✗ Mobility Scooters / Gofers can be dangerous to road users, going too fast, unlicensed and unaware of road rules.
- ✗ Lack of Services to fix scooters

Q If you were responsible for planning and funding public transport for older people what would you prioritise (Choose one only)

Priority ranking from most to least

- Publicly funded taxi service
- Public funded transport / bus offering a daily service
- Fuel vouchers for pensioners – to be used with family/friends / neighbours
- Improvements to footpaths, installation of seats, shading and lighting so that people could walk, use scooters, and other mobility aids
- Community transport – volunteer drivers for social outings
- Community bus – volunteer driven community bus on a regular time table
- User pay taxi service

Thinking about your priority for planning and funding of transport for older people, if this were to be implemented on a scale of 1 – 10 how would you then rate the liveability of the town / district in which you live.

Participants now rated liveability at 1 = with improved access to transport having a major impact on liveability.

Focus Group Program : Grandparents and Child Care

Where are we now

Grandparents and Childcare

Handout: ABS Report and Berrigan Shire Child Care Stats

<http://abs.gov.au/ausstats/abs@.nsf/Lookup/4211.0main+features3October%202012>

Reasons why a grandparent provides care for a grandchild

So that the parents can

- Work / study
- Have a time out and a break
- Shop
- Play Sport, Social Activity /Recreation
- Participate in community life ie volunteering

Other Reasons

- Relationship building between grandparent and the grandchild
- Special time and understanding between generations (intergenerational bonding)
- 3 generations of family support
- Enjoyment and family time
- Builds trust, love, respect and patience
- Personal Reasons
- Medical emergencies / sickness grandparents will look after the grandchild
- In place of child care access

Q Thinking about the town in which you live or how generations change what are the biggest barriers or challenges you experience as a grandparent in providing care for a grandchild

The biggest barriers or challenges grandparents face in providing care for a grandchild are;

- Has to have a car and have money for petrol
- An ability to drive. Many grandparent have no licence to drive due to medical conditions.
- Agility, fitness and good health to keep up with young children
- Duty of care by the grandparents (on farm child proofing is important for safety)
- Relationship between the parent and the grandparent is important
- Style of parenting and care (with common ground rules)
- Financial burden providing grandchildren with food, nappies and play essentials
- Balance between grandparent caring and their own time
- Other ways to spend time as we age, travelling, learning new skills in retirement, hobbies and social outings
- Not saying NO and missing other opportunities

Q If you were responsible for planning and funding formal child care or facilities used by children & grandparents what would you prioritise (Choose one only)

Priority ranking from most to least

- Increase access to and availability of Child Care for working parents
- Increase funding for After School Hours and Vacation Care programs
- Increase funding and support for grandparents who find that they are full time / part time carers of grandchildren
- Increase access to and availability of child care for 'parent respite'
- Improvements to footpaths, installation of seats, shading so grandparents can accompany children to parks

Thinking about your priority for planning and funding of child care / support for grandparents if this were to be implemented on a scale of 1 – 10 how would you then rate the liveability of the town / district in which you live.

With priority for planning and funding of child care support for grandparents implemented participants ranked liveability as 1.

Focus Group Program : Living Longer, Living Stronger

Where are we now

Active Ageing and Life Expectancy
Wellbeing Profile

Based on this overview active ageing and life expectancy if you could no longer participate in your community / club /or activity of choice on a scale of 1 – 10 how would this impact on the liveability of the town / district in which you live.

(Rate toward a 10 if the impact would be severe and cause you to consider leaving town and rate toward a 1 if there would be no impact on your current lifestyle and perception of the liveability of your town')

Participants rated liveability at 8 = without participation in community life (hobby / club /or activity of choice), it would have a major impact on liveability.

Comments attributed to this were ;

- Participation in community life is healthy
- My independence and if I could no longer walk to the shops
- My driver's licence and access to a car will impact on this liveability
- Access to family, friends and good neighbours

The link between living longer and being stronger as we age and involvement in social / community activities and clubs is well established

Q If you are a member and regular participant in a sports/social or service club or community activity – would you increase your involvement if you had:

(in order of priority) ;

- Friends / colleagues / team members etc
- If the club / community was more welcoming i.e.: reached out
- Opportunities for social engagements (ie red hatters / mens shed)
- More Time
- If weather allows
- More money
- Better Physical Health
- Interest in or a role in club activities / administration
- Transport

What would you change so that as we all live longer you could be more independent within your home?

- HACC assessment and look at alterations before they are needed, implement railings & ramps and wheel chair access
- I have a large home, so it would need to be cut in half and make home modifications
- Down size to a unit
- Choose a place to relocate to that has services, security and peace
- Employ a gardener, handy man and cleaner
- Keeping fit and active, with strong mental health

What challenges would you experience if you wanted to change your home so that you could be more independent

- ❖ Down size – getting rid of my junk.
- ❖ Stress and emotional strain of relocation and moving
- ❖ I have accumulated all this stuff that is too good to throw away.
- ❖ Sentimental memories with this stuff. How do I down size ?
- ❖ Cost involved in home modifications (ripping out the bath etc)
- ❖ Cost involved in weekly outsourcing (cleaning, gardening etc)
- ❖ Getting over the loss of independence (asking for help)
- ❖ Trusting help and appreciating the assistance
- ❖ Challenges of technology when seeking information
- ❖ Choice of units close to town is limited

If circumstances changed and you required assistance at home... what would you need?

- Day care activities (Deniliquin & Barooga)
- Transport / Gofer Scooter
- Rails, ramps and specified carer
- Social support in the home (visitors making daily visits and companionship)
- House cleaning, handyman and gardener.

If your home allows you to be independent what makes it liveable (inside and outside) as you age?

- ❖ Good maintenance, clean modern home that is warm in winter and cool in summer
- ❖ Homes purpose built to accommodate a wheelchair
- ❖ Purpose built facility (Amaroo / Noonameena)
- ❖ Security, privacy and feel safe at home
- ❖ Like my own space which is open and easy to live in
- ❖ Sunny aspect and natural setting
- ❖ Small or large garden that allows me to potter and be active
- ❖ Neighbourly care : always someone there to help with cooking and shopping
- ❖ Village life, popping down the street to socialise and do errands
- ❖ Independent, freedom and care of neighbours

What makes you live stronger?

- Exercise, Walking every day and gentle exercise classes
- Walking groups would encourage participation and motivation
- Own a dog, he makes you walk every day
- People : social interaction, conversations, care and purpose for the day
- Mental exercise : crafts, reading, cross words
- Every day activities : active gardening, cleaning, cooking & wine !
- Keeping active at home
- Diet and Healthy fresh food : no preservatives, no salt, no sugar
- Doing things that give me quality of life
- Connecting with family (locally or via technology)
- Having a purpose every day (hobbies such as golf and bingo)
- Regular checkups with the doctor

Q
If you were responsible for planning and funding programs that promote living longer and well being in rural Australia what would it be (Choose one only)

In order of priority ;

- Increase accessibility (improve pedestrian access, parking, lighting, after hours transport) of local clubs, community facilities, retail centres
- Including group and self exercise programs (walking groups & transport to heated pool)
- Low cost commercial & community based health and physical recreation programs
- More funding for in-home nursing support home modifications
- More funding for self care units
- Planning laws requiring that new homes, mobile home estates be accessible / adaptable
- Subsidies and assistance for existing home owners who modify their homes and access to their home (before it is needed)

Thinking about your priority if this were to be implemented on a scale of 1 – 10 how would you rate the liveability of the town / district in which you live.

Participants now rated liveability as 1 with the implementation of priorities greatly improving the aging and liveability of their town.

Focus Group Program : Access to Medical Care

Based on this overview of medical service providers and waiting lists on a scale of 1 – 10 how does this impact on the liveability of the town / district in which you live.

(Rate toward a 10 if the impact would be severe and cause you to consider leaving town and rate toward 1 if there would be no impact on your current lifestyle and perception of the liveability of your town')

Participants rated liveability at 6 -7; stating that the Berrigan Shire is currently well placed with access to medical services, dedication and commitment of GP's and a range of hospital, aged care and nursing services to cater for the elderly.

Thinking about access to medical services and health care in your town what would you like to see improved:

Key areas for improvement in the access to medical services focused on

- Limited or no access to Physiotherapy
- Limited or no access to Occupational Therapy
- Opportunity for Hospital, Aged Care, Nursing Home, Doctors and Community Health to share a private services in Physiotherapy and Occupational Therapy
- Difficulty in recruiting a qualified Physiotherapist or Occupational Therapist to the region
- Waiting times to see a GP was between 3-4 days which seemed reasonable to participants
- Increasing role of triage nurses and practise nurses in GP's
- Difficulty accessing GP locum services to the region
- Waiting times for Dentist was identified as an issue, due to part time nature of private dentists and irregular town visitations. The dentist facilities are available but there is difficulty in recruiting a private dentist to the region.
- Response times for emergencies. Berrigan has 4 paramedics living in town, Finley has a good ambulance service, however Tocumwal has a first responder service run by SES with support from Cobram Ambulance and Finley Hospital.
- Physical access for residents to medical services was viewed by participants as being good, with hospital or MPS's centrally located and well equipped.
- Pharmacy services in Finley were identified as not meeting the needs of the local community, due to business practises and customer service issues.

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Q If you were responsible for planning and funding programs that promote improved access to medical care in rural Australia what would it be. Priority ranking from most to least ;

- Coordination and cooperation between services to access funds, recruit and retain allied health specialist services (creating capacity and service viability across Nursing Homes, MPS, Hospital and Community Care services)
- Need for respite support for aging in place (looking after the carers)
- Priority access for regional / rural residents needing to access services attend appointments in regional centres (i.e: appointments that do not require overnight stays, travel on country roads during evening)
- More funding / compensation for rural families needing to access specialist services in regional centres
- E-health increased access specialists via video-link

Thinking about your priority if this were to be implemented on a scale of 1 – 10 how would you then rate liveability of the town / district in which you live.

Participants now rated liveability between + 8 = with comments linking this to choice, flexibility, dignity, access to a range of allied services including; Occupational Therapy, Physiotherapy, Optometry, Dentist, Speech Pathologist, Dermatologist, Podiatrist, Dementia / Mental Health Services will all become a need with an aging population.

Comments noted that Cobram has a good range of medical services.

Focus Group Program : MPS Service Providers Session

Based on the overview of medical service providers and waiting lists on a scale of 1 – 10 how does this impact on the liveability of the town / district in which you live.

(Rate toward a 10 if the impact would be severe and cause you to consider leaving town and rate toward 1 if there would be no impact on your current lifestyle and perception of the liveability of your town')

Participants rated liveability at 6 -7; stating that the Berrigan Shire is currently well placed with access to medical services, dedication and commitment of GP's and a range of hospital, aged care and nursing services to cater for the elderly.

It was noted that when there are gaps in the provision of allied health services the community is often able to develop creative and innovative solutions to these problems, however Government funding does not always accommodate community led solutions.

Thinking about access to medical services and health care in your town what would you like to see improved:

Key areas for improvement in the access to medical services focused on ;

- ❖ Government funding of innovative, flexible and community drive solutions
- ❖ Greater flexibility in the funding models for rural health provision
- ❖ Need to attract medical practitioners in the areas of dentistry and physiotherapy
- ❖ Greater utilisation of existing community health facilities ie dentist chair in Berrigan
- ❖ Outstanding medical facilities that are sometimes under utilised
- ❖ Create a model to underwrite the dentist by \$80,0000 per year using government funding
- ❖ Create a simple system for funding rural medical services, removing the complexity and its inflexible nature

Q If you were responsible for planning and funding programs that promote living longer and well being in rural Australia what would it be

- More Community Aging Packages (HACC \$\$) for aging at home
- Minimal investment for aging at home vs the cost of institutional care
- Home Care Programs (handyman, gardening)
- Meals on Wheels
- Social support of neighbours
- Day Care and Day Activity Services
- Community Social activities including Men's Shed, Sewing Groups and Red Hatters
- Building and design frameworks that take into account aging, mobility needs and HOBBS
- In order to keep people at home longer greater funding is needed through HACC for early intervention & crisis prevention services.
- An example of this sited was organising a supply of wood for heating in winter prevented an elderly woman from a hospital stay due to contracting phenomena.



Q Thinking about the town in which you live or how generations change what are the biggest barriers or challenges you experience as a grandparent in providing care for a grandchild

The biggest barriers or challenges grandparents face in providing care for a grandchild are;

- ✗ Grandparents feeling the expectations and pressure to care for grandchildren
- ✗ Increasing informal carer role of grandparents providing care for grandchildren
- ✗ Grandparents age determines the level of care they can provide
- ✗ Some don't have the energy to care for young children
- ✗ Grandparents are not always able to connect with or are picked up by Child Care Services
- ✗ Expectations of parenting is transferred to the grandparents (intergenerational changes in parenting styles)
- ✗ When the parents and grandchildren live away, grandparents spend time travelling between home and away
- ✗ Parents high aspirations are transferred to Grandparents
- ✗ Increasing standards of living and way of life induces both parents working
- ✗ Lack of next generational leadership as Parents work, lack of volunteers (of 150 HACC volunteers in the Shire only 2 are under 60 years
- ✗ Volunteers do what interests them...
- ✗ The social fabric is changing and will challenge our community
- ✗ Women now want to work
- ✗ Guilt = family priorities = time => stress
- ✗ Compromising liveability = work life balance
- ✗ Service providers will need a success plan to engage volunteers

Q If you were responsible for planning and funding public transport for older people what would you prioritise (Choose one only)

Priority ranking from most to least

- Publicly funded taxi service (using IPTAS funding structure & taxi vouchers)
- Improvements to footpaths, installation of seats, shading and lighting so that people could walk, use scooters, and other mobility aids
- Community transport
- User pay taxi service
- Public funded transport / bus offering a daily service
- Fuel vouchers for pensioners – to be used with family/friends / neighbours
- Community bus – volunteer driven community bus on a regular time table

What are the factors (common to us all) that influence your decisions about whether to retire and or work in retirement?

- More time for self and family
- Availability of Recreation and Leisure activities
- Cost of Living Pressures (Housing, Utilities, Food, Fuel etc)
- Cost of recreational / holiday or other activities
- Availability of part time work
- Social and mental stimulation associated with part time work
- Change in the work place / technologies / expectations
- Access to financial services , financial planning expertise

What are the challenges or opportunities associated with each of these factors and does this enhance liveability of the town in which you live;

- ❖ Affordability of life in retirement
- ❖ Impact of the GFC on superannuation availability, so need to keep working
- ❖ 10 years of drought have dried up any cash reserves needed for retirement
- ❖ Retire to give back to the community through volunteering and hobbies
- ❖ I am busier in retirement than I was at work
- ❖ Large percentage of the population in farming communities never retire (love work)
- ❖ It is a personal choice to retire
- ❖ Financial aspects of employment
- ❖ Social engagement of work
- ❖ Fulfilment of work vs. retirement

If you wanted to work part time when retired what would be needed to make your former workplace / industry ageing friendly

- ☑ Need for succession planning in any business
- ☑ Drought impacts have increased business debt, eroded farm nest eggs and diminished superannuation funds
- ☑ Employers allowing people to work past the age of 65 years
- ☑ The availability of part time work that is age and task appropriate
- ☑ Workplaces need to be adaptable to suit part time retiree employment
- ☑ Some local retirees help on farm during sowing and harvesting seasons
- ☑ Harness the pool of retirees to tap their skills and expertise
- ☑ Knowledge and engagement of new retirees who are moving into our community
- ☑ Integration of retired skilled professionals into the community (ie skills bank)
- ☑ Opportunity of succession and mentoring a cadet with and a professional retiree
- ☑ Link these skills and expertise into volunteer community roles (ie Ex Bank manager as the Race Club treasurer)