

# CONSULTATION RESPONSE



**Allied Health  
Professions  
Australia**

## ACCC Interested Party Consultation Financial Services Council AA1000494 – Submission

### May 2020

#### Response

Allied Health Professions Australia (AHPA) welcomes the opportunity to comment on the Financial Services Council application for authorisation AA1000494 – life insurance commitment. AHPA commends the granting of the interim order and generally supports its provisions. However, should this determination become a permanent authorisation, increased clarity around eligibility is needed.

We note that the interim authorisation states:

*Relevant healthcare workers include, but will not be limited to, individuals working in any capacity in Australia in any of the following roles:*

- *doctors, nurses and all hospital workers;*
- *ambulance workers and paramedics;*
- *people working at a GP surgery or clinic;*
- *workers at a COVID-19 testing site;*
- *people providing mental healthcare services;*
- *workers developing a COVID-19 vaccine or treatment;*
- *pharmacists;*
- *police;*
- *aged care workers; and*
- *volunteers helping to support people with COVID-19*

29 professions, more than 130,000 collective members and representing one third of the health workforce covering health, disability, veterans, community services and more.

We are concerned that there is no mention of those working in **disability services** who are required to provide ongoing treatment and support, both in the homes and group homes, of individuals with disabilities. It is known that many Australians living with disability are at higher risk of contracting COVID19 and due to those disabilities may not be able to practice effective self-isolation or infection control. (see Attachment 1 ). Allied health professionals make a up a substantial proportion of the disability workforce.

It is anticipated that should there be outbreaks of COVID19 some recovering patients may be sent home to be managed by **community-based health professionals** such as Respiratory Physiotherapists and Speech Pathologists (post intubation) who are not attached to a hospital or medical clinic. AHPA submits that the item nominating GP surgeries or clinics should be expanded to include such entities as Aboriginal Community Controlled Medical Services (ACCMS), the RFDS, Nurse Practitioner clinics and any other primary care practices which may be engaged in the detection and / or management of persons diagnosed with COVID19.

AHPA requests these changes to ensure that should the occasion arise relevant health care workers are not put in a position of having to justify themselves to be considered under this commitment.

Further, we are somewhat surprised that 'Police' are listed under healthcare workers. We do not suggest that police should not be covered but should be listed in a separate category as should 'Volunteers'.

## About Allied Health Professions Australia

*Allied Health Professions Australia (AHPA) is a collegiate body consisting of 19 national allied health association members and a further 10 affiliate members with close links to the allied health sector. AHPA's members collectively represent over 130,000 allied health professionals, who provide services within health in all settings, NDIS, DVA, education, justice, community services sectors and more in Australia.*



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## Information for Disability Support Providers and Workers

### Supporting people with intellectual or developmental disability to access health care during the COVID-19 pandemic

This fact sheet provides disability support providers and workers with information to help them respond to the health care needs of people with intellectual or developmental disability during the COVID-19 pandemic.

#### Are people with intellectual or developmental disability at greater risk of COVID-19?

- Some people with intellectual or developmental disability with specific risk factors may be at greater risk of serious illness due to COVID-19, such as if they:
  - have existing medical conditions and co-morbidities
  - have a suppressed immune system
  - are an Aboriginal or Torres Strait Islander person aged over 50 with one or more medical conditions.
- Some people with intellectual or developmental disability may have difficulty understanding and adhering to social distancing, handwashing and other risk reduction strategies, which may increase their risk of acquiring COVID-19.
- Some people with intellectual or developmental disability may not show or be able to communicate early COVID-19 symptoms because of their disability or medical treatments.
  - For example, cough and fever may not present as early signs of COVID-19 or the person may have difficulty communicating symptoms such as a sore throat.

#### What role can disability support providers and workers play?

Disability support providers and workers are essential to the health and wellbeing of many people with intellectual or developmental disability during the COVID-19 pandemic. Disability support providers and workers should:

- assist the person to prevent, test and seek treatment for COVID-19 where necessary
- support the person to understand and make decisions based on advice from the Australian and state and territory governments
- support the person to access their usual health care, including their GP and any specialists whom they see regularly
- support the person to maintain physical and mental health and wellbeing during the pandemic (e.g. through exercise, activities and reducing loneliness).

#### What actions should disability support providers and workers take?

Disability support providers and workers should take steps to ensure that they have the resources they need to support the person during the pandemic.

- Provide information about COVID-19 to the person with disability in a format which is accessible and understandable to them.

- Ensure that the person's health care plans are up to date and available in the person's medical records. This should include:
  - Information about the person's communication needs
  - names and contact details of those involved in the person's health care (including primary care providers and any specialists), and those involved in health care decisions (including details of next of kin).
  - a complete medical history, including information about their disability, pre-existing health issues (especially respiratory and heart conditions) and current medications
  - a current [advanced care directive or plan](#) if appropriate
  - the person's mental health and/or Positive Behaviour Support plan, if they have one
- Assist the person to keep their vaccinations for influenza and pneumonia up to date.
- Have a plan for alternative support for the person with disability in case you or other carers develop COVID-19 symptoms and are unable to provide your usual support.
- Ensure you are aware of the [latest government advice](#) about COVID-19.
- Familiarise yourself with infection control procedures and comply with measures to lower risks of acquiring and transmitting COVID-19. [COVID-19 infection control training](#) is available on the Australian Government Department of Health's website.
- Ensure you know when and how to access help related to everyday health issues, as well as COVID-19 symptoms.
- Disability providers should keep up to date and comply with all relevant provider responsibilities related to the pandemic. NDIS providers should refer to information provided by the [NDIS Quality and Safeguards Commission](#).

## How can disability support providers and workers support access to health care?

- Do not postpone health care. Continue treatments for chronic health conditions and seek treatment as you usually would for other health concerns. In the event of an emergency, follow usual protocols and seek emergency medical care.
- Make sure the person's health care plan is available to health care providers. Upload details to My Health Record where possible.
- Talk to usual health care providers about how and when they are offering services (e.g. home visits, telehealth or face to face consultations).
- Monitor the person's mental wellbeing and behaviour for impacts of the pandemic.
- Support adults with intellectual or developmental disability to make their own medical decisions to the greatest extent possible. If the person is unable to consent, substitute consent laws should be followed.
- Note: Isolating an NDIS participant based on medical advice that is consistent with the Commonwealth Chief Medical Officer, and/or preventing that person from public gatherings that are currently limited, is NOT considered an NDIS Commission regulated restrictive practice. Further, this does not limit a person's right to access disability-related supports. See the [NDIS guidance](#) on this matter.

## What if a disability worker or the person with disability develops symptoms of COVID-19?

- If you suspect the person with disability may have COVID-19:
  - help them or their carer to call the National Coronavirus Helpline on 1800 020 080 or call on their behalf
  - seek advice on testing, treatment and how to reduce the risk of passing the virus on to other people.

- Disability workers should not attend work if they have a fever or symptoms of a respiratory illness. If you think you may have COVID-19, call the National Coronavirus Helpline on 1800 020 080.

## Where can I get more information?

For the latest health advice, information and resources on the COVID-19 pandemic, go to [www.health.gov.au](http://www.health.gov.au). For additional information specific to people with disability during the COVID-19 pandemic, go to <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/advice-for-people-at-risk-of-coronavirus-covid-19/coronavirus-covid-19-advice-for-people-with-disability>.

The [Disability Information Helpline](#) on 1800 643 787 can provide people with disability and their families, carers and support workers and services with information and assistance related to COVID-19. The Helpline is available Monday to Friday 8am to 8pm (AEST) and Saturday to Sunday 9am to 7pm (AEST). It is not available on national public holidays.

This fact sheet was prepared by an [Intellectual and Developmental Disability Health Working Group](#) convened by 3DN, UNSW Sydney