



NATIONAL RURAL
HEALTH
ALLIANCE INC.

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Healthy ageing at home more possible – even in the country

Country people have a great reputation for community support and it's no wonder that older people want to stay at home close to their friends as they age in rural communities.

Someone to drop in for a cup of tea or help with transport to a Senior Citizens craft session can be extremely important for people living in small communities. People who have lived all their lives in a small town know these benefits.

The Productivity Commission report released 8 August 2011, *Caring for Older Australians*, makes recommendations and suggests approaches that, if implemented, will give a better deal to country people as they grow older.

The Australian Gateway Agency will combine information services to help people find their way through what has become a complex and almost unfathomable aged care system. Associated aged care assessments will determine care needs and entitlements and lay the foundation for the coordination and arrangement of the mix of care each person will need to enable them to stay at home, including support for their carers, or to choose residential care.

Chair of the National Rural Health Alliance, Jenny May, says this will assist country people who have been in a metropolitan or regional hospital and who need to make decisions at the time of hospital discharge about their immediate future.

“If an older person who is recovering after a hospital procedure is fully informed about what support services they can access when they return home, it will mean that a nursing home is not necessarily their only choice,” Dr May said.

The Alliance welcomes the Productivity Commission's recommendation for flexible funding to provide a range of choices in rural communities.

“Rural Australia faces shortages of doctors, dentists, medical specialists, paramedics, physiotherapists, occupational therapists, social workers and more. This means many communities do not have the full range of professionals that are available in cities; therefore it makes sense to make the best use of the available health professionals in each location to provide both health and aged care.

“Communities want the flexibility for people to choose services to help them stay home if they are able. For example, support with cleaning, shopping and personal care at home may

be easier to provide in a small community if resources are shared by service providers, be they residential aged care or outreach from a health and community service.”

The Productivity Commission has also made the point that where populations are sparse and there are unavoidable and significant variations in needs for aged care beds, supplementary block funding and capital grants may be necessary to keep the services open, as well as mainstream funding.

The proposal is to establish an Aged Care Commission that sets efficient prices for services generally, and that has the added role of recommending to the Government the appropriate subsidies for providing sustainable aged care services – whether in the community or in residential care – for people in rural and remote locations.

The Productivity Commission has recommended additional support for local service managers as well as improved education and training opportunities for nurses and personal carers in rural and remote communities.

“Outside major cities, where the proportion of older people is greater and health outcomes are worse, there is high demand for support with healthy ageing and aged care.

“Effective aged care services close to home are not only good for the people receiving them, but also contribute to rural employment in the fields of catering, maintenance and education services as well as health and aged care workers. They are important to local businesses and to the general sustainability of communities in rural, regional and remote Australia,” Dr May said.

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