



Government of South Australia

Department for Communities
and Social Inclusion

WE CARE

OUR PLAN FOR SOUTH AUSTRALIAN CARERS

Implementing the *South Australian Carers Recognition Act 2005* and recommendations from its review



Contents

- Background.....3**
- Who are carers?3
- Why do we need this plan?.....3
 - Legislative context.....5
 - Strategic context.....6
- Who does this plan apply to?.....6
- How will this plan help?7
- How will this plan be implemented?.....8
- What are our priorities for action?9**
- Priority 1: Government is an employer of choice for carers 10
- Priority 2: Government and Government -funded services are addressing the social, emotional and physical needs of carers..... 11
- Priority 3: Carers feel empowered to make choices within their caring role, and their choices are respected..... 12
- Priority 4: Strategies are in place to address the specific needs of Aboriginal carers 13
- Priority 5: Strategies are in place to address the specific needs of young carers 14
- Priority 6: Strategies are in place to address the specific needs of carers from culturally and linguistically diverse (CALD) backgrounds..... 15
- Priority 7: Strategies are in place to support carers in their own right, throughout the caring role and after their transition from the caring role 16
- Definitions17**
- Contact17**
- Appendix 1: *South Australian Carers Recognition Act 2005*.....18**
- Appendix 2: *Recommendations from the review of the South Australian Carers Recognition Act 2005*24**

Background

The *South Australian Carers Recognition Act 2005* (the Act) was passed on 1 December 2005. It acknowledges the valuable role of unpaid carers in supporting those they care for within the community. The Act includes the *Carers Charter* which sets out principles to guide State Government agencies in their interactions with carers.

The *SA Carers Policy* was developed in 2006. Its aim was to give direction to government agencies in providing services where carers are involved, and to ensure that carers are involved in decisions about those they care for, and encouraged to identify their own individual needs.

In 2010-11, a formal review was undertaken into the operation and effectiveness of the Act. A report on the review's findings was tabled in Parliament in 2012, alongside a commitment to implement its recommendations through policy. Whilst acknowledging achievements had been made since the inception of the Act, the report also called for changes to the way agencies recognise and interact with carers in future.

This document encapsulates the State Government's commitment to progress these changes whilst continuing to meet the obligations of the Act. It has been prepared in close consultation with carer representatives and applicable government agencies.

Who are carers?

Carers are people who provide unpaid ongoing support to family or friends with a disability, age related frailty or chronic illness, including mental illness. They can be partners, parents, children, friends, neighbours or colleagues who provide assistance with personal care, lifting, mobility, administering medication, banking, shopping or housework.

Carers come from all walks of life, all cultures and can be of any age. Carers rarely choose to become carers, yet many feel they are doing what anyone else would do in the same situation. One in eight South Australians is a carer, so chances are we all know a carer.

Why do we need this plan?

Anyone can become a carer at any time. It is a role that can come unexpectedly out of a crisis, or gradually as a loved one's care needs increase over time. Being a carer can come with a complex mix of emotions. It can be both rewarding and frustrating. It can be costly in terms of life opportunities, financial security and health.

The number of Australians providing unpaid care is increasing. In 2010, the replacement cost of the care provided by the 2.9 million carers in Australia (13.1% of the population) was roughly \$40.9 billion, up from \$30.5 billion in 2005¹. This indicates the extent to which the contribution of carers is an integral part of the health and community care systems in Australia.

The caring role has a range of impacts. Many carers describe caring as a rewarding experience, providing emotional satisfaction and strengthening relationships. However, there can also be significant challenges. Research shows that for most carers it comes at a significant cost to their own health and wellbeing. Carers have the lowest collective wellbeing of any group surveyed in the Australian Unity Wellbeing Index², and are almost twice as likely as non-carers to be in poor physical health. Carers are also significantly more likely to be unemployed, go through financial hardship, experience mental illness or have a disability themselves.

Over the coming decades, the number of people requiring care and the demand for carers to provide it are likely to grow. A number of factors contribute to this trend:

- As the population is ageing and life expectancies are increasing, the rates of age related disability, frailty and illness are also increasing.
- Ageing in the home, rather than institutional care, is becoming the preferred option of many people, as is home and community-based support for people with disabilities.
- Better technology and equipment, such as mobility aids, wireless communication and accessible public transport, enable people to live at home longer.
- Higher rates of relationship breakdown and single person households are increasing the pressure on extended family members and friends to provide unpaid care.
- The increasing need for austerity and budget tightening at all levels of government, alongside rising costs in the public health and community care systems, are increasing the reliance on self-funded or familial care.
- Decreasing levels of volunteering and donations to community organisations are increasing the demand on family and friends to provide unpaid carers.

Governments across Australia are increasingly aware of the social and economic imperatives associated with informal caring. This increasing awareness is reflected in the range of Carer Recognition legislation being passed. In 2005, South Australia was the second state after Western Australia in 2004 to pass such legislation. All states and territories, with the exception of Tasmania and the Australian Capital Territory, now have carer legislation. The National Carer Recognition Act was passed in 2010.

¹ Access Economics (2010): The Economic Value of Informal Care in 2010

² Australian Centre on Quality of Life (2007): Australian Unity Wellbeing Survey 17.1: The Wellbeing of Australians – Carer Health and Wellbeing

Legislative context

The South Australian *Carers Recognition Act 2005* (the Act) provides a legal framework for SA Government departments and government-funded organisations to review the way in which they provide services to carers and recognise them as partners in the provision of care. Carers must be consulted in the planning, delivery and review of government and government-funded services that impact on carers. The *SA Carers Charter* is enshrined within the Act and sets out seven principles that must guide services for carers:

1. Carers have choices within their caring role.
2. Carers' health and well-being are critical to the community.
3. Carers play a critical role in maintaining the fabric of society.
4. Service providers work in partnership with carers.
5. Carers in Aboriginal and Torres Strait Islander communities need specific consideration.
6. All children and young people have the right to enjoy life and reach their potential.
7. Resources are available to provide timely, appropriate and adequate assistance to carers.

Since the inception of the Act, a lot has been achieved in increasing recognition of South Australian carers. However, a review of the Act's operation and effectiveness undertaken in 2010-11 found that more needs to be done to ensure that recognition makes a tangible difference to the lives of carers. Recommendations put forward include:

- improving recognition of, and assistance for, government employees with caring responsibilities
- increasing consultation with carers in the development of policies and programs that affect them
- raising awareness of carers and the Act amongst employees of government and funded organisations
- strengthening accountability of agencies for their consideration and treatment of carers
- providing complaint mechanisms for carers in relation to breaches of the Act
- improving assistance to carer groups with specific needs, including Aboriginal carers, young carers, carers from culturally and linguistically diverse backgrounds, and carers transitioning from the caring role.

Strategic context

This plan aligns with a number of the strategic priorities of the South Australian Government. Whilst it will be implemented under the Act and reflect the recommendations from its review, it forms part of a broader agenda which aims to build a more prosperous and inclusive future by balancing our economic, social and environmental aspirations in a way that improves our overall wellbeing.

South Australia's Strategic Plan (SASP)

The SASP guides individuals, community organisations, governments and businesses to secure the wellbeing of all South Australians through 100 measurable targets. Carers' needs and issues are implicit in a number of targets in the following areas:

- Improving wellbeing
- Building communities
- Expanding opportunity.

South Australian Government Seven Strategic Priorities

The seven strategic priorities aim to focus the efforts and drive the work of government. This plan contributes to two of the priorities:

- Safe communities, healthy neighbourhoods
- Every chance for every child.

Who does this plan apply to?

This plan applies to South Australian Government and Government-funded organisations, as required under the Act. The Act obligates agencies, their officers, employees or agents to:

- have an awareness and understanding of the Carers Charter and take action to reflect the principles of the charter in the provision of the relevant services of that organisation
- consult with carers or persons or bodies that represent carers in policy or program development and strategic or operational planning.



The Act further requires applicable Government agencies to report compliance or non-compliance with the Act in their annual reports. They are:

- The Department for Communities and Social Inclusion (DCSI)
- The Department for Health and Ageing (SA Health)
- The Department for Education and Child Development (DECD)
- The Department of Further Education, Employment, Science and Technology (DFEEST) and TAFE SA
- The Department of Planning, Transport and Infrastructure (DPTI)
- South Australia Police (SAPOL).

In the event that regulations are made for the purposes of the Act, agencies are further required to comply with these regulations.

This plan complements the obligations imposed by the Act. It acknowledges that different agencies interact with carers in different capacities. Therefore, it is not expected that individual agencies can take action in relation to every priority included in this plan.

How will this plan help?

This plan focuses on the needs of carers in their own right. This distinguishes it from other plans, frameworks and policies that may impact on carers but focus on the person receiving care.

The plan aims to ensure that the public sector is informed and responsive to the issues and needs of carers in our State, including carers who interact with government services and carers who are government employees. It aims to achieve this by:

- improving recognition of carers by government and funded organisations and their employees
- identifying carers as service recipients and employees with caring responsibilities
- strengthening involvement of carers in policy and program development
- supporting carers in their interactions with government and funded organisations
- improving assistance to Aboriginal carers, young carers, carers from culturally and linguistically diverse backgrounds and carers transitioning from the caring role.

How will this plan be implemented?

This plan will be implemented through seven priorities with four outcomes each. This will enable agencies to centre their efforts on those areas most relevant to their respective business. Agencies are encouraged to identify additional outcomes to reflect any action affecting carers.

In previous years, agencies were asked to report annually through their annual reports. They were also asked to submit reports to the Office for Carers (OFC) in DCSI to be collated in an annual progress report for tabling in Parliament. The review of the Act found this reporting mechanism to be onerous and largely ineffective at identifying practical achievements. Questions were also raised about the need to maintain two separate reporting processes.

In future, the only formal reporting process will be that applicable agencies report compliance or non-compliance with the Act through their annual reports. Information towards an annual progress report to Parliament will be gathered through less formal means which focus on promoting good practice:

- Agencies will identify their own actions for applicable priorities and outcomes. They will be responsible to monitor their own performance. Self-assessment tools will be made available; however, their use is discretionary.
- On an annual basis, OFC will collate information from all agencies in the form of a good practice report card. It is envisaged that its format will allow agencies to use the same information for their annual reports.
- OFC will provide advice on best practice in relation to carers. It will develop and disseminate information resources on relevant topics.
- OFC will promote good practice and key achievements by individual agencies across government, and, where appropriate, outside of government, for example through the SA Government carers website.

What are our priorities for action?

The following seven priorities, as well as the outcomes listed under each priority, draw on the 23 recommendations from the review of the Act. Elements of the Act and Carers Charter not addressed in the review's recommendations, such as specific strategies for young carers, are also included. This structure is provided to guide agencies in identifying and documenting their own actions regarding carers.

Priority 1

Government is an employer of choice for carers.

Priority 2

Government and Government-funded services are addressing the social, emotional and physical needs of carers.

Priority 3

Carers feel empowered to make choices within their caring role, and their choices are respected.

Priority 4

Strategies are in place to address the specific needs of Aboriginal carers.

Priority 5

Strategies are in place to address the specific needs of young carers.

Priority 6

Strategies are in place to address the specific needs of carers from culturally and linguistically diverse (CALD) backgrounds.

Priority 7

Strategies are in place to support former carers during and after their transition from the caring role.

Priority 1: Government is an employer of choice for carers

Outcome 1

Employees with caring responsibilities are consulted in the development of human resource policy.

Outcome 2

Employees with caring responsibilities are recognised and supported through human resource policy.

Outcome 3

Flexible work arrangements and leave provisions are assisting employees with caring responsibilities to balance working and caring.

Outcome 4

Employees and managers are informed about carer-friendly policies and entitlements and about external assistance available to carers.

Why is this important?

The proportion of employees with caring responsibilities is growing, and many will struggle to maintain employment due to the high demands of the caring role. There will be increasing pressure on employers to respond to this trend and support staff, and there are many things that can be done to enable carers to remain productive employees. There is good evidence that the right support in the workplace will benefit both employee and employer through:

- reduced staff turnover, lower absenteeism and sickness
- higher rates of return on investment on skilled employees
- the availability of a larger, more diverse labour pool
- improved staff morale and loyalty
- reduced levels of employee stress
- enhanced corporate image.

Priority 2: Government and Government-funded services are addressing the social, emotional and physical needs of carers

Outcome 1

Carers have input into the development and review of programs and services that affect them.

Outcome 2

Government agencies and their employees are aware of the specific needs of individual carers.

Outcome 3

Services provided to the public accommodate the specific needs of individual carers.

Outcome 4

Services provided to the public are accessible locally and able to adapt to the needs of local communities.

Why is this important?

Carers' needs are as complex as their caring situations and are impacted upon by many factors, such as the kind of care they are providing and the availability of other support. They have needs associated with their own health and well-being as well as those relating to the person they care for.

For carers living in remote and rural parts of South Australia, there are particular difficulties relating to distance and the limited availability of other kinds of personal, community and volunteer support. Other barriers may exist for people who feel that services provided do not reflect or understand their culture and their caring circumstances. They may feel uncomfortable about using existing support services or there may be none available that meet their needs. In supporting carers and considering their needs, service providers need to identify carers and develop ways of supporting them, whatever their caring situation.

Priority 3: Carers feel empowered to make choices within their caring role, and their choices are respected

Outcome 1

Carers are included in the planning and provision of supports for the person cared for.

Outcome 2

Carers have choices about how they access government services and programs.

Outcome 3

Carers have the information and resources necessary to make choices about the care they provide and the supports they receive.

Outcome 4

Carers have an opportunity to provide feedback about programs and services that affect them.

Why is this important?

Becoming a carer usually happens unexpectedly, and many carers are not given a choice whether or not to take on the caring role. This can have a profound impact on how carers view their circumstances and whether or not they seek support. Initially, many carers won't know what to expect from the caring role, what supports are available and how to access them.

Therefore it is vital that carers are given choices about their caring role, the level of care they have the capacity to provide, and the types of supports most helpful to them. In particular, carers need alternative options for themselves and the person they care for, and timely and specific information about what is available locally.

Service providers should make sure that carers' wishes are understood and considered from the outset. Agencies need to take into account a carer's desire and ability to take on caring responsibilities, emotional and financial resources, and their location in relation to the services they need.

Priority 4: Strategies are in place to address the specific needs of Aboriginal carers

Outcome 1

Aboriginal carers are consulted in culturally appropriate ways in the development and review of policies and services that affect them.

Outcome 2

Aboriginal carers' specific needs inform the development and provision of services.

Outcome 3

Aboriginal carers are supported in the workplace to balance working and caring responsibilities.

Outcome 4

Supports are available to Aboriginal carers locally in their communities.

Why is this important?

Whilst all cultural groups have traditions and norms that influence the way people with an illness or disability are cared for, there are issues that are unique to Aboriginal people as the first people of Australia. Many of these issues arise from a history of dispossession, discrimination, and forced displacement from land and culture.

Within Aboriginal families and communities, kinship ties, responsibilities and obligations place a strong emphasis on sharing and mutual support. The Australian Bureau of Statistics shows statistical differences between Aboriginal and non-Aboriginal carers and care arrangements. These differences highlight the need for specific consideration to be given to Aboriginal carers in resource allocation, planning, location and delivery of services:

- Aboriginal carers are more likely to live in rural or remote areas and on low incomes.
- Aboriginal carers are more likely to be young carers (under 25) and care for more than one person. They are also more likely to need assistance for their own care needs.
- Aboriginal people with a disability, age related frailty or chronic illness are more likely to have their personal care provided by family members as opposed to paid professionals.
- Aboriginal people are more likely to be exposed to health risk factors, and, as a consequence, are more likely to experience poor health, including chronic or mental illness. They are therefore more likely to need care.

Priority 5: Strategies are in place to address the specific needs of young carers

Outcome 1

Young carers know where to go for advice and support, and where to provide feedback about services received.

Outcome 2

Young carers are identified and supported where they are most likely to come in contact with government agencies, i.e. educational institutions, disability and health services.

Outcome 3

Young carers are supported during times of transition, for example, when moving from school to further education or work.

Outcome 4

Young carers have access to suitable and affordable transport for themselves and the person receiving care.

Why is this important?

In recent years, there has been an increased awareness of the significant number of children and young people who provide unpaid care. Often in single parent families, children or young people take on significant caring responsibilities in the absence of other family and community support. They form a hidden group of carers, and their role has a significant impact on their social, educational, emotional and health needs, and on their future life opportunities. On average, there are three young carers in every classroom.

The young carers most at risk are those caring for sole parents. Young people in these situations are often caring on their own with little or no help.

For those working in the education, health or disability sectors, or for agencies employing young people, it is important to know how to identify and appropriately support young carers, to enable them to live a meaningful life outside of their caring role.

Priority 6: Strategies are in place to address the specific needs of carers from culturally and linguistically diverse (CALD) backgrounds

Outcome 1

CALD carers are consulted in the development and review of policies and services that affect them.

Outcome 2

Services affecting carers accommodate diverse cultural norms and practices surrounding the caring role.

Outcome 3

Hidden CALD carers are identified and supported by government agencies providing services that affect carers.

Outcome 4

Interpreting assistance and multilingual information is available to CALD carers in their interactions with government.

Why is this important?

One in five South Australians was born overseas. Many more are growing up in families and communities with diverse foreign languages, cultural norms and traditions. These factors influence the way carers and extended

families provide care to people with an illness or disability. They also influence expectations and responses of service providers. CALD carers do not access services or identify themselves as carers at a rate proportional to their numbers in the community. This is particularly the case for carers of emerging CALD communities, such as Congolese, Sudanese, Liberian, Burmese and Afghan.

Common issues of CALD carers include:

- different interpretation or lack of awareness of the term “carer” and available supports
- not being identified as a carer by customer service staff and reduced uptake of carer payments, benefits and concessions
- reluctance to seek out, access and complain about government services, due to language barriers, different expectations, and mistrust in government agencies

- 
- higher rates of trauma and poor health, particularly amongst people from developing countries.

Priority 7: Strategies are in place to support carers in their own right, throughout the caring role and after their transition from the caring role

Outcome 1

Services directly targeting carers, as opposed to the person receiving care, are available to carers.

Outcome 2

Service agreements for carer services enable funded organisations to provide support to former carers as they transition from the caring role.

Outcome 3

Information materials about carers acknowledge current and former carers.

Outcome 4

Employees of government agencies that employ or provide services to carers are aware of the needs of current and former carers.

Why is this important?

Carers have needs associated with their own health and wellbeing as well as those relating to the person they care for. Therefore it is important to consider how to support carers in their own right, not as an extension of the person they care for. It is also important to recognise that carers often require extended assistance to overcome grief, depression and social isolation after the person receiving care has moved into residential care or passed away.

Definitions

Carer

The Act identifies a carer as someone who provides ongoing care and assistance to a person who has a disability (according to the Disability Services Act 1993), or a person who is frail and requires assistance to carry out everyday tasks, or a person with a chronic illness, including a mental illness as defined by the Mental Health Act 1993.

Government agencies

South Australian Government departments and their subsidiary agencies.

Funded organisations

Organisations funded by South Australian Government agencies to provide services to the public.

Applicable organisations

Applicable agencies are those South Australian Government agencies required to report compliance or non-compliance with the Act through their annual reports. They are:

- The Department for Communities and Social Inclusion (DCSI)
- The Department for Health and Ageing (SA Health)
- The Department for Education and Child Development (DECD)
- The Department of Further Education, Employment, Science and Technology (DFEEST)
- The Department of Planning, Transport and Infrastructure (DPTI)
- South Australia Police (SAPOL).

Contact

The Office for Carers is available to provide advice and guidance on this plan.

Office for Carers

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Appendix 1: *South Australian Carers Recognition Act 2005*

Version: 1.2.2010

South Australia

Carers Recognition Act 2005

An Act to provide for the recognition of carers; and for other purposes.

Contents

- 1 Short title
- 3 Objects
- 4 Interpretation
- 5 Meaning of carer
- 6 Obligations of applicable organisations relating to Carers Charter
- 7 Reporting by reporting organisation
- 8 Regulations
- 9 Review of Act

Schedule 1—South Australian Carers Charter

- 1 Carers have choices within their caring role
- 2 Carers health and well-being is critical to the community
- 3 Carers play a critical role in maintaining the fabric of society
- 4 Service providers work in partnership with carers
- 5 Carers in Aboriginal and Torres Strait Islander communities need specific consideration
- 6 All children and young people have the right to enjoy life and reach their potential
- 7 Resources are available to provide timely, appropriate and adequate assistance to carers

Legislative history

The Parliament of South Australia enacts as follows:

1—Short title

This Act may be cited as the *Carers Recognition Act 2005*.

3—Objects

The objects of this Act are—

- (a) to recognise and support carers and their role in the community; and
- (b) to provide for the reporting by organisations of the action taken to reflect the principles of the Carers Charter in the provision of services relevant to carers and the persons they care for.

4—Interpretation

In this Act, unless the contrary intention appears—

applicable organisation means—

- (a) a reporting organisation; or
- (b) a person or body providing relevant services under a contract with a reporting organisation (other than a contract of employment); or
- (c) any other person or body declared by regulation to be an applicable organisation;

carer—see section 5;

Carers Charter means the South Australian Carers Charter set out in Schedule 1;

domestic partner means a person who is a domestic partner within the meaning of the *Family Relationships Act 1975*, whether declared as such under that Act or not;

public sector agency means a public sector agency within the meaning of the *Public Sector Act 2009*;

relevant services means services relevant to carers and the persons they care for;

reporting organisation means—

- (a) an administrative unit of the Public Service that provides relevant services; or
- (b) any other person or body declared by regulation to be a reporting organisation;

spouse—a person is the spouse of another if they are legally married.

5—Meaning of carer

- (1) Subject to this section, a person is a *carer* for the purposes of this Act if he or she is a natural person who provides ongoing care or assistance to—
 - (a) a person who has a disability within the meaning of the *Disability Services Act 1993*; or
 - (b) a person who has a chronic illness, including a mental illness within the meaning of the *Mental Health Act 1993*; or
 - (c) a person who, because of frailty, requires assistance with the carrying out of everyday tasks; or
 - (d) a person of a class prescribed by regulation.
- (2) A person is not a carer if the person provides the care or assistance—
 - (a) under a contract for services or a contract of service; or
 - (b) in the course of doing community work organised by a community organisation within the meaning of the *Volunteers Protection Act 2001*.
- (3) A person is not a carer for the purposes of this Act only because the person—
 - (a) is a spouse, domestic partner, parent or guardian of the person to whom the care or assistance is being provided; or

- (b) provides care to a child who has been placed in the care of that person under the *Children's Protection Act 1993* or any other Act.

6—Obligations of applicable organisations relating to Carers Charter

- (1) An applicable organisation must take all practicable measures to ensure that the organisation and its officers, employees or agents have an awareness and understanding of the Carers Charter and take action to reflect the principles of the Charter in the provision of the relevant services of that organisation.
- (2) Without limiting subsection (1), an applicable organisation that is a public sector agency must consult carers, or persons or bodies that represent carers, in—
 - (a) policy or program development; or
 - (b) strategic or operational planning,relevant to carers and the persons they care for.

7—Reporting by reporting organisation

- (1) A reporting organisation must prepare a report on—
 - (a) the organisation's compliance or non-compliance with section 6; and
 - (b) if a person or body provides relevant services under a contract with the organisation (other than a contract of employment), that person's or body's compliance or non-compliance with section 6.
- (2) The report required by this section must—
 - (a) include information prescribed by regulation; and
 - (b) be incorporated with the annual report of the reporting organisation and relate to the period to which the annual report relates.

8—Regulations

The Governor may make regulations as contemplated by this Act, or as necessary or expedient for the purposes of this Act.

9—Review of Act

- (1) The Minister must, as soon as practicable after the fifth anniversary of the commencement of this Act, carry out a review of the operation and effectiveness of this Act.
- (2) The Minister is to prepare a report based on the review and, as soon as practicable after the report is prepared (and in any event not more than 12 months after the expiration of the 5 year period referred to in subsection (1)), have copies of the report laid before both Houses of Parliament.

Schedule 1—South Australian Carers Charter

1—Carers have choices within their caring role

- (1) Carers should have the same rights, choices and opportunities as other South Australians.

- (2) Carers should be supported by individuals, families, business and community organisations, public institutions and all levels of government in the choices they make in their caring role.

2—Carers health and well-being is critical to the community

- (1) Carers are entitled to enjoy optimum health, social, spiritual and economic well-being and to participate in family, social and community life, employment and education.
- (2) Carers should be supported to balance their caring role with their own needs.

3—Carers play a critical role in maintaining the fabric of society

- (1) Carers should be recognised and valued for their important contribution to the well-being of the Australian community.
- (2) Carers should be recognised for their unique experience and knowledge in the caring role.

4—Service providers work in partnership with carers

- (1) Caring is a social and public responsibility shared by individuals, families, business and community organisations, public institutions and all levels of government.
- (2) Carers should be recognised as individuals with their own needs, within and beyond the caring situations.
- (3) The relationship between a carer and the person they care for needs to be respected and honoured.
- (4) The role of carers must be recognised by including carers in the assessment, planning, delivery and review of services that impact on them and the role of carers.
- (5) The views and needs of carers must be taken into account along with the views, needs and best interests of people receiving care when decisions are made that impact on carers and the role of carers.

5—Carers in Aboriginal and Torres Strait Islander communities need specific consideration

- (1) Aboriginal and Torres Strait Islander carers should be specifically identified and supported within and outside their communities.
- (2) Aboriginal and Torres Strait Islander carers should be supported by business and community organisations, public institutions and all levels of government.
- (3) Aboriginal and Torres Strait Islander carers should be provided with culturally appropriate support services that take into account the history, health and well-being of their extended families.

6—All children and young people have the right to enjoy life and reach their potential

- (1) Children and young people who are carers should be specifically identified and supported by individuals, business and community organisations, public institutions and all levels of government.

- (2) The special needs of children and young people who are carers and the unique barriers to their access to service provision should be recognised and acted on so that, as far as possible, they have the same opportunities as other children and young people in Australia.
- (3) The caring responsibilities of children and young people who are carers should be minimised.

7—Resources are available to provide timely, appropriate and adequate assistance to carers

- (1) Carers need access to a wide range of responsive, affordable services to ensure informed decision making and support for them in their caring situation.
- (2) Carers from culturally and linguistically diverse backgrounds may have complex needs that require appropriate service delivery.
- (3) Carers in rural and remote communities have barriers to service provision.

Legislative history

Notes

- Please note—References in the legislation to other legislation or instruments or to titles of bodies or offices are not automatically updated as part of the program for the revision and publication of legislation and therefore may be obsolete.
- Earlier versions of this Act (historical versions) are listed at the end of the legislative history.
- For further information relating to the Act and subordinate legislation made under the Act see the Index of South Australian Statutes or www.legislation.sa.gov.au.

Principal Act and amendments

New entries appear in bold.

Year	No	Title	Assent	Commencement
2005	55	<i>Carers Recognition Act 2005</i>	3.11.2005	1.12.2005 (<i>Gazette 1.12.2005 p4072</i>)
2006	43	<i>Statutes Amendment (Domestic Partnerz) Act 2006</i>	14.12.2006	Pt 11 (ss 36 & 37)—1.6.2007 (<i>Gazette 26.4.2007 p1352</i>)
2009	84	Statutes Amendment (Public Sector Consequential Amendments) Act 2009	10.12.2009	Pt 24 (s 46)—1.2.2010 (<i>Gazette 28.1.2010 p320</i>)

Provisions amended

New entries appear in bold.

Entries that relate to provisions that have been deleted appear in italics.

Provision	How varied	Commencement
<i>s 2</i>	<i>omitted under Legislation Revision and Publication Act 2002</i>	<i>1.6.2007</i>
s 4		
domestic partner	inserted by 43/2006 s 36(1)	1.6.2007
public sector agency	amended by 84/2009 s 46(1)	1.2.2010
reporting organisation	amended by 84/2009 s 46(2)	1.2.2010
spouse	inserted by 43/2006 s 36(2)	1.6.2007
s 5		
s 5(3)	amended by 43/2006 s 37	1.6.2007

Historical versions

1.6.2007

Appendix 2: *Recommendations from the review of the South Australian Carers Recognition Act 2005*

1. That those applicable organisations that are government departments include in service agreements with organisations that provide services relevant to carers and the persons they care for the requirement for compliance with the Carers Charter. That the service agreement is accompanied by a copy of the Charter and an explanation of the requirements of the *Act*.
2. That applicable organisations conduct regular employee training at all levels of the organisation and within each business unit to ensure each officer, employee and agent has a working knowledge and understanding of the principles of the Carers Charter and the effect those principles should have on the delivery of services.
3. That the Office for Carers continues to educate applicable organisations on the obligation imposed on them to take action to reflect the principles of the Carers Charter.
4. That applicable organisations take measures to ensure each employee reflects the Carers Charter in his or her interaction with carers.
5. That those applicable organisations that are public sector agencies—
 - a. develop policies and guidelines to assist in the identification of carers willing to be involved in policy and program development;
 - b. assist carers to be involved in policy and program development; and
 - c. acknowledge and respect the knowledge and experience carers bring to this role.
6. That reporting organisations require a report from each person or body that provides relevant services under a contract with the organisation as to the compliance of the person or body with the **Act** to enable the reporting organisation to fulfil the requirements of section 7(1)(b) of the *Act*.
7. That regulations are made prescribing matters to be included in a report of a reporting organisation, including requiring reports to specify each business unit within the organisation and the compliance of that unit with the *Act*. The focus of the regulations should be on attaining information in an efficient and consistent manner.
8. That reporting organisations are required to publish the organisation's report on compliance with the *Act* on the organisation's website and make the report available as a hard copy on request.
9. That the current strategies to increase carers' awareness and understanding of the *Act* and to assist carers in identifying themselves as carers to whom the *Act* applies are maintained and that additional strategies are developed, particularly in relation to the culturally and linguistically diverse community and the Aboriginal community.

10. That the *Act* is amended to provide that it be reviewed on a regular basis.
11. That the Office for Carers and carer support organisations continue to inform the community of the definition of *carer* in the *Act* in order to counter the confusion that arises with respect to the term.
12. That a determination is made as to whether foster carers providing ongoing care or assistance to a child with a disability or a chronic illness should fall within the definition of carer for the purposes of the *Act* and ensure the *Act* reflects that determination.
13. That the *Act* is amended to—
 - a. include former carers in the *Act* and in the Carers Charter;
 - b. make it clear that if a care recipient moves to a residential facility that person's carer is still a carer unless he or she has ceased to provide ongoing care or assistance.
14. That the Office for Carers, and carer support organisations, continue to educate and inform key service providers to carers and the people for whom they care of the *Act* and the Charter regardless of whether the service providers are currently bound by the legislation.
15. That if the *Act* is to be expanded to impose an obligation on applicable organisations to consider the principles of the Carers Charter in developing human resource policies, the definition of applicable organisation is expanded to include all administrative units of the Public Service for the purposes of that obligation.
16. That the *Act* is amended to require all government departments to include in their human resource policies a policy for carers employed in the department that reflects the principles of the Carers Charter.
17. That the Charter is amended to include a further principle with respect to former carers. This principle should include recognising—
 - a. that carers require support and assistance in preparing for the time when their caring role will end; and
 - b. that former carers require support and assistance as they transition from the caring role.
18. That consideration is given to all the suggestions received in the course of the review with respect to amendment of the Charter and in particular to including provisions that require service providers to—
 - a. identify carers and provide them with information in relation to the local carer support service and how to contact that service; and
 - b. treat carers with empathy, respect and flexibility.
19. That if lack of compliance with the Carers Charter is to become a ground of complaint, the principles of the Charter are rewritten to be more prescriptive and absolute.

20. That if the grounds of complaint under the *Health and Community Services Complaints Act 2004* are considered appropriate for carers, the *Act* should be amended to include carers as complainants. Alternatively, the *Act* could include lack of compliance with the Carers Charter as a ground of complaint for carers, with amendments to the *Health and Community Services Complaints Act 2004* and the *South Australian Carers Recognition Act 2005* as required.
21. That the *Health and Community Services Complaints Act 2004* is amended to give carers a direct right to lodge a complaint under that *Act* on behalf of a care recipient in relation to the provision of a health or community service to the care recipient.
22. That the *Act* is amended to require applicable organisations to act on, and keep records of, complaints made to the organisation in relation to the failure of the organisation to reflect the principles of the Carers Charter.
23. That regulations are made to prescribe that the annual reports of reporting organisations include the number, nature and manner of resolution of complaints made by carers against the organisation, and any person or body providing relevant services under a contract with the organisation, in relation to the failure of the organisation to reflect the principles of the Carers Charter.

