



Action for More Independence & Dignity in Accommodation

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Advocacy, Self Advocacy, Rights, Accessibility, & Community Living for People with a Disability

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Rooming House Standards Consultation

AMIDA (Action for More Independence & Dignity in Accommodation) is an independent advocacy organisation which advocates for good housing for people with disability. Further, people with disability have a right to good quality housing which is accessible, affordable and non-institutional. We provide advocacy to individuals and advocate for change in systems which prevent people from achieving good housing.

AMIDA is interested in providing input to this consultation, with the regulations coming into effect on 26 Feb 2023.

AMIDA endorses the proposed changes that have been outlined in this consultation however note that some areas remain lacking. AMIDA's casework over the last two decades evidentially displays the need for :-

- Increased security on site, both internal building and external grounds to be well lit, CCTV cameras to monitor the safety of residents and trigger a response from staff of the facility and police.
- Protections for those individuals escaping family, domestic or personal violence in that they receive sensitive and respectful behaviour of staff with particular attention to the privacy of their address and personal information, including mail kept in a safe, locked, location prior to collection. Informing staff of relevant safety plan information, alerting staff to the risks to safety and requesting particular attention to be paid to any unusual or suspicious activity, to contact police if required. Anonymity of residents, links to domestic violence services made available to those who request and included in welcome packs. Information about the 1800 number, local community legal centers emergency numbers for contact. Housing services information to assist residents in finding permanent housing.
- Create a welcome pack for all residents which clearly sets out all rights and responsibilities and general information.

- Protections against violence from other residents, perceived or actual bullying from staff, violence from general public accessing the buildings through security that is not regulated (eg. residents propping security doors open for long periods of time for their friends or family to access), residents who have intervention orders are the most at risk in lapse of security. Violence on a wide scale is prevalent in rooming house settings, not just a few cases at different houses.
- Surveillance against residents being exposed to violence and stolen items by other residents or the public when they access facilities such as the laundry areas or kitchen.
- Cooling will need to be considered, alongside the need for heating, for people with disability whose condition is made worse by temperature extremes or are unable to control their own temperature.
- Accessibility with pathways leading up to the residence, accessible entrance and exit points, structural soundness imperative, due to the cases we have presently and historically that lend themselves to requiring modifications to accommodate their disabilities. It has been apparent that people with disabilities living in rooming house settings are without rights to accessibility. EG case study below.
- Mould and dampness to be treated as an urgent repair as it is now in the RTA, due to an increasing amount of cases AMIDA is seeing with bio-toxin involvement leading to ill health, chronic inflammatory response syndrome and other respiratory conditions.
- Increase the powers of regulatory bodies, Local Councils, the Department of Health and Consumer Affairs Victoria to ensure orders are followed. AMIDA has noted orders from VCAT have been disregarded, during the pandemic breaches of public health regulations were not taken seriously and recommendations from the Department of Health and Local Councils was ignored. Some VCAT members do not have an understanding of the vulnerability of residents or the extreme circumstances and living conditions some people face while living in rooming houses.
- Complaints systems not to be the only compliance mechanism relied on by regulatory bodies. AMIDA has witnessed numerous scenarios where residents have been afraid to make complaints due to the fear of retribution and eviction. Anonymous complaints accepted to protect residents from targeting.
- Unannounced inspections made by Consumer Affairs Victoria to do reviews of rooming houses, in order to capture a true picture of the state of buildings and living conditions.
- Rollout of education programs to residents, staff of rooming houses, the general public and interested parties to ensure rights and responsibilities are outlined clearly.

- Easy English version, available in multiple languages and accessible formats for people with disability and wider community, eg. diagrams, auslan interpretation, accessible for vision impaired.
- Establishment of a resident's committee to meet regularly

The RIS also discussed the power imbalance between the rental providers and residents of rooming houses. AMIDA has noted statements from residents who describe an "Us and Them" type attitude adopted by staff and management of some rooming house organisations. AMIDA strongly recommends training for rooming house staff about the need of people with disability. Training that is humane and run by people with disabilities.

The RIS states "Renters rights groups, however, have recent survey data which indicates a sizeable number of residents describe their rooming housing living conditions in a negative way. Further, advocacy organisations and rooming house residents provided submissions to the Inquiry into homelessness in Victoria indicating that many rooming houses continue to pose risks to resident's safety and welfare."

The Regulatory Impact Statement (RIS) discusses residents often being vulnerable members of the community. People with disabilities also can become homeless at any time. It is not always a guarantee if a person with disability has access to the NDIS that they will have access to Specialist Disability Accommodation (SDA). People with disabilities in rooming house settings deserve to have their rights upheld as in any setting. This is often not the case. AMIDA is aware that congregate living arrangements often result in instances of violence, abuse, neglect and exploitation. In Australia there has recently been a Royal Commission into Violence, Abuse, Neglect and Exploitation, with stories from people with disability living in a wide range of environments, including rooming houses. Recommendations from this Royal Commission will be forthcoming.

One of the most notorious complaints from residents AMIDA has assisted is the amount of time taken for them to access safe, affordable, accessible housing from the time it becomes apparent, often urgent that they need to move, for a variety of reasons. This also relies on the social housing sector having adequate, accessible housing stock, which there is a severe shortage of, particularly over the last decade. AMIDA has been advocating for more stock to the Victorian government over the long term.

Case Study - Being placed on the 3rd floor of a rooming house for a person needing a wheelchair – move the resident to ground floor, (this was not considered by rooming house provider) install a lift.
Accessibility and modifications

A relevant case study is a case AMIDA has been working on since Jul 2019, a gentleman named Andy (not his real name) who sustained an injury to his leg while service in the Australian Defence Force, was housed in a rooming house. Since being housed his injuries worsened and he had a diagnosis of nerve damage in his foot where he is unable to weight bear. He relies on a wheelchair for mobility

however his residence has 3 flights of stairs from the entrance, there is no lift and no other way of accessing his room other than the stairs.

His room is too small to allow for a wheelchair turning circle and he instead uses crutches. The crutches are problematic however due to his repeatedly knocking the injury and delaying healing. He has been hospitalized for surgery on his injuries and the hospital was hesitant to discharge him home to inaccessible housing. There was no alternative and since being discharged his injuries have worsened.

He has reported to AMIDA that he may have to have an amputation of his foot if the condition deteriorates further. He has attempted to lower the wheelchair down flights of stairs with a rope in order to exit the building. There was a high risk of falling, incurring further injury or death. AMIDA advocated on his behalf to the Office of Housing and the MP for Housing. This has resulted in his being prioritized for Transfer to an accessible property however there is a further delay in the transfer due to lack of accessible housing in Victoria. AMIDA advocated to the Premier of Victoria and was referred back to the Office of Housing. AMIDA provided Andy with information about his right to make a complaint to the Victorian Equal Opportunity and Human Rights Commission (VEOHRC) and assisted Andy to lodge a complaint on his behalf. AMIDA advocate worked with VEOHRC staff to make known his position under the Equal Opportunity Act. AMIDA then advocated to senior policy staff of DHHS, referred through the MP for Housing. These staff made contact with Andy and a temporary offer of an accessible, one-bedroom house was made to Andy who accepted the offer and moved into the premises as soon as possible. He was also able to maintain his position on the Priority Transfer list to move closer to his family who live some distance away in Melbourne.