



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



HOUSE OF REPRESENTATIVES

ADJOURNMENT

Centrelink: Carer Payment

SPEECH

Monday, 6 August 2001

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

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Questioner
Speaker Cox, David, MP

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Mr COX (Kingston) (10.45 pm)—When the Howard government changed the law for assessing eligibility for carer payment, the Labor Party warned that many families that need carer payment would not receive it. Tonight I want to talk about one such case, the Borg family. Their daughter, aged 10, suffers from epilepsy, global delays and an intellectual disability. She has the development age of a three- to four-year-old. Centrelink rejected their application for carer payment. When they sought a review, the decision was affirmed by an authorised review officer, who noted that their daughter suffers a severe multiple disability but does not meet the legislative definition for a 'profoundly disabled child'. The review officer did, however, note that caring for the child is a full-time job.

On appeal, the Social Security Appeals Tribunal made the following findings of fact: the child requires care during the night at least twice between 10.00 p.m. and 6 a.m.; the child is up around 5.30 a.m. or 6 a.m. and is lively, energetic, messy, unable to understand the consequences of her actions, and highly vocal in her preferences; her mother is unable to work outside the home due to care requirements that include assisting her at school, and attending meetings to do with her care; and the child needs assistance with feeding, toileting, dressing, hygiene, bathing, safety, and school work. In short, the physical and time demands of care at home, instead of in an institution, are enormous.

To qualify for a carer payment—in addition to her mother having to get up on two or more occasions between 10.00 p.m. and 6 a.m. each night—the child would have to satisfy two more of the following conditions: receive all food and fluids by tube; have a tracheostomy; use a ventilator for at least eight hours a day; not be able to stand without support; have faecal incontinence day and night; or have a terminal condition requiring palliative care, not active treatment. Her mother points out that, with the exception of faecal incontinence and palliative care, if the child had any of these conditions she would actually be easier to manage.

The tribunal also considered the legislative requirements for carer payment where a person provides constant care for two or more disabled children aged under 16. The Borgs receive carer allowance in relation to their 12-year-old son, who has learning and cognitive difficulties. He requires assistance with his homework on a daily basis, supervision of twice-daily exercises for his gait difficulty, and orthotic treatment; and he receives assistance from a private tutor for two hours a week. The legislation stipulates that the level of care required to care for two children is at least equivalent to that required by one profoundly disabled child. The tribunal considered that both children are disabled but not sufficiently to be within the criteria to receive carer payment. The tribunal therefore affirmed the decision to reject the application for a carer payment on the ground that it was a correct application of the law. The tribunal concluded that, despite the intensive care provided by Mrs Borg, her situation does not come within that very narrowly specified in the legislation.

It is apparent that the legislative requirements for a carer payment have been drawn with a view to administrative simplicity and not to reflect the demands on carers. The rigidity and lack of discretion preclude some people who would require full-time professional care if it were not for the care provided by a parent or carer. This is particularly the case where the disability requires predominantly functional care—for example, those with an episodic impact.

A summary of submissions to the Review of the Measure to Extend Carer Payment Eligibility to Carers of Children with a Profound Disability, undertaken in 1999, shows that the criteria are 'excessive and unduly limiting', 'restrictive', 'not broadly representative' and 'do not adequately recognise the care needs of a variety of disabilities'. One submission suggested that the criteria for two or more children are contradictory. There is no consideration given to the extra functional care requirements of two disabled children; the emphasis is still on the medical care requirement in that both children between them still have to meet three criteria.

The review raised six proposals to refine the eligibility criteria and, to my knowledge, the government has adopted only four. The two proposals not yet adopted are to recognise children who require high level supervision and to allow eligibility to be granted on a discretionary basis. The Borg case demonstrates why

those two recommendations need to be adopted. The Borg family would like to form a group for people in similar circumstances. If you are in a similar situation, phone Peter Borg on (08) 8381 5933 or contact him by email on luella@senet.com.au.

Question resolved in the affirmative.