From: Brian Coogan

To: <u>Aged Care Legislative Reform</u>

Subject: Personal submission from Brian Coogan in WA

Date: Friday, 8 March 2024 4:59:02 PM

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Good afternoon

I deeply regret that systemic computer failures and unforeseen personal issues have blindsided me over the past few weeks, yet I respectfully request that my comments below be taken into consideration in accordance with today's deadline.

Briefly a perspective of my personal situation:

I sustained full and permanent paralysis from the polio virus as a 3yo in Tasmania in 1951. Apart from a mobility allowance granted about 20 years ago, I funded all my personal mobility requirements, including home and vehicle modifications, during 51 years of full time continuous employment between 1965 and 2016- 25 years in the Commonwealth Public Service in Tasmania followed by 26 years in the Perth radio industry.

For many years while still employed, I was drawing down superannuation on medical and hardship grounds to meet my increasing mobility and renovation needs.

Devastated by being ineligible for NDIS by virtue of age discrimination, I simply kept on working until my contract was suddenly terminated at the age of 68. My entire asset base superannuation, investments and property equity - was fully exhausted by the time my Level 3 Aged Care Package commenced two years ago. Unbelievable relief....with dignity restored!

Even so, the existing funding was/is centred around personal services which was cumbersome for my specific needs - mobility and renovations.

While I remain confident that the new Act will address a number of shortcomings in the existing legislation, from the draft personal services appears to be the operative words....whereas mobility products and renovations should also be specifically mentioned rather than implied.

While I gratefully acknowledge the honourable intention of the new Act is to finally focus on individuals * in place of the registered service providers, the generous subsidies paid to the latter will most likelysee the retention of the status quo.

Such cynicism is based on the failure of my initial registered service provider to investigate my complaint of price gouging.....suspected fraudulent activity of accepting a single composite invoice of clients from an associate provider.....unable to extract individual costings.....then declining to examine the invoice for which they were receiving government guaranteed management fees of almost 30%

Furthermore, withholding crucial funds for a pre-approved wheelchair during the nonsensical 70 day exit process was a despicable and humiliating act.

Even the client service manager at my new service provider was replaced at my insistence for failing to make regular contact with me.

* The credible path for achieving the individual priority objective is to empower those suitable individuals, like me, with the option of direct funding under the specific management of integrity and assessment units attached to Commonwealth Health Dept (alternatively, the Productivity Commission) in each capital city and major regional

centres. Moreover, I envisage it would it would substantially reduce the the enormous allocation required from consolidated revenue.

Should there be an opportunity to be involved in any focus or consumer oriented activity on an ongoing basis, I respectfully request to be considered.

With best wishes to you all as this exciting process unfolds.

Kind regards

