



**The Royal
Melbourne
Hospital**



**INNER
MELBOURNE
COMMUNITY
LEGAL**

Commonwealth Parliament Inquiry into Long COVID and Repeated COVID Infections

Submission to House Standing Committee on Health, Aged Care and
Sport

18 November 2022

Impact of Long COVID – patients struggling to make ends meet

Submission by Royal Melbourne Hospital (Allied Health Department) and Inner Melbourne Community Legal Inc

Our organisations work together delivering a Health Justice Partnership (HJP). Through our experience with patients and clients at the long COVID clinic at the Royal Melbourne Hospital we have seen how the lack of financial and social support for long COVID patients is a barrier to recovery and wellbeing for our patients and their families. It points to a systemic issue on the failure to address long term illnesses in Australia that needs to be addressed.

Royal Melbourne Allied Health

Allied health practitioners are trained professionals who assist patients to manage physical or mental health, through services that include diagnosis, treatment or rehabilitation. ReCov is an Allied Health led multidisciplinary outpatient rehabilitation service at RMH developed in response to a rising prevalence of Ongoing Symptomatic COVID-19 and Post COVID-19 Condition. In the ReCov clinic Allied Health is represented by Social Work, Occupational Therapy, Physiotherapy, Exercise Physiology, Psychology, Neuropsychology, Dietetics and Music Therapy.

Inner Melbourne Community Legal

Inner Melbourne Community Legal is an independent community legal centre working for social purpose, based in the inner Melbourne area. IMCL provides free, accessible legal help in the form of information, advice, casework and representation. IMCL was a leading innovator of the Health Justice Partnership model, where we provide legal support in the settings where people who need our help most are already accessing services. IMCL has a longstanding Health Justice Partnership with Royal Melbourne Hospital providing access to a range of legal assistance services as well as referral to financial counselling.

Terms of reference

Our submission addresses the issues raised in Terms of Reference two and four:

2. The experience of healthcare services providers supporting patients with long COVID and/or repeated COVID infections;
4. The health, social, educational and economic impacts in Australia on individuals who develop long COVID and/or have repeated COVID infections, their families, and the broader community, including for groups that face a greater risk of serious illness due to factors such as age, existing health conditions, disability and background.

Problem: Long COVID patients have no safety net

Long COVID patients fall through the financial and social support gap. A lot is unknown about the health consequences of long COVID, but it is predicted as many as one in 20 people who have had COVID will experience long COVID. That is, 400,000 people in Australia to date have had long COVID.¹ People who experience long COVID may have reduced ability to work, care for their family and

¹ University of Sydney, 'Long COVID' presents a major health challenge - how can Australia be prepared?' (30 June 2022) Available at: <https://www.sydney.edu.au/news-opinion/news/2022/06/30/long-covid-presents-a-major-health-challenge-how-can-australia-b.html>

participate in everyday activities. Social workers at RMH are advising of patients attesting to financial and social consequences that are not being addressed.

Many financial and social supports are only provided to individuals with long-term permanent disability. Given the unknown length of long COVID and the nature of the disease, people may not be eligible for existing supports..

Royal Melbourne Hospital (RMH) social workers are identifying a growing number of COVID recovery patients who were previously casual workers but are now unable to work, or who are now unemployed after exhausting their leave entitlement as they could not return to work. They may be people who were working and managing a mortgage and families prior to becoming unwell. Some are now reliant on JobSeeker allowance as they are ineligible for Disability Support Pension, others do not meet qualifying test for any income support and are under considerable financial pressure.

Everyday tasks become difficult, yet people with long COVID do not qualify for the services and support available for others in the community with chronic diseases and illness: some are finding it hard to access to childcare services when they are not working, discounted transport, and access to council run meals and cleaning services. Access to social services could make a difference to people's ability to recover by reducing stress and allowing time to rest. The patients attending RMH are only the tip of the iceberg. Long COVID clinics are at capacity in major hospitals across Victoria. This is a situation that will only increase as the numbers of patients struggling to recover from COVID increases.

Many people who are affected by long COVID were those who worked, or had family members who worked, in essential services during the lockdowns. They are healthcare workers, aged care workers, supermarket attendants, warehouse stockist, meat workers, truck drivers, and gig-economy workers. Despite many of these workers contracting COVID in workplace settings, very few have pursued workers compensation claims. In 2020, 974 COVID-19 related WorkCover claims were accepted.² This is only a small fraction of the 28,500 people who caught COVID in Australia that year.³

What we are seeing – the experiences of our patients

The RMH long COVID clinic (**the ReCov Clinic**) is oversubscribed. In the first five months of operating, the clinic saw 250 patients. The waitlist for patients to see an allied health professional is 1-3 months, and for a doctor up to 4 months. With the ReCov clinic opening up referrals directly from General Practitioners (**GPs**), compounded with long COVID clinics closing at the Austin Hospital due to lack of funding certainty⁴, we are concerned demand will only increase.

The ReCov Social Worker sees on average four new or review referrals a week and is always at capacity. Of those seen between April to August 2022, 75 per cent were coming with financial/legal issues.

² SafeWork Australia, 'COVID-19 workers' compensation claims' (13 October 2021). Available at:

<https://www.safeworkaustralia.gov.au/resources-and-publications/c19-workers-compensation-claims>

³ Australian Institute of Health and Welfare. 'The First year of COVID-19 in Australia: direct and indirect health effects' (10 Sept 2021).

Available at: <https://www.aihw.gov.au/reports/burden-of-disease/the-first-year-of-covid-19-in-australia/summary>

⁴ Liam Mannix, 'Long COVID clinics 'inundated' with patients, and doctors can't keep up' (The Sydney Morning Herald, 10 November 2022) available at: <https://www.smh.com.au/national/long-covid-clinics-inundated-with-patients-and-doctors-can-t-cope-20221109-p5bwgq.html>

Jane's story

Jane* was referred to the ReCov clinic by her GP 1/8/22.

Jane lives with her partner and 4-year-old son. She has no support from other informal or formal supports and has become socially isolated as does not have the energy to meet up with friends.

Financially things have been challenging as Jane has had to reduce her work hours as she does not have enough energy to work the hours she did previously. Interest rate rises have meant added financial pressure. She has reached out to the bank to negotiate to reduce re-payments.

Jane has reduced her son's days at child care as she cannot afford it, this means her son is home with her more when she does not have the energy to play with him. This then impacts her mood feeling inadequate as a mother.

Jane's major issues related to COVID long is fatigue/brain fog impacting her ability to reengage in life. This is resulting in significant impacts on finances and mood.

Kate's story

Kate* has been living in rental accommodation with house mates. She had saved up enough for a deposit on an apartment and was going to buy one this year before she got COVID. She worked full time but has not been able to return to full time work since contracting COVID, this has meant a reduction in income that means she has had to draw on her savings for costs of daily living and also medical care due to a lack of available government funded recovery programs. This has pushed the reality of home ownership further away.

*Names have been changed

Recommendations: Help patients recover without losing their homes and financial security

The pandemic is not over. Cases continue to increase after restrictions were lifted, with some health experts warning of a fourth wave.⁵ The World Health Organisation has warned the issue of long COVID will only get worse.

*"We are hearing stories of so many individual tragedies, of people in financial crisis, facing relationship problems, losing their jobs, and falling into depression. Many health workers who risked their lives on the front lines of the pandemic now have this chronic and debilitating condition as a result of an infection acquired in the workplace. They, and millions of others, need our support. The consequences of long COVID are clearly severe and multifaceted."*⁶

World Health Organisation Regional Director for Europe, Dr Hans Henri P. Kluge

⁵ 7news 'States vary on approach to COVID-19 rules amid fourth wave' (15 November 2022)

<https://7news.com.au/news/coronavirus/states-vary-on-approach-to-covid-19-rules-amid-fourth-wave-c-8853747>

⁶ WHO, "At least 17 million people in the WHO European Region experienced long COVID in the first two years of the pandemic; millions may have to live with it for years to come" (13 Sept 2022) Available at: <https://www.who.int/europe/news/item/13-09-2022-at-least-17-million-people-in-the-who-european-region-experienced-long-covid-in-the-first-two-years-of-the-pandemic--millions-may-have-to-live-with-it-for-years-to-come>

Economic recovery should be for everyone. Essential workers and others in our community who have contracted COVID-19 and are still suffering, need financial support to get back on their feet. Effort needs to be made to ensure they do not fall through the gaps and that particular protections are put in place, noting that while many experiencing long COVID will recover given time and capacity to rest – they should not have to lose their home or their financial security in the process.

1. Income support: people with Long COVID need a financial safety net now

Long COVID patients need access to **proper income support to make ends meet until they recover**. The stress of struggling to pay the bills, to pay the rent or mortgage, only makes recovery more difficult.

- a. Workers eligible to make a workers' compensation claim need support to access help;
- b. People who are not eligible to access workers' compensation need a **special COVID income support payment** to make ends meet until they recover; and,
- c. More funding and increased access is needed for people to receive social work support, legal support, and financial counsellors assistance early to elevate the financial and mental stress that can be a consequence of long COVID.

2. Social support: Help for everyday tasks

Our understanding of long COVID is still limited, and it is not known whether it causes permanent disability. This means many social supports are not available to patients. The fatigue and need to rest present challenges such as travelling to appointments, caring for themselves and children. Additionally, the fear of further infection means many patients are socially isolated.

a. Long COVID Health Care Card

Because we do not yet know the extent of long COVID and how long it may impact people, a special health care card category should be established, which can be provided to people for the duration of their illness.

People experiencing long COVID should not be forced to exhaust their financial reserves before they can access any supports. We suggest the health care card be based on the disability a person experiences irrespective of whether they are receiving an income support payment from Services Australia.

The Long COVID Health Care Card should allow for the synchronise of government and local services to support people experiencing critical medical issues, such as: access to reduced rate medication, discount on essential service bills, and local council home and community-based support programs.

The health care card could be used as means of identifying access to other services that we have identified as particular need for those with long COVID, including childcare and transport (recommendation below).

b. **Be exempt from activity test for childcare subsidy**

For many people experiencing long COVID, being able to care for young children is difficult. Clarify that the exemption available for people with disability or impairment is available to people with long COVID diagnosis.⁷

c. **Access to taxi vouchers, Multi-purpose Taxi Program or Mobility Allowance**

Transport presents a particular trouble for some people experiencing long COVID. The fatigue can make driving dangerous, public transport is not always available and if it is, creates fear of re-infection.

Providing taxi vouchers to people experiencing would assist people with long COVID to attend medical and other support services safely. Alternatively, agreement could be made to allow people with long COVID to access the Victorian Multi-purpose Taxi Program and equivalent programs in other states.

Patients receiving treatment from long COVID clinics should also be considered eligible to access the Mobility Allowance payment, for the purposes of attending medical treatment, work or study⁸.

⁷ See Family Services Guide (7 November 2022), section 3.5.2.20 CCS – activity test exemption & 1.1.80 Disabled Persons (CCS). Available at: <https://guides.dss.gov.au/family-assistance-guide/3/5/2/20>

⁸ See Social Security Guide (7 November 2022), section 1.2.5.40 – Mobility Allowance description – available at <https://guides.dss.gov.au/social-security-guide/1/2/5/40>