THE PROGRAM OF APPLIANCES FOR DISABLED PEOPLE (PADP)

Organisation:

Coffs Harbour and Bellingen

Local Disability Advisory Committee

Name:

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Date received:

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COFFS HARBOUR AND BELLINGEN LOCAL DISABILITY ADVISORY COMMITTEE

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Submission To:

Legislative Council General Purpose Standing Committee No 2.

INQUIRY INTO THE PROGRAM OF APPLIANCES FOR DISABLED PEOPLE (PADP)

Background

Membership of LDAC comprises people with a disability, carers, service providers and others interested from the community of Coffs Harbour and district.

In recent years the committee has entered into correspondence on a range of issues related to PADP including the availability, supply and demand of aids; their repair, maintenance and replacement; Government funding and financial arrangements; Government expectations of the appropriate use of aids; continence aids' costs.

LDAC is still awaiting responses on some of this correspondence but is convinced that many of the core functions of PADP must be carried out in the local community where possible.

Furthermore, it feels that the Standing Committee should also examine the costs of aids in relation to individual circumstances and financial procedures. (LDAC also notes that some of the issues raised in this submission are also applicable to Home Care Services).

Centralisation of PADP Lodgement Centres

LDAC is concerned about the likely impact of any centralisation of PADP services as mooted in the Standing Committee's paper of June 2008.

Individual needs are frequently highly complex and we perceive that initial assessment for aids must be made at the local community level.

It is noted that services to people in the Coffs Harbour district are currently provided from Lismore and that local residents experience little or no person-to-person contact with decision-makers. It is recommended that a localised single point of contact be established in Coffs Harbour and that assessment and servicing, maintenance, repair and replacement of aids be managed at the local level.

Financial Arrangements

Financial arrangements are often unclear, unwieldy and inequitable. LDAC has concerns about the user-pays scheme in practice. It is not uncommon for people with disabilities to have multiple needs and to be obliged to pay multiple contributions. In this context, the committee has considered a number of confidential case studies indicating that, after payment of contributions, individuals were left with inadequate money to provide for their daily needs.

Again, while there is a review process relating to the cost of aids this does not take into account all the financial and other circumstances facing individuals. LDAC submits that reviews should be carried out at the local community level.

Many people with a disability report that they find the process of complying with bureaucratic requirements difficult and exhausting.

In keeping with recommendations to establish localised services, LDAC proposes the simplification of financial procedures. For example, could the approval of aids be vested in local GP's and other designated local persons and Medicare manage individual claims?

Costs of disability

LDAC emphasises that the costs of disability are significant for many individuals. In this context, individuals are required to pay medication costs associated with their disability, including the costs of medical care over and above medical expenses facing others in the community.

Additional expenses also frequently include transport, Homecare, clothing and special furniture needs. The committee questions whether rising costs should be countered by an increase in the Disability Pension and/or an increase in allowances following individual assessments

Other issues

Meetings have been held at Coffs Harbour and Nambucca with PADP clients and some other issues raised by individuals in the meeting or in correspondence are:-

- Individuals report waiting period for the supply of aids of up to 24 months, though there have been very recent signs of improvement
- In the supply of aids some individuals are required to travel to Sydney which is both challenging and expensive
- The increase in cost to clients of a number of aids.
- The nature and degree of services vary according to the location of PADP centres and there is a need for provision of aids to be more equitable.
- The focus of services varies with the individual's place of residence (e.g. the focus may be on physical disability to the relative neglect of vision impairment).

• There is a need for equipment to be up to date and for this updated equipment to be

readily available.

• The usefulness of PADP administration to maintain a close working relationship

with T.A.D (Technical Aids for Disabled).

· The lack of understanding by individuals to any entitlement to any tax relief or

rebate. (It was also reported that such entitlement may vary between States).

Clients frequently do not have the ability to present a case on paper or follow

prescribed procedures.

• Therapists are frustrated in their efforts to help clients because the programme is

badly funded and administered and over-centralised.

Conclusion

Issues such as the overall adequacy of funding and which individual Government

Department should control the PADP are outside the competence of LDAC.

However the committee stresses that if individual needs are to be properly assessed and

catered for a number of services will need to be improved, simplified and provided at the

local community level.

This is essential in the interests of building a people-centred service delivery. It is also

necessary if our aim in providing aids is to maintain and where possible increase the

independence of individuals

S J Rooth, OAM, JP

Chairman

2nd September 2008

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