

16/08/2024

Health Select Committee  
New Zealand Parliament  
PO Box 1473  
Wellington 6140

## **Submission on the Inquiry into the aged care sector's current and future capacity to provide support services for people experiencing neurological cognitive disorders**

Tēnā koutou

Age Concern New Zealand (ACNZ) welcomes the opportunity to submit comments on the Health Committee's Inquiry.

We acknowledge the important role that the aged care sector plays in the welfare of people experiencing neurological cognitive disorders. Our warm thanks go to all those working with care, skill and commitment to look after residents with cognitive disorders in aged care facilities and palliative care, as well as those living within the community.

ACNZ strongly supports the development and resourcing of services for people with neurological cognitive disorders across the care continuum from home and community care to residential care, to palliative care.

ACNZ is committed to seeing a sector that supports 'Ageing in Place' but is strongly influenced by the availability and accessibility of appropriate home and community care services as well as broader issues such as the housing and the built environment, access to Primary Care and access to Carer supports such as respite.

We also strongly support the recommendations in the Dementia Mate Wareware Service Action Plan that was developed and released in 2021.<sup>1</sup> This report presents the views of the sector and those with lived experience of neurological cognitive disorders. It sets out very clearly actions to achieve a system wide, integrated and nationally consistent service. The key areas requiring action in the report remain pertinent to this select committee:

- Current gaps make service improvement urgent
- Access to and availability of services is inequitable

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<sup>1</sup> <https://cdn.alzheimers.org.nz/wp-content/uploads/2021/09/Dementia-Mateware-Action-Plan.pdf>

- The quality of service is variable
- Human rights are ignored or overlooked
- Population growth makes service development urgent
- Dementia/mate wareware is an important hidden player in the wider health system
- Dementia/mate wareware is a major cause of disability and dependency among older adults
- Rising levels of dementia/mate wareware lead to increased costs for the country and for individuals and their family/whānau
- Workforce issues are worsening
- Future community expectations will increase

We also support the proposed action around prevention and diagnosis. The provision of timely and accurate diagnosis and comprehensive management planning is vital for older people with dementia mate wareware and their whānau to live well.

The provision of information about dementia mate wareware, including research about how to prevent or delay onset, is vital for individuals, whānau and communities to understand the cognitive conditions and their impact. Increased health literacy will enable us to create neighbourhoods and services that best meet the needs of those affected by cognitive conditions.

We strongly recommend greater government investment in aged care, home and community support and palliative care for people living with neurological cognitive disorders and their families/whānau. We know there are many competing funding priorities, but healthcare is fundamental to our wellbeing as a nation.

We support asset thresholds being considered as part of the Health Committee's Inquiry. Although the asset thresholds increase each year, they are inadequate when compared with the amount required to live well throughout older age. We recognise the inherent tensions in regard to how aged care is funded. However, the current thresholds impact negatively on the ability of an older partner that is not in care to continue maintaining their home and covering day-to-day living expenses such as rates, insurance, electricity, GP visits, food, and transport

We do not support any lowering of the thresholds and believe they should be raised to reflect current housing and living costs. The almost full payment of an older person in care's superannuation is sufficient for their personal contribution to their care.

We also recognise the resulting hardship for the partner not requiring care when losing their partner's superannuation each fortnight. This would make a substantial difference to their quality of life and standard of living.

We further recommend that the Inquiry recognises the diversity of Aotearoa's New Zealand's population. Service provision and models of care need to reflect the needs of various population groups, including Māori, Pacific Peoples, Asian, Middle Eastern, Latin American, African and Rainbow communities.

The growing number of older New Zealanders, and the associated increase in people with dementia, has been well documented for some time. The impact on our health system, the economy, communities and individuals has likewise been well understood.

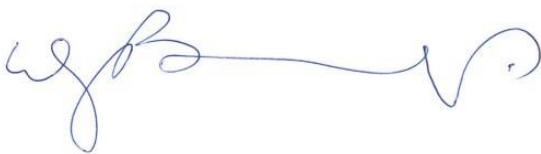
The Dementia Mate Wareware Action Plan has been prepared and made available to successive governments for managing dementia and its impact. These existing plans provide clear steps for government and community organisations to take.

We strongly recommend the Action Plans are approved and funded so that we can all work together to provide effective services for people experiencing neurological cognitive disorders living in the aged care sector and in the community.

Thank you again for the opportunity to provide our submission on the Health Committee's Inquiry into the aged care sector's current and future capacity to provide support services for people experiencing neurological cognitive disorders

As a trusted charity working in local communities throughout Aotearoa New Zealand to support older people, their friends and whānau we have a vital interest in this inquiry and its outcome.

Nāku noa, nā,



Karen Billings-Jensen  
Chief Executive  
Age Concern New Zealand