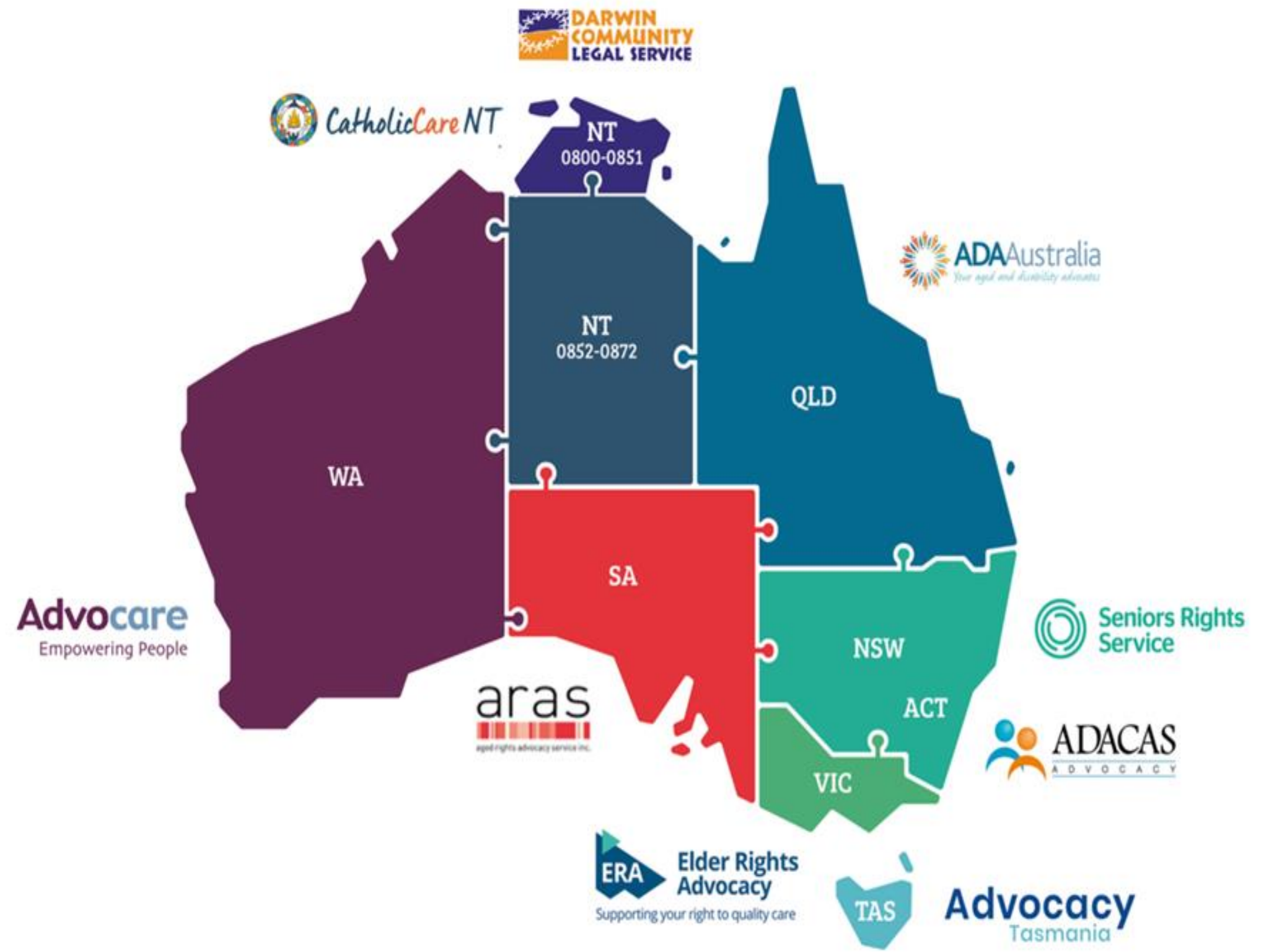




Transport for Ageing in Place

Anne Muldowney, Senior Policy Officer

ACTA National Conference, August 2024



Transport issues in advocacy case work

- a particular area of concern for older people living in the community and in residential aged care
- aged care residents cancelling important health appointments because they cannot afford travel by private means and there is no affordable service to assist
- older people living in rural and remote communities often need to travel long distances for specialist health services or just to shop
- community transport services limited, underfunded and restricted access for people on home care packages and living in residential care
- public transport, community transport, rideshare and taxi services non-existent in some communities
- social and financial disadvantage contribute to concerns in this area, with taxis unaffordable for people on a pension
- increased access to specialist appointments via telehealth may assist in relieving some transport pressures. Requires investment in infrastructure to support the use of telehealth in rural and remote communities and does not address social isolation.

Case study #1

An older person sought aged care advocacy support because of increased transport costs.

Previously accessed funded community transport with a flat rate of co-contribution to travel from their rural location to the city for regular allied health care appointments.

After commencing on a home care package, travel was charged at a per km rate. Each trip cost their package over \$100.

As a rural dweller, they were significantly disadvantaged and began to trade-off transport for other support services at home.

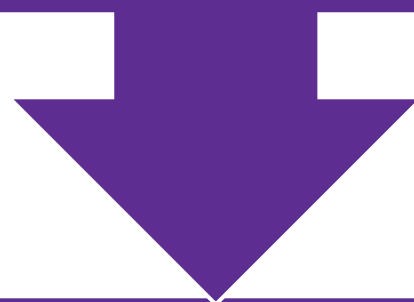
This had a negative impact on their health, and they had a recent unplanned hospital admission.

Applying for a higher-level package purely to fund transport costs.



Case study #2

An older person required transport to attend a social support activity as set out in their care plan. Initially, their Home Care Package funded fuel to enable the older person to drive to the activity. This approach supported the older person to maintain their independence.



Following the release of the revised Home Care Package Program Operational Manual, their provider advised them that fuel was excluded under the Home Care Package Program.

With the support of an advocate the older person referred to the factsheet titled Home Care Packages Program Inclusions and Exclusions – FAQs for Providers, which implied that they could access a fuel card because they lived in a rural region.

However, the provider advised that they could not issue a fuel card as the factsheet also stated that a fuel card can only be considered where there is no access to taxis. As a result, **\$780** of the older person's Home Care Package funds were used to pay for a return trip in a taxi. The same trip would cost approximately **\$100** in fuel.

Case study #3



An older person contacted OPAN about the lack of affordable and accessible transport from residential aged care.

As an electric wheelchair user, they had previously found wheelchair accessible taxis costly, under-resourced and unreliable.

Formerly a frequent user of their local community transport service.

Unaware until after entering residential aged care that providers are not funded for transport and that they were no longer eligible for community transport services.

The residential aged care provider has a wheelchair accessible bus that is seldom used.

The older person has left the residential aged care home only 6 times in the 2 years since admission – for medical appointments and for their spouse's funeral.

“Having a fall is a sentence to social isolation”

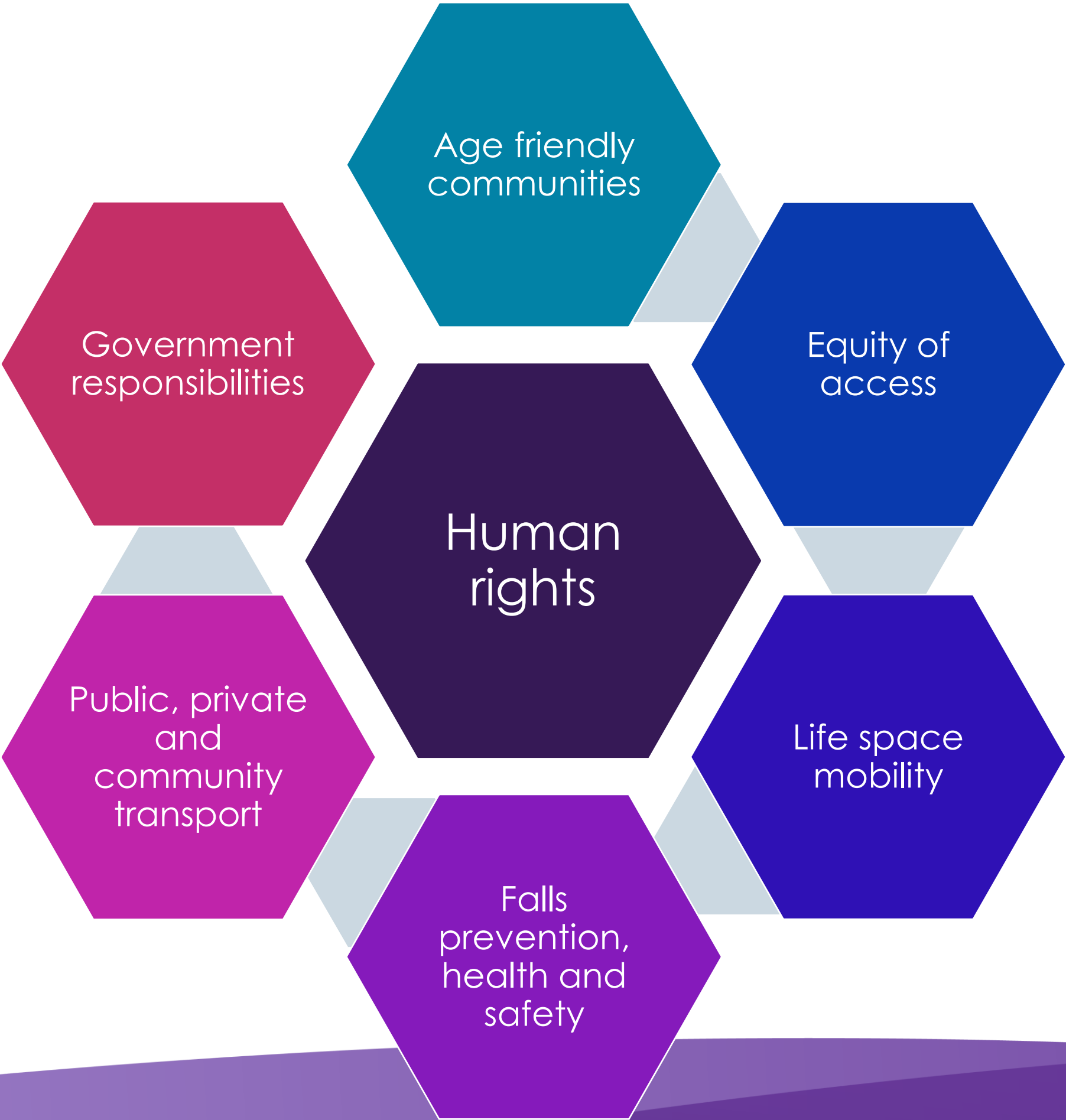
A/Prof Diana Olsberg



Developing OPAN's position statement

- Feedback from older people on OPAN's deinstitutionalisation position statement
- Impacts of driving cessation on older people
- Inequitable access dependent on geographic location and aged care program used
- Providers of residential aged care not required to provide transport
- Presenting issues in National Aged Care Advocacy Program case work
- Implementation of aged care reforms not following Royal Commission recommendations for a single aged care program
- Consultation with members of OPAN's National Older Persons Reference Group
- Human rights to freedom of movement and equal access to the physical environment and to transportation

Outline



Media coverage

☰ 🔍 **THE Senior** 🔔 REGISTER

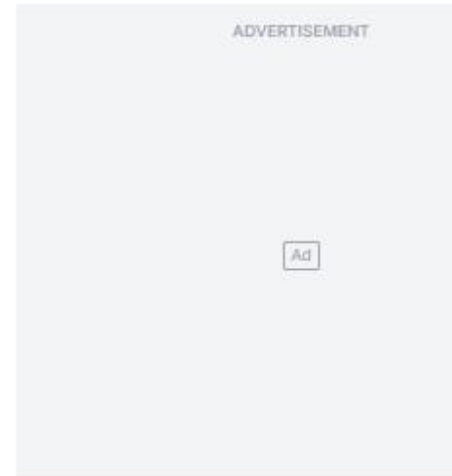
Medically unfit to drive? Poor transport options leave seniors stranded

By Eileen Wood
January 29 2024 - 5:00am

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📷 Mike Condon is struggling to come to terms with having to hang up his car keys. Picture Robyn Condon



📷 Seniors' advocate Val Fell knows how difficult it is to get around when you can no longer drive.

Val, 95, from Wollongong voluntarily gave up her licence following a minor accident after she had a transient ischemic attack (TIA) when she was 87.

"It made a big difference to my life. I was no longer independent. "I live on top of a hill and use a walking frame so I can't walk down.

"I have cab charge vouchers but that only gives me a \$10 discount, so a trip to the doctors costs me \$40.

"I used to say if I can't drive than I will have to move. But I've stuck it out. I'm dependent on my daughter but she's not always available."

Without a licence, you are trapped

If I hadn't handed in my driver's licence, it would have been taken off me. Yes, I gave up my licence, but I did it my way.

The loss and grief associated with relinquishing your licence is the reason I chose to take control. When you give up your licence, you are totally trapped – especially living in a rural area, as I do.

When you are forced to give up your licence, you need to find a team of people who can support you at the times you need to go. You need to find out ways to navigate your freedom. Because this is a new part of your life and you need to move on with living.

National Older Persons Reference Group member Gwenda Darling

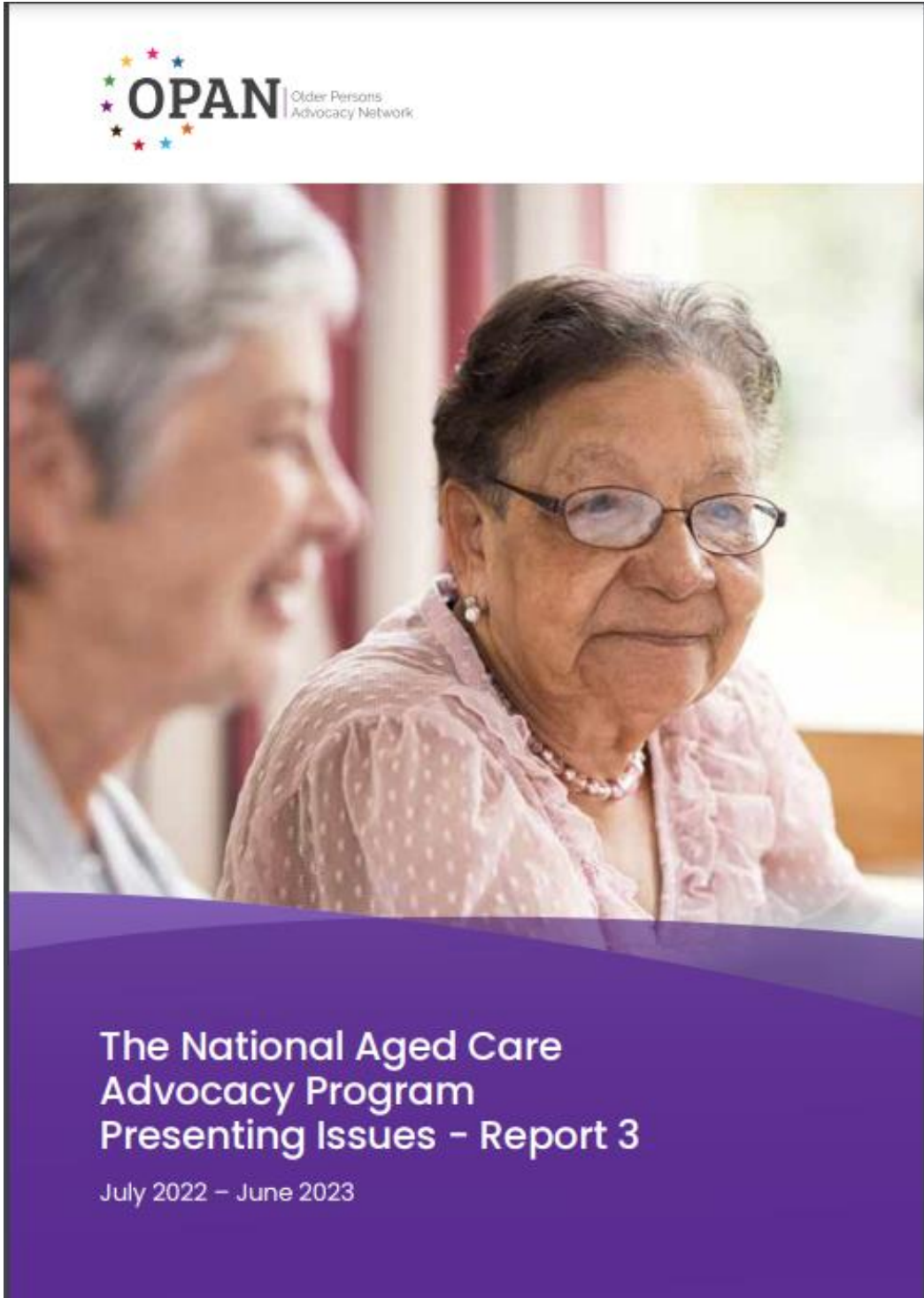


Opportunities for collaboration and joint advocacy

- Cross-promotion between ACTA and OPAN
- Sharing older people's lived experience of lack of transport options with decision-makers
- Referring older people with aged care transport issues to an advocate
- Advocacy on getting the right funding formula for transport in the New Support at Home program
- Ensuring IHACPA pricing recommendations include realistic transport costs
- Addressing regional, rural and remote access and financial disadvantage
- Promoting health and wellbeing and social inclusion outcomes
- Continuing to advocate for access to subsidised transport wherever the older person lives

Affordable, safe and accessible transport is a human right

www.opan.org.au/information/publications-and-reports/





THANK YOU

Call **1800 700 600** to be connected to your local advocate