

HEALTH AND ENVIRONMENT

Submission to the Health and Environmental Committee

John Morris

20 December 2021

[This Statement follows a witness statement to the Health and Environmental Committee, RSL Bribie Island, Thursday, 9 December 2021]

To Committee Secretary **Email:** hec@parliament.qld.gov.au
 Health and Environment Committee
 Parliament House
 George Street
 Brisbane Qld 4000

- Author’s name and signature **John Morris** [Signature page attached]
- Submission **Personal**
- Mailing address [REDACTED]
- Email [REDACTED]
- Telephone number. [REDACTED]

Bio: For the last 6 years I have lived fulltime in an electric wheelchair due to Inclusion Body Myositis. This disease has affected every muscle cell in my body and is inexorably removing all my strength. With a carer I can live well enough in my own home but could do a lot more for myself if my house allowed for it.

I have a wife who retired to care for me, four adult children and nine grandchildren, all of whom give me a reason to survive. I worked as a professional in geology, the environment and agriculture in Australia and overseas. I have always contributed socially to running community and sporting organisations and in competing and coaching at various levels and have always kept very fit.

But everything changes when your health is compromised. **This is new and it brings with it levels of unfairness and discrimination I have never known before.** I therefore intend to make some brief comments on the state of health care in Queensland in so far as it affects me.

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Construction Industry

- 1 I proposed a house build which would have allowed me to live without restriction. “If restrictions are removed, the disability is removed!” Unfortunately, my experience with **building in Queensland is that I was scammed**. Others have had the same experience. The following is well documented.

Basically, the builder;

- ignores hours of discussion, signed plans and pages of emailed assurances,
- buries the contract and gets Professional Certifiers or the City Council to approve a new Plan. No-one asks for the signed copy!
- ignores the rules and legal rights of the contract,
- ignores any protestations during the build; and
- demands the final payment before the building is finished.

Not knowing if the builder will return; you

- enlist the help of a lawyer,
- contact QBCC who tell you to seek help from QCAT.
- employ a building inspector.
- attend the Compulsory Conference whilst the builder does not bother.

Under QCAT Rules the process should stop there but a year later, without accommodation and after paying legal services you go to Court, where they encourage non-representation.

The member then,

- bullies anyone who does not act like a lawyer,
- asks the builder if the house is suitable for a “**normal**” person?
- allows an intolerable amount of direct abuse by the defendant.
- tells the builder to get on and finish the house.
- tells the owner to pay the builder plus interest for 12 months.

Of course, the builder never came back. The QBCC finally did an inspection but did not follow-up because “too much time had passed,” waiting for Court time! Who assigns these time limits that the builders rely on, without allowable exemptions?!

Every point on the QCAT Report is disputed. I found QBCC to be uncommunicative and without purpose and QCAT overbearing and in my case discriminatory.

All of this whilst coming to grips with the biggest health crisis in your life. In two years, I can still only access three rooms and the ensuite. I still need suitable access to a washbasin, toilet, laundry and shower and I need to be able to vacate the house in an emergency.

Wheelchairs in general

Grab an electric wheelchair, tape your elbows to the armrests and legs to the footrests and see how far you get? Wheelchair access is restricted everywhere including

- hotels, hospitals, shops, clubs and professional stores,
- reachable toileting facilities ; door, flush button, paper rolls, air dryer, shelf.
- many medical businesses and surgeries.
- Shop Pay Stations or Counters are ‘something else’. A wall!

Aged Care Packages

I am forever grateful for the assistance given through my **Level 4 Aged Care Package** because the amount I estimated for retirement is never going to be enough now. But there is one major flaw and that concerns the way Package Funds are dispensed.

A Provider states that there is a government policy that “anything purchased with Package Funds has to be approved by an OT.” This Policy applies to new equipment and also,

- articles that wear out and need to be replaced from time to time!
- two strips of gel for wheelchair armrests held on with Velcro, \$700 including a Providers 10% fee for what?
- the extra cost of anything that has some medical connotation,
- the rules, laws, and procedures that increase the cost of directly related health services and articles to a ridiculous extent at times.

A Provider asks; “Why are you worried about hiring another OT? It’s not your money”.

- But it is!
- I contributed to it. I need it. I will not waste it!

A replacement cushion was requested after 7 years of continual use day and night. An OT assessment was required by the Provider but there was

- no check for pressure points.
- no advice.
- no measurements for cushion size.
- an accident due to the OT not attaching the trial cushion.
- Cost; \$770, 18 months ago.
- No report and no cushion yet.

A Physio measured my legs for compression stockings:

- Wrong type, wrong pressure rating and cannot be sent back.
- Job redone by an OT (Additional \$215).

Lymphodema Massages are required. The Provider organised 18 in 9 months at \$200 per visit. After some permanent damage occurred this was discontinued but the lymphodema now requires even more and immediate attention. Where do you turn?

My Retirement Fund was never meant to absorb this!

The problems are far reaching:

- I will require a new modified vehicle,
- I will have continuing home maintenance; and
- My wife will not be able to continue as a carer indefinitely.

Two persons are required to use a hoist so that will double my monthly account from about \$3,276 to \$4,462. That will cover 3 showers per week, fitting compression stockings each day and 1 lawn-mow per month. This is more than I receive so something will have to break!

Why do so many commit suicide? One definition of panic is that “a person gets anxious when the brain determines that the body is at risk.” I attempted to talk to a GP about ‘panic’ and he just said, “You know it is all in the ‘mind’ don’t you?” Well, no, I did not know!

I asked the Provider for someone with Floor Hoist experience when I could not stand after a hospital stay. There were no staff with training over a year ago and there still are none.

In all sincerity the money is being ‘frittered’ away.

- Legislative changes to allow for transparency are not being implemented.
- Providers should have a list of Fees up-front for comparison and
- the categories should be properly stated. Not happening!
- Personal Accounts should be accessible at any time as with Bank Statements.
- the ‘so-called’ Statements are generally up to 7 weeks behind and the format makes costs impossible to check.
- Why is there is a 10% Fee on all purchases? There is no “duty of care” between the Provider and the Retailer!
- Why is there an insistence on the Provider purchasing everything when it leads to extra costs and errors on orders?
- Why must I resign my Agreement every year? Why not simply sign an addendum? Fifty pages of legalese to check with the costs of printing and two-way postage.
- Why pay to vet normal businesses? Charges around \$350 if the Provider does not have a current vendor approval!
- There are many, many, issues. It seems the systems are well documented but there is little over-sight and compliance is compromised. Possibly, there are just too many new operators with government money profits in mind!

I spend my life in this Electric Wheelchair. I rely on it. That means my life depends on it! These chairs cannot be hired.

A concerted effort is required to get more than half the available funding to where it is needed and there is a need to differentiate between Disability and Aged!

Thank-you for the opportunity to make these issues better known.

John Morris